SUPPLEMENTARY MATERIAL

Knowledge and perceptions regarding pulmonary rehabilitation amongst Ecuadorian physicians following COVID-19 outbreak

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Table S1. Percentages and frequencies of participants who "answered correctly" and "answered incorrectly" on each of the questions per domain.

Domin	Question	Answered correctly % (n)	Answered incorrectly % (n)	Chi-Square	p value
Follow-up after COVID-19 pneumonia	**Q1:** Follow up of hospitalized COVID-19 patients should include measures of respiratory function at 12 weeks following hospital discharge. **Correct answer**: "*True*"	81.4 (240)	18.6 (55)	116.017	.000
	Q2: COVID-19 infected individuals should be measured for exercise capacity at 12 weeks' follow-up after hospital discharge. **Correct answer:** "*True*"	78.0 (230)	22.0 (65)	92.288	.000
	Q3: Radiological features in community acquired pneumonia are followed-up sooner than that for COVID 19 pneumonia after hospital discharge. **Correct answer:** "*True*"	43.4 (128)	56.6 (167)	5.156	.023
	Q4: There are specific guidelines to follow up for rehabilitation after hospitalization for COVID-19 infection, according to the severity of the disease. **Correct answer:** "*False*"	18.3 (54)	81.7 (241)	118.539	.000
Goals of pulmonary rehabilitation	**Q5:** The short-term goal of pulmonary rehabilitation is to improve dyspnea. **Correct answer:** "*True*"	84.1 (248)	15.9 (47)	136.953	.000
	Q6: The long-term goal of pulmonary rehabilitation is to improve patient's quality of life after COVID-19 infection. **Correct answer:** "*True*"	98.3 (290)	1.7 (5)	275.339	.000
Benefits of pulmonary rehabilitation	**Q7:** Does pulmonary rehabilitation provide, in general, any benefit in patients with past COVID-19 infection? **Correct answer**: "*Yes*"	93.6 (276)	6.4 (19)	223.895	.000
	Q8: Does pulmonary rehabilitation provide, in general, a reduction in morbidity in patients with past COVID-19 infection? **Correct answer:** "*Yes*"	87.1 (257)	12.9 (38)	162.580	.000
	Q9: Does pulmonary rehabilitation reduce morbidity in COVID-19 infected patients that are asymptomatic? **Correct answer:** "*No*"	0.0 (0)	100.0 (295)	*N/A*	*N/A*
	Q10: Does pulmonary rehabilitation reduce morbidity in patients whose COVID-19 infection is mild? **Correct answer:** "*No*"	0.0 (0)	100.0 (295)	*N/A*	*N/A*
	Q11: Does pulmonary rehabilitation reduce morbidity in patients whose COVID-19 infection is moderate? **Correct answer:** "*Yes*"	78.0 (230)	22.0 (65)	92.288	.000
	Q12: Does pulmonary rehabilitation reduce morbidity in patients whose COVID-19 infection is severe? **Correct answer:** "*Yes*"	74.9 (221)	25.1 (74)	73.251	.000
Indications of pulmonary rehabilitation	**Q13:** Complementary tests are useful to determine if a patient with past COVID-19 infection requires pulmonary rehabilitation. **Correct answer:** "*Yes*"	99.0 (292)	1.0 (3)	283.122	.000
	Q14: Spirometry is useful to determine if a patient with past COVID-19 infection requires pulmonary rehabilitation. **Correct answer:** "*Yes*"	83.4 (246)	16.6 (49)	131.556	.000
	Q15: The DLCO measurement is useful to determine if a patient with past COVID-19 infection requires pulmonary rehabilitation. **Correct answer:** "*Yes*"	25.1 (74)	74.9 (221)	73.251	.000

Domin	Question	Answered correctly % (n)	Answered incorrectly % (n)	Chi-Square	p value
	Q$_{16}$: The 6-MWT is useful to determine if a patient with past COVID-19 infection requires pulmonary rehabilitation. **Correct answer:** "*Yes*"	59.7 (176)	40.3 (119)	11.014	.001
	Q$_{17}$: The MIP is useful to determine if a patient with past COVID-19 infection requires pulmonary rehabilitation. **Correct answer:** "*Yes*"	34.9 (103)	65.1 (192)	26.851	.000
	Q$_{18}$: The MEP is useful to determine if a patient with past COVID-19 infection requires pulmonary rehabilitation. **Correct answer:** "*Yes*"	32.5 (96)	67.5 (199)	35.963	.000
	Q$_{19}$: Patients whose COVID-19 infection is moderate or severe should receive pulmonary rehabilitation until 12 weeks after hospital discharge. **Correct answer:** "*True*"	87.1 (257)	12.9 (38)	162.580	.000
	Q$_{20}$: Associated pulmonary or neuromuscular comorbidity warrants physiotherapy for airway clearance even in mild COVID-19 patients. **Correct answer:** "*True*"	74.9 (221)	25.1 (74)	73.251	.000
	Q$_{21}$: Pulmonary rehabilitation referral is not indicated for airway clearance in a mild COVID-19 patient and no significant respiratory compromise. **Correct answer:** "*True*"	52.5 (155)	47.5 (140)	0.763	.382
	Q$_{22}$: Hospitalized COVID-19 patients should receive rehabilitation at the bedside until safe for discharge to the home environment. **Correct answer:** "*True*"	70.2 (207)	29.8 (88)	48.003	.000
	Q$_{23}$: In inpatient pulmonary rehabilitation, focused pulmonary assessment needs to be conducted. **Correct answer:** "*True*"	65.1 (192)	34.9 (103)	26.851	.000
Procedure and administration of pulmonary rehabilitation	**Q$_{24}$:** Pulmonary rehabilitation is administered by an interdisciplinary team. **Correct answer:** "*True*"	88.1 (260)	11.9 (35)	171.610	.000
	Remote pulmonary rehabilitation **Q$_{25}$:** The recommended goal of remote pulmonary rehabilitation is 2-3 on the Borg dyspnea scale score or mild to moderate breathlessness with exercise. **Correct answer:** "*True*"	53.9 (159)	46.1 (136)	1.793	.181
	Q$_{26}$: Pulmonary rehabilitation in COVID-19 survivors can be done at home with appropriate tools. **Correct answer:** "*True*"	79.7 (235)	20.3 (60)	103.814	.000
	Q$_{27}$: For remote pulmonary rehabilitation, various exercises are recommended multiple times a week for COVID-19 patients. **Correct answer:** "*Yes*"	74.6 (220)	25.4 (75)	71.271	.000

Notes: All data are presented as percentages and frequencies. Differences between observed and expected values are significant at .05 significance level. N/A, not applicable as variable is constant.

Table S2. Correlation between specialty and years of experience on number of correct answers overall and per domain.

Domain	Specialist "Yes"	p value	Years of experience	p value
	rpb		r	
Follow-up after COVID-19 pneumonia	-.040	.490	.005	.960
Goals of pulmonary rehabilitation	.081	.167	.080	.379
Benefits of pulmonary rehabilitation	.010	.862	.137	.131
Indications of pulmonary rehabilitation	.056	.338	.024	.789
Procedure and administration of pulmonary rehabilitation	-.029	.615	-.069	.446
Overall (all domains)	.022	.708	.032	.726

Notes: All data are presented as correlation coefficients. Correlation coefficients are significant at .05 significance level. rpb, point biserial correlation coefficient; r, Pearson correlation coefficient.