Supplementary Table 2. Experiences, attitudes and value of Croatian pediatric ICU professionals regarding LST limitation – analysis by work experience

-		Spear	Spearman	
		rho	p	
I.6. Experience	- I.11. Awareness of Contact for Ethical Dilemma	-0.239*	0.012	
I.6. Experience	- I.12. Contacted Ethical Committee	-0.133	0.162	
I.6. Experience	- II.1.1. Decision for CPR Non-resuscitation	-0.085	0.394	
I.6. Experience	- II.1.2. Withholding Therapeutic Procedures	0.044	0.664	
I.6. Experience	- II.1.3. Withdrawing Artificial Ventilation	0.001	0.990	
I.6. Experience	- II.1.4. Removing Endotracheal Tube	-0.039	0.698	
I.6. Experience	- II.1.5. Use of Inotropes	0.177	0.077	
I.6. Experience	- II.1.6. Use of Antibiotics	0.122	0.221	
I.6. Experience	- II.1.7. Decision on Hydration	0.053	0.600	
I.6. Experience	- II.2. Recording Decisions on CPR	-0.147	0.123	
I.6. Experience	- II.3. Compliance with DNR Orders	-0.279*	0.003	
I.6. Experience	- II.4. Implementing Instructions for LST	-0.109	0.255	
I.6. Experience	- II.5.1. Involvement in End-of-Life Decisions	0.113	0.247	
I.6. Experience	- II.6. Initiator of End-of-Life Discussion	-0.084	0.448	
I.6. Experience	- II.7.2. Physician Council Decision Making	-0.095	0.337	
I.6. Experience	- II.7.3. Physicians and Nurses Decision-Making	-0.120	0.241	
I.6. Experience	- II.7.4. Consulting Ethical Committee	0.147	0.146	
I.6. Experience	- II.8. Family Involvement in Decision Making	-0.115	0.229	
I.6. Experience	II.11. Frequency of No Consensus Among Physicians	0.073	0.452	
I.6. Experience	II.12. Frequency of No Consensus of Physicians with Family	-0.081	0.402	
I.6. Experience	- II.13. Disagreement with Limiting Procedures	-0.016	0.866	
I.6. Experience	II.15. Time from Decision to Treatment Withdrawal	0.055	0.581	
I.6. Experience	III.4. Ethical Acceptability of Limiting Life- Sustaining Procedures	-0.050	0.600	
I.6. Experience Doctor/Nurse	III.5. Ethical Difference Between Withholding and Withdrawing	-0.037	0.697	
I.6. Experience	- III.6. Ethical Acceptability of Non-Resuscitation	-0.051	0.591	
I.6. Experience	- III.7. Agreement on Stopping Hydration	0.057	0.551	
I.6. Experience	III.8. Equality of Decision Making in Different Patient States	-0.108	0.257	
I.6. Experience	- III.9.1. Good Medical Practice	-0.099	0.300	
I.6. Experience	- III.9.2. Patient's Interest	0.047	0.624	
I.6. Experience	- III.9.3. Patient Autonomy	-0.109	0.255	
I.6. Experience	- III.9.4. Treatment Costs	-0.064	0.505	
I.6. Experience	III.9.5. Written Document Expressing Patient's Prior Wishes	-0.156	0.104	
I.6. Experience	- III.9.6. Wishes of Family/Legal Representatives	-0.117	0.221	
I.6. Experience	- III.9.7. Legal Provisions	0.188*	0.048	
I.6. Experience	- III.9.8. Religious Principles	-0.092	0.339	
I.6. Experience	- III.9.9. Need for Vacant ICU Beds	0.032	0.741	
I.6. Experience	III.10. Equality of Decision Making for Adult Patients	-0.187*	0.048	

Supplementary Table 2. Experiences, attitudes and value of Croatian pediatric ICU professionals regarding LST limitation – analysis by work experience

		Spearman	
		rho	p
I.6. Experience	III.11. Importance of Resource Allocation in End-of-Life Decisions	0.024	0.802
I.6. Experience	III.12. Decision Maker for Incapacitated Patients	-0.026	0.787
I.6. Experience	- III.13. Respect for Patient's Expressed Decision	-0.143	0.133
I.6. Experience	III.14. Respect for Different Religious/Cultural Beliefs Expressed by Patient or Representative	-0.231 *	0.014
I.6. Experience	III.15. Respect for Different Religious/Cultural Beliefs Expressed by Physician	4.024×10 ⁻⁴	0.997
I.6. Experience	III.16. Frequency of Being Informed About Patient or Family Wishes	0.007	0.941
I.6. Experience	III.17. Usefulness of Written Patient Wishes in Decision Making	-0.273*	0.004
I.6. Experience	III.18. Frequency of Encountering Written Patient Wishes	0.006	0.948
I.6. Experience	III.19. Personal Legal Responsibility in Decision Making	0.006	0.954

^{*} p < .05