Obstetrics & Gynecology Science

Soo Rim Kim, et al. Anterior and posterior repair in Korea

Supplementary File 1. The survey for current technique of surgery for anterior and posterior vaginal wall prolapse in Korea

Part I. General information	☐ Horizontal mattress interrupted ☐ Pulse string
1. How old are you?	☐ Continuous locking
2. What is your gender?	☐ Continuous non-locking
☐ Male ☐ Female	
3. What is your subspecialty?	5. Do you occasionally use a mesh?
☐ Maternal-Fetal Medicine ☐ Gynecologic oncology	☐ Yes ☐ No
☐ Reproductive endocrinology ☐ Urogynecology ☐ None	
4. Did you take a separate course for fellowship for pelvic organ	Part III. Current technique of surgery for Posterior vaginal wall
prolapse surgery?	prolapse
☐ Yes ☐ No	pp.s
5. How long have you performed your own pelvic organ prolapse	1. What kind of suture material do you usually use for the plication
surgery?	of fibromuscular layer?
☐ Less than 5 years ☐ 6-10 years ☐ 11-15 years	☐ Rapid absorbable only (Vicryl®, Polysorb®, etc.)
☐ 16-20 years ☐ More than 20 years	☐ Delayed absorbable only (PDS II®, Monosyn®, etc.)
6. How many prolapse surgeries do you perform per year?	□ Non-absorbable only (Prolene®, Ethibond®, Silk, etc.)
☐ Less than 20 cases ☐ 21-50 cases ☐ 51-100 cases	Rapid absorbable and delayed absorbable
☐ More than 100 cases	☐ Rapid absorbable and non-absorbable
I More than 100 cases	☐ Delayed absorbable and non-absorbable
Part II. Current technique of surgery for Anterior vaginal wall	Delayed absorbable and non-absorbable
prolapse	2. What kind of suture method do you usually use for the plication
protapse	of fibromuscular layer?
1. What kind of suture material do you usually use for the plication	☐ Simple interrupted
of fibromuscular layer?	☐ Horizontal mattress interrupted
☐ Rapid absorbable only (Vicryl®, Polysorb®, etc.)	
☐ Delayed absorbable only (PDS II®, Monosyn®, etc.)	☐ Pulse string ☐ Continuous locking
☐ Delayed absorbable only (PDS if , Monosyff , etc.) ☐ Non-absorbable only (Prolene®, Ethibond®, Silk, etc.)	
	☐ Continuous non-locking
☐ Rapid absorbable and delayed absorbable	2. What him does not one masterial do you would not for the placement
☐ Rapid absorbable and non-absorbable	3. What kind of suture material do you usually use for the closure of
☐ Delayed absorbable and non-absorbable	mucosal layer?
	Rapid absorbable only (Vicryl®, Polysorb®, etc.)
2. What kind of suture method do you usually use for the plication	☐ Delayed absorbable only (PDS II®, Monosyn®, etc.)
of fibromuscular layer?	☐ Non-absorbable only (Prolene®, Ethibond®, Silk, etc.)
☐ Simple interrupted	Rapid absorbable and delayed absorbable
☐ Horizontal mattress interrupted	Rapid absorbable and non-absorbable
☐ Pulse string	☐ Delayed absorbable and non-absorbable
☐ Continuous locking	
☐ Continuous non-locking	4. What kind of suture method do you usually use for the closure of
	mucosal layer?
3. What kind of suture material do you usually use when suture for	☐ Simple interrupted
the closure of mucosal layer?	☐ Horizontal mattress interrupted
☐ Rapid absorbable only (Vicryl®, Polysorb®, etc.)	☐ Pulse string
☐ Delayed absorbable only (PDS II®, Monosyn®, etc.)	☐ Continuous locking
☐ Non-absorbable only (Prolene®, Ethibond®, Silk, etc.)	☐ Continuous non-locking
☐ Rapid absorbable and delayed absorbable	
☐ Rapid absorbable and non-absorbable	5. Do you occasionally use a mesh?
☐ Delayed absorbable and non-absorbable	☐ Yes ☐ No
4. What kind of suture method do you usually use for the closure of	6. When do you perform a concomitant perineorrhaphy?
mucosal layer?	☐ Always ☐ Only in cases with a perineal defect
☐ Simple interrupted	