**Society of Genitourinary Reconstructive Surgeons Questionnaire**

1. Do you manage acute pelvic fracture urethral injuries in your clinical practice?

☐ Yes

☐ No

2. What is the trauma level of your primary practice setting?

 ☐ Level I

 ☐ Level II

 ☐ Level III

 ☐ Level IV

 ☐ Level V

 ☐ Other

3. Over the course of a year, how many pelvic fracture urethral injuries do you manage?

☐ 0

 ☐ Between 1 - 5

 ☐ Between 6 - 10

 ☐ More than 10

4. How long ago did you complete your

urologic surgery training?

 ☐ Less than 5 years

☐ Between 5 – 10 years

☐ More than 10 years

5. Do you have orthopaedic surgeons who specialize in the management of traumatic pelvic injuries?

☐ Yes

☐ No

6. In general, what is your preference for management of pelvic fracture urethral injuries in stable patients?

☐ Endoscopic urethral realignment with urethral catheter placement

☐ Suprapubic catheter placement with delayed posterior urethroplasty

7. For patients who develop post-injury urethral stenosis, do you perform posterior urethroplasties at your institution?

☐ Yes

☐ No

8. Does the operative plan of orthopaedic surgery (i.e., external fixation versus internal fixation) affect your plan for managing the acute urethral injury with either endoscopic realignment or a suprapubic catheter?

 ☐ Yes

☐ No

9. In your experience, do you feel that the presence of a suprapubic tube increases the risk of post-operative infectious complications following internal fixation of traumatic pelvic fractures?

 ☐ Yes

☐ No

10. In your experience, do you feel that orthopaedic surgeons are less inclined to proceed with internal fixation of pelvic injuries in the setting of a suprapubic catheter?

☐ Yes

☐ No

11. Based on your experience, which management strategy do you believe is preferred by orthopaedic surgeons managing patients with unstable pelvic fractures and associated urethral injuries?

☐ Suprapubic tube placement (any location) without urethral intervention

☐ Suprapubic tube placement with exit site tunneled cephalad and lateral, away from surgical field

☐ Endoscopic realignment of urethra over a urethral catheter without a suprapubic catheter

☐ Other