

SUPPLEMENTARY MATERIAL

Table. Demographic characteristics of the respondents (N=122)

Age (years) (mean, SD)		47 (9,48)
Gender	Female	98 (80.3%)
	Male	24 (19.7%)
Specialty	Allergist	77 (63.9%)
	Pediatrician	39 (32%)
	Both specialties	5 (4.1%)
Years of professional practice	<5	14 (11.5%)
	5-10	22 (18.0%)
	11-15	29 (23.8%)
	16-20	16 (13.1%)
	>20	41 (33.6%)
Workplace	Public hospital	96 (78.7%)
	Private hospital	15 (12.3%)
	Private medical office	5 (4.1%)
	Both	6 (4.9%)
Autonomous Community of workplace	Comunidad de Madrid	38 (31.4%)
	Cataluña	16 (13.2%)
	Andalucía	13 (10.8%)
	Comunidad Valenciana	12 (9.9%)
	Islas Canarias	8 (6.6%)
	Galicia	8 (6.6%)
	Castilla La Mancha	5 (4.1%)
	Castilla y León	4 (3.3%)
	Navarra	4 (3.3%)
	País Vasco	4 (3.3%)
	Islas Baleares	3 (2.5%)
	Asturias	2 (1.7%)
	Murcia	2 (1.7%)
	Aragón	1 (0.8%)

	Extremadura	1 (0.8%)
New patients diagnosis with FPIES/year/center (N=106)	5-10	53 (50%)
	11-20	35 (33%)
	21-30	10 (9.4%)
	31-40	3 (2.9%)
	>40	5 (4.7%)
Diagnostic criteria set used (N=117)	International Consensus	95 (81.2%)
	Sicherer's criteria	2 (1.7%)
	Leonard's criteria	2 (1.7%)
	Miceli Sopo's criteria	2 (1.7%)
	Own criteria	16 (13.7%)

FPIES SURVEY

Q1. In what year were you born? (Please enter the 4 digits of your year of birth; for example, 1976)

Q2. What is your gender?

Male

Female

Q3. What is your current medical specialty?

Allergy

Pediatrics

Other (please specify)

Q4. How many years have you been practicing your current specialty?

<5

5-10

11-15

16-20

>20

Q5. In what setting do you typically practice?

Public hospital

Private hospital

Private consultation

Other (please specify)

Q6. In which Autonomous Community do you practice?

Q7. Do you attend to patients with Food Protein-Induced Enterocolitis Syndrome (FPIES)?

Yes

No

Q8. How many patients do you diagnose with FPIES in a typically year?

Do not know/ Not applicable

5-10

11-20

21-30

31-40

>40

Q9. For patients with FPIES, where are they typically referred from?

The centre where you practice (Emergency Department or other services)

Primary Care

Both

Other (please specify)

Q10. In your current practice, how frequent do you attend to patients with FPIES?

Very frequent

Frequent

Infrequent

Rare

Q11. Your patients diagnosed with FPIES are:

Children

Adults

Both

Q12. Which foods most often produce FPIES in your pediatric patients? (Please specify the group and the specific food, for example: fish (hake))

Q13. Which foods most often produce FPIES in your adult patients? (Please specify the group and the specific food, for example: fish (hake))

Q14. Do you have any patients diagnosed with FPIES caused by vegetables?

Yes

No

Q15. If yes, what are the responsible vegetables?

Q16. Which criteria do you think is most useful when diagnosing FPIES?

Criteria of Sicherer (1998)

Leonard's Criteria (2012)

Miceli Sopo Criteria (2013)

Lee's Criteria (2017)

International Consensus Criteria (2017)

Own criteria

N/A*

Q17. Do you perform a controlled oral food challenge (OFC) in your patients with

FPIES?

Yes

No

Q18. If case you perform an OFC, the purpose is the following:

Diagnostic

To check tolerance to the food concerned

To check tolerance to another food the patient has not presented symptoms with (e.g., other fish, seafood, cereals, etc.)

Diagnostic purpose and/or to check tolerance to the food concerned

Diagnostic purpose and/or to check tolerance to the food concerned and/or to check tolerance to other foods in the group

I do not perform OFC

Other (please specify)

P19. How long do you wait to do an OFC on your patients diagnosed with FPIES?

<6 months till last reaction

6-12 months since last reaction

12-18 months since the last reaction

>18 months since the last reaction

I don't perform OFC

Other (specify)

P20. Do you cannulate a peripheral venous line before the test?

Yes, in all cases

Yes, in some cases

No

P21. How do you perform OFC?

I give several equal doses of food in a single day following the recommendations of the latest consensus.

I give several increasing doses of food in a single day following my own guideline.

I give several doses of food during a 48-hours period.

I give a single dose of food per day on two non-consecutive days.

I give a single dose of food per day on two non-consecutive days.

Other (specify)

P22. At what age do your patients with FPIES due to milk usually reach tolerance?

N/A

<12 months

12-18 months

19-24 months

2-3 years

>3 years

Other (specify)

P23. At what age do your patients with FPIES due to egg usually reach tolerance?

N/A

<12 months

12-18 months

19-24 months

2-3 years

>3 years

Other (specify)

P24. At what age do your patients with FPIES due to cereals usually reach tolerance?

N/A
<12 months
12-18 months
19-24 months
2-3 years
>3 years
Other (specify)

P25. At what age do your patients with FPIES due to fish usually reach tolerance?

N/A
<12 months
12-18 months
19-24 months
2-3 years
3-4 years
4-5 years
>5 years

P26. In the case of FPIES due to fish, do you perform OFC with alternative fish (other than the one that produced the symptoms)?

Yes
No

P27. If you perform OFC with fish other than the one involved, which one do you test?

P28. In the case of FPIES from seafood, do you perform OFC with alternative seafood (other than the one that produced the symptoms)?

Yes
No

P29. If you perform OFC with seafood other than the one involved, which one do you test?

P30. In the case of OFC for cereals, do you perform OFC with other cereals?

Yes

No

P31. If you perform OFC with cereals other than the one involved, which one do you test?

P32. In the case of FPIES by milk, do you first perform OFC with cooked milk?

Yes

No

P33. If yes, which presentations (or forms) do you use?

P34. In the case of FPIES by egg, do you first perform OFC with cooked egg?

Yes

No

P35. If yes, which presentations (or forms) do you use?

P36. In case of acute reaction of FPIES, what is the treatment?

1st fluid therapy 2nd corticosteroids 3rd ondansetron

1st fluid therapy 2nd ondansetron 3rd corticoids

1st ondansetron 2nd fluid therapy 3rd corticoids

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1st corticoids 2nd ondansetron 3rd fluid therapy

1st corticoids 2nd fluid therapy 3rd ondansetron

Others (specify)

*N/A= not available