

Supplementary Table 1. Questionnaire Distributed Among the Acting Anaesthetists

A simple questionnaire on the insertion of double-lumen endobronchial tube (DLT)

1. Which of following is the best description of your knowledge or attitude for certain clinical recommendations to select the size or depth of DLT based on sex or height? (ex. *J Cardiothorac Vasc Anesth* 2003;17:287)

- I know those suggestions, but I do not employ those suggestions for my clinical practices.
- I know those suggestions, and I apply those suggestions to my clinical practices.
- I do not know those suggestions.

2. Which of the following is the best description of the way you select the size of DLT?

- I select the size of DLT arbitrarily, based on patient's height and/or weight (empirical method)
 - I select the size of DLT based on clinical suggestions from literatures (reference-based method)
 - I select the size of DLT in other way (Please describe your practice freely below).
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3. Which of the following is the best description of the way you decide the depth of DLT?

- I advance the DLT until a moderate resistance is encountered, then confirm with other methods.
 - I advance the DLT to the predicted level, based on literatures.
 - I select the depth of DLT in other way (Please describe your practice freely below).
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4. Which of the following is the best description of your way to confirm the position of the DLT?

- I preferentially auscultate bilateral chest sound with alternative clamping each lumen of DLT. Then, the FOB is done for final confirmation.
 - I preferentially use the FOB. Auscultation is just used for symmetrical breath sound.
 - I exclusively use the FOB.
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