Supplementary Table 1.

I. Demographics

1. Age: (   ) years
2. Gender: M/F
3. Number of years since completing fellowship training:
   a) Currently in fellowship training
   b) Up to 5 years since completion
   c) 6-10 years since completion
   d) 11-15 years since completion
   e) >15 years since completion
4. Present practice settings:
   a) Academic
   b) Military
   c) Private
   d) Other
5. Number of endometrial cancer cases managed in your center
   a) Less than 20
   b) 21-40
   c) 41-80
   d) 81-100
   e) 101-150
   f) More than 150

II. Practice patterns for surgery

Scenario 1. A 55 year old woman is diagnosed with endometrioid adenocarcinoma of the uterus by endometrial biopsy performed for evaluation of postmenopausal bleeding. The endometrial biopsy report reveals a grade I endometrioid adenocarcinoma of the uterus. She had no evidence of extrauterine disease on preoperative imaging study.

1. What is your preference for the mode of surgery in this setting?
   a) Laparotomy
   b) Laparoscopy
   c) Robot
   d) Other: (   )
Scenario 2A. A 55 year old woman is diagnosed with endometrioid adenocarcinoma of the uterus by endometrial biopsy. She undergoes TAH/BSO without lymphadenectomy by a general gynecologist. The final pathology report reveals a grade I endometrioid adenocarcinoma of the uterus, less than half myometrial invasion, no adnexal spread, and no LVSI. CT shows no abnormal findings.

2. Do you normally recommend additional therapy in this setting?
   a) Yes
   b) No → Skip question 4.

3. If yes, indication your preference for additional therapy.
   a) Laparoscopy for lymph node dissection
   b) Laparotomy for lymph node dissection
   c) Vaginal brachytherapy
   d) WPRT (Whole pelvic radiation therapy)
   e) Chemotherapy
   f) Other: (                           )

Scenario 2B. In the original scenario above, patient’s final pathology report reveals a grade 3 endometrioid adenocarcinoma of the uterus, less than half myometrial invasion, no adnexal spread, and no LVSI.

Respond using scenario 2B changes

4. Do you normally recommend additional therapy in this setting?
   a) Yes
   b) No → Skip question 6.
   c)

5. If yes, indication your preference for additional therapy.
   a) Laparoscopy for lymph node dissection
   b) Laparotomy for lymph node dissection
   c) Vaginal brachytherapy
   d) WPRT (Whole pelvic radiation therapy)
   e) Chemotherapy
   f) Other: (                           )
Scenario 3A. A 55 year old woman is diagnosed with endometrioid adenocarcinoma of the uterus by endometrial biopsy. The endometrial biopsy report reveals a grade 1 endometrioid adenocarcinoma of the uterus. Preoperative MRI suggests less than half myometrial invasion and Preoperative CA-125 was within normal range.

6. What is your preference for the extent of surgery in this setting?
   a) SH (simple hysterectomy)/ BSO (bilateral salpingo-oophorectomy)
   b) SH / BSO + sentinel biopsy
   c) SH / BSO + selective lymphadenectomy with frozen results
   d) SH / BSO + PLND
   e) SH / BSO + PLND/ PALND (up to IMA level)
   f) SH / BSO + PLND/ PALND (up to renal vein level)
   g) Other: (                          )

Scenario 3B. In the original scenario above (3A), Preoperative MRI suggests more than half myometrial invasion.

Respond using scenario 3B changes

7. What is your preference for the extent of surgery in this setting?
   a) SH (simple hysterectomy)/ BSO (bilateral salpingo-oophorectomy)
   b) SH / BSO + sentinel biopsy
   c) SH / BSO + selective lymphadenectomy with frozen results
   d) SH / BSO + PLND
   e) SH / BSO + PLND/ PALND (up to IMA level)
   f) SH / BSO + PLND/ PALND (up to renal vein level)
   g) Other: (                          )

Scenario 3C. In the original scenario above (3A), the patient's endometrial biopsy report reveals a grade 3 endometrioid adenocarcinoma. Preoperative MRI suggests more than half myometrial invasion.

Respond using scenario 3C changes

8. What is your preference for the extent of surgery in this setting?
   a) SH (simple hysterectomy)/ BSO (bilateral salpingo-oophorectomy)
   b) SH / BSO + sentinel biopsy
   c) SH / BSO + selective lymphadenectomy with frozen results
   d) SH / BSO + PLND
   e) SH / BSO + PLND/ PALND (up to IMA level)
   f) SH / BSO + PLND/ PALND (up to renal vein level)
   g) Other: (                          )
III. Practice pattern for adjuvant therapy

9. Please fill-up the table about adjuvant therapy by pathologic findings in completely staged patients with endometrioid endometrial adenocarcinoma.

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<th>LVS1</th>
<th>Histological grade</th>
<th>FIGO surgical stage</th>
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<td>3</td>
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</table>

Option: 1) observation, 2) vaginal brachytherapy, 3) Whole pelvic radiation therapy (WPRT), 4) vaginal brachytherapy+WPRT, 5) chemotherapy, 6) radiation+chemotherapy, 7) other: ( )

Scenario 4. A 55 year old woman is diagnosed with endometrioid adenocarcinoma of the uterus by endometrial biopsy. She undergoes a complete staging operation by a gynecologic oncologist. The final pathology report reveals a grade 2 endometrioid adenocarcinoma of the uterus, less than half myometrial invasion, no serosal involvement or adnexal spread, positive cervical involvement, negative pelvic lymph nodes, and negative peritoneal cytologic washings.

10. Do you normally recommend adjuvant therapy in this setting?
   a) Yes
   b) No → skip question 11.

11. If yes, indicate your preference for adjuvant therapy
   a) Chemotherapy (please specify treatment regimens)
   b) Vaginal brachytherapy
   c) WPRT
   d) Vaginal brachytherapy + WPRT
   e) Chemotherapy + Radiation (please specify chemotherapy regimens and radiation types)
   f) Hormone therapy (please specify treatment regimens)
Scenario 5. A 55 year old woman is diagnosed with endometrioid adenocarcinoma of the uterus by endometrial biopsy. She undergoes a complete staging operation by a gynecologic oncologist. The final pathology report reveals a grade 1 endometrioid adenocarcinoma of the uterus, less than half myometrial invasion, no serosal involvement or adnexal spread, negative pelvic lymph nodes, and positive peritoneal cytologic washings.

12. Do you normally recommend adjuvant therapy in this setting?
   a) Yes
   b) No → skip question 13.

13. If yes, indicate your preference for adjuvant therapy
   a) Chemotherapy (please specify treatment regimens)
   b) Vaginal brachytherapy
   c) WPRT
   d) Vaginal brachytherapy + WPRT
   e) Chemotherapy + Radiation (please specify chemotherapy regimens and radiation types)
   f) Hormone therapy (please specify treatment regimens)

Scenario 6. A 55 year old woman is diagnosed with endometrioid adenocarcinoma of the uterus by endometrial biopsy. She undergoes a complete staging operation by a gynecologic oncologist. The final pathology reveals grade 2 endometrioid adenocarcinoma of the uterus, more than half myometrial invasion, no serosal involvement or adnexal spread, positive pelvic lymph nodes (4/20, metastatic node/retrieved nodes), and negative peritoneal cytologic washings.

14. Do you normally recommend adjuvant therapy in this setting?
   a) Yes
   b) No → skip question 15.

15. If yes, indicate your preference for adjuvant therapy
   a) Chemotherapy (please specify treatment regimens)
   b) Vaginal brachytherapy
   c) WPRT
   d) Vaginal brachytherapy + WPRT
   e) Chemotherapy + Radiation (please specify chemotherapy regimens and radiation types)
   f) Hormone therapy (please specify treatment regimens)
Scenario 7. A 55 year old woman is diagnosed with endometrioid adenocarcinoma of the uterus by endometrial biopsy. She undergoes a complete staging operation by a gynecologic oncologist. The final pathology reveals grade 1 endometrioid adenocarcinoma of the uterus, less than half myometrial invasion, microscopic metastasis in the right ovary, negative pelvic lymph nodes.

16. Do you normally recommend adjuvant therapy in this setting?  
   a) Yes  
   b) No → skip question 15.

17. If yes, indicate your preference for adjuvant therapy  
   a) Chemotherapy (please specify treatment regimens)  
   b) Vaginal brachytherapy  
   c) WPRT  
   d) Vaginal brachytherapy + WPRT  
   e) Chemotherapy + Radiation (please specify chemotherapy regimens and radiation types)  
   f) Hormone therapy (please specify treatment regimens)

Scenario 8: What would be your choice if you are the operator performing the endometrial cancer surgery? Please answer the questions below.

18. Do you normally perform tubal clipping before the surgery?  
   a) Yes  
   b) No

19. Do you normally perform washing cytology?  
   a) Yes  
   b) No

20. Do you normally use uterine elevator?  
   a) Yes  
   b) No