

APPENDIX (online only)

Surgeon Survey

In order to improve patients' understanding of infrarenal AAA and how it is treated, we are designing an interactive educational tool for patients who are candidates for open or endovascular AAA repair.

This tool will explain the diagnosis as well as discuss the risks and benefits associated with intervention.

In determining which information to include, we would like to consider input from experts in the field; thus, we are seeking your opinion. Filling out the questionnaire should take approximately 5–10 minutes. There are 20 questions.

Please assume for each question regarding open AAA repair that you have chosen the approach (i.e. retro-peritoneal vs. trans-peritoneal) which would be the least risky for a given patient. Responses to this survey will be kept confidential.

1. How important is it to include discussion of mortality risk?

For EVAR:

1 2 3 4 5

essential not needed

What mortality rate should be quoted?

For EVAR:

<1% 1% 2-3% 4-5% Other:

For open AAA repair:

1 2 3 4 5

essential not needed

For open AAA repair:

<1% 1% 2-3% 4-5% Other:

All of the following questions use the same response scales as described above and are not relisted.

2. How important is it to include discussion of myocardial infarction (MI) risk?

For the average patient:

For patient with known history of coronary artery disease (CAD):

For patient without CAD but with known risk factors (i.e. smoking, diabetes, hypertension, hyperlipidemia):

What MI rate should be quoted for the average patient?

What MI rate should be quoted for a patient with known history of CAD?

What MI rate should be quoted for patient without CAD but with known risk factors?

3. How important is it to include discussion of stroke risk?

For the average patient:

For a patient with known history of stroke:

What stroke rate should be quoted for the average patient?

What stroke rate should be quoted for a patient with history of previous stroke?

4. How important is it to include discussion of risk of renal failure? This question refers to permanent, dialysis-requiring renal failure.

For the average patient:

For a patient with pre-operatively compromised renal function:

For a patient with diabetes:

What renal failure rate should be quoted for the average patient?

What renal failure rate should be quoted for a patient with pre-operatively compromised renal function?

What renal failure rate should be quoted for a patient with diabetes?

5. How important is it to include discussion of risk of impotence?

What impotence rate should be quoted?

6. How important is it to include discussion of risk of need for prolonged mechanical ventilation (beyond the first 24 hours after surgery)?

For average patient:

For patient with COPD:

7. How important is it to include discussion of risk of long-term disability (e.g., disposition to permanent extended care facility where the patient was living at home pre-op)?

For the average patient:

For someone whose functional status is mildly compromised preoperatively (e.g., lives at home but is somewhat dependent on spouse for help with activities of daily living):

8. How important is it to include discussion of post-operative surveillance practice? In discussing post-operative surveillance for EVAR, how important is it to include the following?

Risk of contrast exposure:

Risk of radiation exposure:

9. How important is it to include discussion of the likelihood of need for re-intervention after the operation?

Which rate should be quoted?

10. How important is it to include discussion of risk of rupture after repair?

Which rate should be quoted?

11. How important is it to include discussion of outcomes if no surgery is performed?
Which of the following possible outcomes should be discussed? Please rate all three.
Risk of rupture if no surgery is performed?
Likelihood of death from rupture if no surgery is performed?
Nature of death from a ruptured aneurysm?
Other:
12. Are there any other issues that should be addressed in an educational tool that we have not asked about in this questionnaire? If so, please list.
13. If a patient is a candidate for both EVAR and open AAA repair, I generally:
 Discuss both options and ask which one the patient would prefer.
 Discuss both options and recommend one or the other.
 Recommend one or the other without discussing both options.
 Other:
14. Which of the following best describes your primary practice setting?
 Academic Private practice Other:
15. Do you practice in a VA hospital?
 Yes No
16. What is your gender?
 Female Male
17. What is your age group?
 <40
 40-50
 51-60
 61-70
 >70
18. For how many years have you been practicing vascular surgery?
 1-5
 6-10
 11-20
 21-30
 >30
19. In which state is your practice located? (States to be listed on drop down menu)
20. Please estimate the number of AAA repairs you do per year:
EVAR: _____
Open: _____