

# **Application to Survey the AAC Membership**

Thank you for your interest in surveying the members of the Arthroscopy Association of Canada.

Please review and consider the Information for Applicants provided below before completing the following questionnaire as it will facilitate the review of your survey by the AAC Executive.

## Information for Applicants:

#### Who can submit a questionnaire?

All surveys of the AAC membership must be submitted by members of the AAC

#### What types of surveys will be considered?

Only questionnaires aligning with the AAC Objectives will be considered

#### AAC Objectives:

- To encourage national collaboration and advancement of sports and arthroscopy research and education.
- To mobilize the knowledge gained through the Association's research to contribute to the global advancement of arthroscopic surgery and improved patient outcomes.
- To provide a collaborative forum for orthopaedic surgeons in Canada whose practices have a substantial interest in the arthroscopic management of orthopaedic conditions.
- To facilitate and stimulate the academic and scientific exchange of ideas and thoughts between these individuals.
- To promote excellence in arthroscopic care in Canada by developing and disseminating evidence-based best practice guidelines and by developing and offering educational opportunities for orthopaedic surgeons, trainees, and the public.

#### **Guidelines:**

Please keep surveys as succinct and directed as possible. *Surveys should take less than 10min to complete* 

Questionnaires that are designed primarily for personal, institutional, or medicolegal use will not be approved for distribution to the AAC membership.

#### In addition to scientific merit, what will be considered in the review of applications?

While scientific merit is important, some additional factors will be considered. The AAC Executive will consider the time required by individuals to complete the survey, the intended application of the results, and the potential significance of the study.



# What can I do to improve the likelihood that my survey will be approved for distribution to the AAC membership?

In order to facilitate the review and approval of your application to survey the AAC membership, please consider the following guidelines:

- Complete all of the questions in the following application. Incomplete applications will not be considered.
- Please ensure that the survey that you would like to conduct is submitted in its entirety with this application.
- The AAC membership consists of surgeons practicing in a variety of locations and in various practice settings, as well as multiple subspecialty interests. Please ensure that your questionnaire considers this by allowing members to opt out of the questionnaire as a whole and/or from individual questions if they are not applicable to their practice. If you feel that all AAC members should consider completing your survey, regardless of their practice, please include such a statement in the prelude to your questionnaire.
- A plan for communicating the results of the survey to the AAC membership in a timely manner should be outlined.
- For scientific integrity, consultation with experts in survey design or review of survey methodology is highly recommended.
- Please ensure that your survey is pre-tested on individuals not involved in your survey design. Record the time it takes for your testers to complete the survey and make any necessary alterations to questions prior to submission.
- Surveys can be submitted in English, French, or both official languages
- Should you be successful in your application, and survey the membership, the AAC expects:
  - The AAC and its membership should be acknowledged in future presentation and/or publication and dissemination of results
  - The results of the study will be submitted as an abstract to a future COA meeting



## Application to Research Committee for Survey of AAC Membership

Applicant (Individual/Group Name and Affiliation/Institution):

If individual applicant, are you an AAC member? Yes No

Address (for correspondence):

Name and Affiliation of Principle Investigator (if different from applicant):

What is the purpose/objective of your survey/study?

What is your hypothesis?

| Have you pre-te | ested the questionnaire on any in | ndividuals not involved i | n the study design? |
|-----------------|-----------------------------------|---------------------------|---------------------|
| Yes             | No                                |                           |                     |

If yes, how many?

How much time does it take for an individual to complete the survey? (Please provide the mean and range in minutes)

Please provide a description of your analytic plan for this study:

Will the results of this survey be compared to or combined with those of any other group of individuals? Yes No

If yes, please name the other groups/organizations you are intending to survey:



How will the results of this survey be used (please be as specific as possible)?

Has this study received REB or IRB approval? Yes No

If yes, please provide name of approving body:

How will the results of this survey be communicated to the AAC membership (please be as specific as possible)?

Has this or a similar survey been conducted of the AAC or COA membership previously? (Y/N) If yes, please indicate when the original survey was conducted and justify any differences from the previous iteration.

Has this survey been distributed to any other groups? Yes No

If yes, to whom?

Are there plans to distribute to any other groups? Yes No

If yes, to whom?