

Thank you for taking part in this short survey. Please answer the following questions by selecting the answers that best represent your opinions or preferences.

**1. How much of the information in the decision aid did you read and view?**

- All of it
- Most of it
- Some of it

**2. Why did you view the decision aid?**

- I have been diagnosed with localized prostate cancer
- I am a survivor of prostate cancer
- I am considering screening for prostate cancer
- I know someone with localized prostate cancer
- I am a physician or other health professional
- Other; Please specify:

**3. Which of the following changes have resulted from your use of the decision aid today?  
[select ALL that apply]**

- Increased my knowledge of the symptoms of prostate cancer and how it is diagnosed
- Increased my awareness of the types of treatments available in treating prostate cancer
- Helped clarify the priorities that are important to me in deciding on treatment options
- Changed what I will discuss with my doctor, such as my concerns, preferences, or questions
- Changed my decision on whether I will pursue a treatment or watch my condition (active surveillance) at the present time
- No change
- Other; Please specify:

**4. The instructions for viewing the decision aid were clear.**

- Strongly agree
- Somewhat agree
- Neither agree nor disagree
- Somewhat disagree
- Strongly disagree

**5. The length of the decision aid was:**

- Way too long
- Somewhat too long
- About right
- Somewhat too brief
- Way too brief

**6. The information was easy to understand.**

- Strongly agree
- Somewhat agree
- Neither agree nor disagree
- Somewhat disagree
- Strongly disagree

**7. It was easy to navigate through the decision aid.**

- Strongly agree
- Somewhat agree
- Neither agree nor disagree
- Somewhat disagree
- Strongly disagree

**8. In considering the design of the decision aid, which approach do you think would be more effective?**

- Allow users to skip to content of interest
- Require users to view the content in the order it was presented
- [Unsure]

**9. Concerning active surveillance (monitoring symptoms and diseases) and immediate treatment, the decision aid:**

- Favored active surveillance (monitoring symptoms and diseases)
- Was balanced
- Favored immediate treatment
- [Unsure]

**10. Concerning the immediate treatment options, the decision aid:**

- Favored surgical options
- Was balanced
- Favored radiation options
- [Unsure]

**11. How would you rate the usefulness of the "Numbers You May Know" page (where you can enter your PSA, Gleason Score, and T stage) in helping a man make a decision about treatment options for prostate cancer?**

- Extremely useful
- Very useful
- Somewhat useful
- Not very useful
- [I did not see this]

**Numbers You May Know**

Your numbers are part of the conversation with your doctor.

Your PSA number, Gleason Score, and T stage will help you and your doctor choose the next best step in controlling or destroying your cancer. If you would like to have these numbers included in the information summary at the end of the decision aid, enter them below. If you do not know these numbers, do not worry. You can talk to your doctor later to find out this information. This decision aid will help you understand your options even without this information.

























If you know it, enter your PSA number here:

If you know it, enter your Gleason Score here:

If you know it, enter your T stage here:

**12. How would you rate the usefulness of the summary table explaining what to expect, benefits and risks in helping a man make a decision about treatment options for prostate cancer?**

- Extremely useful
- Very useful
- Somewhat useful
- Not very useful
- [I did not see this]

Immediate treatment	What to expect during treatment	Risks and harms of treatment	What does research tell us?
<b>Surgery (radical prostatectomy, or RP)</b>			
Open surgery (radical retropubic or perineal prostatectomy)			
Laparoscopic RP (LP)			
Robot-assisted RP (RARP)			
<b>Radiation</b>			
3D conformal radiation therapy (3DRT)			
Intensity-modulated radiation therapy (IMRT)			
Proton radiation therapy			
Brachytherapy			
<b>Other</b>			
Cryoablation (aka cryosurgery)			

**13. How would you rate the usefulness of the "Deciding What Is Best For You" page (where you are asked to select the issues that are most important to you) in helping a man make a decision about prostate cancer treatment options?**

- Extremely useful
- Very useful
- Somewhat useful
- Not very useful
- [I did not see this]

## Deciding What Is Best for You

You have time to think about your choices and to talk with your doctor and your loved ones.

### 1. Ask questions

Asking your doctor the right questions can help you and your doctor decide which option is right for you. Below are some questions you may want to ask your doctor:

### 2. Tell your doctor what you are concerned about

It is okay to be concerned about the decisions you have to make because of your prostate cancer. Here are some examples of concerns you might have:

### 3. Tell your doctor about your preferences

You may feel uncomfortable about choosing not to treat your cancer right away, or you may have specific reasons for choosing active surveillance. If you choose immediate treatment, you may want to avoid certain side effects, keep certain habits or activities, or get certain results. Here are some examples of things you might tell your doctor:

**14. What did you think about the rotating quotes from men about prostate cancer and treatment?**

- I liked this feature
- No opinion
- I did not like this feature
- [I did not see this]



**15. How would you rate the overall look of the decision aid?**

- Excellent
- Very good
- Good
- Fair
- Poor

**16. Would you recommend the decision aid to someone making a decision about treatment options for localized prostate cancer?**

- Yes
- No
- [Unsure]

**17. How would you rate the decision aid as a whole?**

- Excellent
- Very good
- Good
- Fair
- Poor

**18. Do you have any comments or suggestions?**



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Public reporting burden for this collection of information is estimated to average 5 minutes per response, the estimated time required to complete the survey. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: AHRQ Reports Clearance Officer Attention: PRA, Paperwork Reduction Project (0935-XXXX) AHRQ, 540 Gaither Road, Room #5036, Rockville, MD 20850.