

APPENDIX

Part 1. Basic personal details

Age:	
University:	
What gender do you identify with:	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-binary <input type="checkbox"/> Prefer not to answer
Ethnicity	<input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> White <input type="checkbox"/> Indigenous <input type="checkbox"/> Other
Do you attend a Quebec medical school?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Year in Medical school	<p><i>If answered yes to Quebec medical school:</i></p> <input type="checkbox"/> Premed (if in applicable program in Québec) <input type="checkbox"/> Preclinic (Year 1) <input type="checkbox"/> Preclinic (Year 2) <input type="checkbox"/> Clerkship 1 <input type="checkbox"/> Final year clerkship <input type="checkbox"/> Graduate <input type="checkbox"/> Other, please specify
	<p><i>If answered no to Quebec medical school:</i></p> <input type="checkbox"/> Preclinic (Year 1) <input type="checkbox"/> Preclinic (Year 2) <input type="checkbox"/> Clerkship 1 <input type="checkbox"/> Clerkship 2 (Final year) <input type="checkbox"/> Graduate <input type="checkbox"/> Other, please specify
Previous education	<input type="checkbox"/> CEGEP <input type="checkbox"/> Bachelors <input type="checkbox"/> Masters <input type="checkbox"/> PhD <input type="checkbox"/> Other

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Part 2: Interest and Exposure in Urology

Do you currently have an interest in pursuing a surgical residency?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
Have you considered pursuing urology as a specialty?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
How familiar are you with the field of urology	<input type="checkbox"/> 1 – Not at all familiar <input type="checkbox"/> 2 – A little familiar <input type="checkbox"/> 3 – Somewhat familiar <input type="checkbox"/> 4 – Familiar <input type="checkbox"/> 5 – Very familiar
Did you know that urology is a surgical specialty	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
The field of urology includes (check all that apply)	<input type="checkbox"/> Genitourinary cancers <input type="checkbox"/> Kidney stones <input type="checkbox"/> Benign prostatic hyperplasia <input type="checkbox"/> Male fertility <input type="checkbox"/> Pelvic floor medicine <input type="checkbox"/> Urinary incontinence <input type="checkbox"/> Urinary tract infections <input type="checkbox"/> Renal transplantation
Urologist clinical activities include (check all that apply)	<input type="checkbox"/> Outpatient clinic <input type="checkbox"/> Managing admitted patients <input type="checkbox"/> Endoscopic procedures and surgery <input type="checkbox"/> Laparoscopic/Minimally invasive surgery <input type="checkbox"/> Open surgery

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<p>In your pre-clinical curriculum, do you have any formal exposure to urology (ex: block dedicated to urology, lectures, PBL cases, clinical exposure, etc.)</p>	<p><input type="checkbox"/> Yes, please specify <input type="checkbox"/> No <input type="checkbox"/> Unsure</p>
<p>At the time of completing this survey, what kind of exposure to urology have you had?</p>	<p><input type="checkbox"/> Pre-clinical courses <input type="checkbox"/> Shadowing <input type="checkbox"/> Obligatory clerkship rotation <input type="checkbox"/> Elective rotation <input type="checkbox"/> Research projects <input type="checkbox"/> Conferences <input type="checkbox"/> No exposure</p>
<p>If applicable, when is the urology block generally taught?</p>	<p>Autumn premed Winter premed Autumn Year 1 Winter Year 1 Autumn Year 2 Winter Year 2 N/A</p>
<p>During clerkship, do you have mandatory rotations in urology, and if so how many weeks</p>	<p><input type="checkbox"/> Yes, 1 week or less <input type="checkbox"/> Yes, 2 weeks <input type="checkbox"/> Yes, 3 weeks <input type="checkbox"/> Yes, 4 weeks or more <input type="checkbox"/> No <input type="checkbox"/> Unsure</p>
<p>Do you feel like you have adequate exposure to urology in your</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure</p>

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<p>medical curriculum</p>	
<p>If no, what specific topics do you wish you had more exposure to?</p>	<p><input type="checkbox"/> Endourology – kidney stone management</p> <p><input type="checkbox"/> Uro-oncology</p> <p><input type="checkbox"/> Uro-gynecology</p> <p><input type="checkbox"/> Male sexual health (incl: fertility, erectile dysfunction, etc.)</p> <p><input type="checkbox"/> Neurourology</p> <p><input type="checkbox"/> Functional and reconstructive urology (urethral stenosis, incontinence, etc.)</p>

Part 3: Factors influencing choosing urology

The following factors will be assessed on a likert scale from:

- *Strongly negative*
- *Slightly negative*
- *Neutral*
- *Slightly positive*
- *Strongly positive*
- *N/A*

1. Exposure in preclinical coursework
2. Exposure in clerkship
3. Previous shadowing opportunity in urology
4. Competitive application process
5. Family member in urology
6. Prestige
7. Financial earning potential
8. Close patient contact
9. Family/social demands
10. Duration of training (5+ years)
11. Lifestyle of surgical residency
12. Lifestyle of attending urologists
13. Diversity of pathologies
14. Integrated medical – surgical approaches
15. Mentorship
16. Research opportunities
17. Word of mouth? Resident contact...Resident happiness?
18. Gender disparities?

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19. Female urology/surgical role models

Do you perceive urology to be predominantly focused on male pathologies	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
Does this impact your interest in urology	<ul style="list-style-type: none"> • <i>Strongly negative</i> • <i>Slightly negative</i> • <i>Neutral</i> • <i>Slightly positive</i> • <i>Strongly positive</i>
Do you perceive urology to be a male-dominated specialty, i.e., a “boy’s club”	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
Does this impact your interest in urology	<ul style="list-style-type: none"> • <i>Strongly negative</i> • <i>Slightly negative</i> • <i>Neutral</i> • <i>Slightly positive</i> • <i>Strongly positive</i>
Do you feel like there are adequate mentorship opportunities in the field	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
Does this impact your interest in urology	<ul style="list-style-type: none"> • <i>Strongly negative</i> • <i>Slightly negative</i> • <i>Neutral</i> • <i>Slightly positive</i> • <i>Strongly positive</i>
Do you feel like there are enough female role models in the specialty	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
Does this impact your interest in urology	<ul style="list-style-type: none"> • <i>Strongly negative</i> • <i>Slightly negative</i> • <i>Neutral</i>

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	<ul style="list-style-type: none">• <i>Slightly positive</i>• <i>Strongly positive</i>
<p>Beyond the questions asked in this survey, what other factors do you consider in choosing a specialty?</p> <p>What factors influence your consideration of choosing or not urology as your specialty of choice?</p>	<ul style="list-style-type: none">• <i>Open question</i>