

## **Supplementary Table 1.** List of open questions.

### **Questions**

#### **Patient selection**

- What criteria do you use to determine eligibility for lenvatinib in patients with RAI-refractory DTC? Do you have a checklist?
- What do you consider as contraindications to lenvatinib in patients with RAI-refractory DTC?
- Do you use any specific tools to assess potential adherence to therapy prior to initiation of lenvatinib?
- What relevance do you give to the patient's symptoms when selecting patients for lenvatinib?
- Do you routinely carry out multidisciplinary evaluation before proposing lenvatinib to a patient?

#### **Initiation of therapy**

- What information do patients receive before receiving lenvatinib?
- Do you always start treatment at 24 mg/day or do you use other starting doses?
- Do you initiate therapy with an individualized dose management plan?

#### **During therapy**

- Do you monitor adherence to therapy and how?
- How frequent are follow-up visits and what exams are routinely performed?
- Do you routinely use a weekends-off strategy and if so in which patients?
- What home monitoring protocols do you ask the patient to carry out?
- Do you employ any biomarkers to help predict clinical outcomes?

- What criteria do you apply to measure response to therapy?

### **Management of adverse events**

- Can you comment on how you manage each of the following adverse events?
  - Cardiovascular
  - Hypertension
  - Diarrhea
  - Nausea/vomiting
  - Weight loss
  - Renal
  - Dermatological
- What events lead to discontinuation of therapy?
- If therapy is discontinued, do you ever consider a rechallenge with lenvatinib?

### **Other**

- How have your prescribing practices changed since the introduction of new tailored (e.g. NTRK, RET) inhibitors?

