

## Supplementary Material

**Article Title:** Outpatient Ketamine Prescribing Practices in Psychiatry in the United States: A Nationwide Survey Study

**Authors:** Rachel M. Pacilio, MD, Sagar V. Parikh, MD, Jamarie Geller, MD, MA

**DOI Number:** 10.4088/JCP.25m15809

### **LIST OF SUPPLEMENTARY MATERIAL FOR THE ARTICLE**

1. [Appendix 1](#) Ketamine Clinic Survey Questions

### **DISCLAIMER**

This Supplementary Material has been provided by the authors as an enhancement to the published article. It has been approved by peer review; however, it has undergone neither editing nor formatting by in-house editorial staff. The material is presented in the manner supplied by the author.

## Appendix 1.

### Survey questions:

- 1. Where is your practice located?
  - Northeast
  - Midwest
  - Southeast
  - Southwest
  - West
- 2. Please select all that you prescribe:
  - Intravenous Ketamine
  - Intramuscular Ketamine
  - Intranasal Ketamine (Spravato)
  - Intranasal Esketamine
  - Sublingual/Oral Ketamine
  - Other
- 3. If other, please describe:
- 4. Please select all conditions for which you prescribe ketamine:
  - Treatment-resistant unipolar depression (A depressive episode meeting DSM-5 criteria for Major Depressive Disorder that has not remitted with adequate trials of two or more antidepressant medications).
  - Unipolar depression (A depressive episode meeting DSM-5 criteria for Major Depressive Disorder for which the patient has not received at least two antidepressant trials medications during the current episode).
  - Unspecified depression (A depressive episode that does not meet full DSM-5 criteria for Major Depressive Disorder)
  - Bipolar depression (A depressive episode that meets full DSM-5 criteria for a Major Depressive Episode in a patient with a history of a bipolar spectrum disorder or manic/hypomanic episodes)
  - Post-traumatic stress disorder or other trauma/stressor related disorders
  - Generalized anxiety disorder, social anxiety disorder or other anxiety disorders
  - Obsessive Compulsive Disorder
  - Substance use disorders
  - Personality disorders
  - Suicidal ideation
  - Other
- 5. If other, please describe:
- 6. Approximately how many patients receive one or more ketamine treatments (administered in the office or via prescription for at-home use) in a 30 day period?
- 7. Approximately what percentage of your patients are premenopausal biological females?\*
- 8. Do you prescribe ketamine for at-home use?
- 9. If yes, Does your practice provide treatment exclusively via telemedicine?
  - Yes, all patients are seen exclusively via telemedicine
  - Yes, some patients are seen exclusively via telemedicine
  - No, all patients are seen in-person at least once during a course of treatment

- 10. Do you prescribe long-term or maintenance ketamine regimens?
- 11. If yes, Approximately what percentage of patients at your practice continue receiving ketamine treatment for maintenance after the initial course?
  - 0-25%
  - 25-50%
  - 50-75%
  - 75-100%
- 12. How long is a typical course of maintenance ketamine treatment?
  - 0-3 months
  - 3-6 months
  - 6-12 months
  - 12 months or longer
- 13. Does your practice have a standard process for pregnancy testing and/or screening?\*
- 14. If yes, how is this performed?\*
  - All patients of childbearing potential are asked about possible pregnancy before ketamine treatment is started.
  - All patients of childbearing potential are offered a pregnancy test prior or during ketamine treatment.
  - All patients of childbearing potential are required to take a pregnancy test prior to ketamine treatment.
  - All patients of childbearing potential are required to take pregnancy tests prior to and during a course of ketamine treatment.
- 15. If yes, Please describe the schedule/frequency of pregnancy testing during a course of ketamine treatment:\*
- 16. Please select the choice that most accurately represents your verbal informed consent process:
  - Pregnancy is not routinely discussed during the informed consent process.
  - All patients of childbearing potential are given a general verbal recommendation to avoid pregnancy while receiving ketamine treatment.
  - All patients of childbearing potential are verbally informed of specific risks related to pregnancy and ketamine exposure.
- 17. Please select the choice that most accurately represents your informed consent documentation:
  - Informed consent forms do not include language about pregnancy.
  - Informed consent forms include a general recommendation to avoid pregnancy while receiving ketamine treatment.
  - Informed consent forms include language about specific risks related to pregnancy and ketamine exposure.
- 18. Does your practice require or specifically recommend contraception use during a course of ketamine treatment for all patients with the potential to become pregnant?\*
- 19. If yes, please select the option that best describes your practice:
  - Contraception use is required during treatment
  - Specific recommendations about pregnancy prevention are made (i.e. patients are advised to see a primary care physician to discuss options for contraception, or

sexually active patients are counseled to use a reliable birth control method during treatment, etc).

- A general recommendation to avoid pregnancy is made, but contraception is not discussed specifically.
- Other
- 20. If other, please describe:\*
- 21. (OPTIONAL) Enter an email address to be entered in a drawing for a \$50 amazon gift card:

\*Data from questions denoted by an asterisk was not included in this paper, but has been previously published in "Pacilio, R. M., Lopez, J. F., Parikh, S. V., Patel, P. D., & Geller, J. A. (2024). Safe Ketamine Use and Pregnancy: A Nationwide Survey and Retrospective Review of Informed Consent, Counseling, and Testing Practices. The Journal of clinical psychiatry, 85(3), 24m15293. <https://doi.org/10.4088/JCP.24m15293>)