Appendix Semi-Structured Interview

Hello my name is [insert researcher name] and as you know we are here today to talk to you about your, or your family members, treatment for cardiac arrest at St. Paul's Hospital. For this interview, I would like to learn more about your experiences and opinions on the treatment. I will ask some questions about your experience and thoughts on how things could be better. There are no right or wrong answers as we are interested in learning more about your experiences and opinions.

As we mentioned in the consent process, your name or other identifying information are not necessary for the study so the transcript of this interview will be de-identified and referred to by a study number. We will probably spend anywhere from 45-60 minutes together, but it's completely up to you.

Do you have any questions before we begin? Okay, so before we begin is it still okay if I record the session? We just record to be sure to capture everything you say accurately and we destroy the tape once it is transcribed. [If yes, turn on recorder; if no prepare to take notes]

A. So [you/your loved one] suffered a cardiac arrest [insert time frame] correct? Can you tell me a little bit about that?

B. And as part of the treatment [you/they] were put on an ECPR machine correct? So can you tell me what you remember about that?
   a. How were you approached?
   b. What are your thoughts about the timing of when they approached you?
   c. How did they explain the procedure?
   d. How could this information have been better conveyed? written material/video/one-on-one with medial expert?
   e. What did you understand about the potential success of ECPR?
   f. What did you understand about the possible outcomes? (death/brain death/brain injury/survival)

C. Were you asked for consent prior to initiation of ECPR? Would this have been possible? Do you think that this should be required or should it be assumed?

D. How were you updated about the likelihood that your family member would survive?
   a. How often were you updated?
   b. How was this information shared? (bedside with nurse/physician? scheduled family meetings? Could this process have been improved?

E. What was it like being involved with decisions pertaining to the care of your loved one?
   a. Did you feel involved with decisions?
   b. Did you feel confident that the medical team shared your goals for care?
   c. What degree of involvement do believe that families should have in

deciding when it is appropriate to end life support?

F. Now I'd like to talk a bit about whether you talked about organ donation. Did the medical team discuss organ donation with you?
   a. How did you feel about this?
   b. Was organ donation something you had previously thought about or discussed with your FM?
   c. If your family member donated organs: how did this make you feel about the situation?

G. In cases for whom ECPR does not result in survival, do you feel that the opportunity to donate organs provides benefit?
   a. Do you think this makes families feel better about the situation?
   b. Do you feel as though it is reasonable to call organ donation a "benefit" of an ECPR program?
   c. When were you first approached about the topic of organ donation? Was this too soon or too late? Who made this approach?
   d. Did you have any concerns that treating physicians were at a conflict of interest, in that they may be not prioritizing the treatment of your family member, and were actually trying to get their organs?
   e. Can you think of any ways in which organ donation could be introduced to families that would be more acceptable/less upsetting?

H. Questions about value:
   a. You / your family member survived. Discussion regarding your perceived value of ECPR
   b. You / your family member did not survive. Discussion regarding your perceived value of ECPR
      i. Did it allow you time to deal with the situation? Was it helpful to know that extraordinary efforts were made on his/her behalf?
      ii. Did it increase the trauma in the experience?