

Codes Audit Trail

293 initial codes brompton

161 initial codes glenfield

454 initial codes combined

1. Example of codes:

against being dictated to by GP re PA
smoking
rock bottom prior to lightbulb moment
importance of life
quitting smoking
occupation
work
wont affect me
if not breathless, wont listen
technology
monitoring analysis
monitoring feedback
GP's work reactively
PA attention
agency nursing
poor care

2. Sorting codes into potential themes:

Medication – Not persued further because minimally discussed specifically and not in relation to LVRS or Valve procedures

Interaction with GP post Hospital

Discharge

Experience of Oxygen

Exacerbations

Experience of valves

Post Hospital Care

Wanting More operations – not further used as replicated in “experience post surgery” theme

Hospital Care

Experience post surgery

Experience Pre-surgery

Physical activity monitoring – not pursued further as replicated in “physical activity monitoring”

Feeling on ones own

PA Monitoring – not pursued further as codes suited in physical activity

Physical activity

Its my fault

PR

Experience of deterioration

Other Therapies

Work

Travel

Vulnerable at home

Follow up appointment

Thoughts about operation

Smoking

Complications post op

Other opportunities – Not pursued further as 1 code included relating to stem cell research

Importance through the pathway - Not pursued as too vague and broad without connecting well to other themes

3. Initial Thematic Map

'Interaction with GP post hospital'

'Discharge'

'Post hospital care'

'vulnerable at home'

'Follow up appointment'

'Hospital Care'

'Experience of valves'

'Experience Post Surgery'

'Thoughts about operation'

'Complications Post op'

'Experience of oxygen'

'Experience of deterioration'

'Smoking'

'Its my fault'

'PR'

'Physical Activity'

'Other Therapies'

'Feeling on ones own'

'vulnerable at home'

'Experience of oxygen'

'Work'

'Travel'

4. Comparing, amending, and refining themes

Follow up appointment vs experience post surgery

Follow up appointment codes

poor communication
no follow up
follow up appointment
lack of follow up
want to have follow up

Experience post surgery

respiratory failure
ITU
worse after op
decline in walking
deteriorating

chest infection
lung volume increased
little improvement
deteriorating health
message of being improved forever post op
immediately better
no need to repeat op
complications
recovery variable
deterioration
time and deterioration to recovery to previous health
pain
painkillers
hoped for more
wanting more surgery
support

Pain nerve damage
further treatment
post op ward care
time to recover
repeat procedure
time to see benefit
time to recovery
SOB
Coughing

The “experience post surgery theme was seen as distinctly separate to the “follow up appointment” Theme. However, following review the codes in this theme are not distinctively linked to one another and needed further refining. Other codes were removed such as “chest infections” into “Exacerbations” Theme, but this code was also relevant to the “complications post op” Theme. The resulting Themes were produced from the “experience post surgery” Theme

Declining health post op:

Worse after op
Decline in walking
Deteriorating
Little improvement
Deteriorating health
Deterioration
Time and deterioration to recovery to previous health

Improved health post op:

Message of being improved forever post op
Immediately better
No need to repeat op

Other codes more suitable in “complications post op”:

Respiratory failure
ITU
Chest infection
Complications
Pain
Pain nerve damage

Reviewing these codes it is clear that the extract regarding the code “respiratory failure” and “ITU” were experienced by a participant after he had had the surgery during an exacerbation. The interviewers did not clarify how soon after the operation this event was and so these two codes were also added to “exacerbations” Theme.

After reviewing the potential themes above it was agreed between AL and SB that these represented sub themes that could be appropriately grouped into major themes to illustrate the patient journey through LVRS or EBVS more appropriately:

1. The patient focus on declining health

'Experience of oxygen'

'Experience of deterioration'

'Smoking'

'Its my fault'

'fighting for operation'

'Physical Activity'

2. Consequences of having the operation

'Hospital Care'

'Declining health post-op'

'Complications Post op'

'Thoughts about operation'

'Experience of oxygen'

'Travel'

'wanting more surgery'

3. Vulnerability and limited continuity of care post discharge

'Interaction with GP post hospital'

'Discharge'

'vulnerable at home'

'Follow up appointment'

'PR'