Investigating how clinicians make decisions about admitting a patient to intensive care

About this questionnaire

In this questionnaire we are interested in how you would decide whether or not to admit a patient to intensive care unit. You will be given 15 choice tasks. At first glance the choice tasks might all look the same but that is not the case, each choice task consists of a new choice problem with new profiles of patients.

For answering the choice questions, we would like you to imagine that you are responsible for admissions to an intensive care unit. For each choice task we will give you some summary information on two hypothetical patients, both of whom have been referred with sepsis.

For each choice task we will ask you to answer two questions. Firstly we will ask you to indicate, for each patient, if you would not admit them to ICU at all. We will then ask you to imagine that you only have one currently available ICU bed, and in this circumstance, which of the two patients you would prioritise for admission. We recognise that in reality such limitations are rarely absolute, but please answer as best you can using the information available.

These choice tasks have been developed to mimic as closely as possible the type of choice problems you face in practice. The information you have been provided with has been chosen after observing these kinds of decision being made and interviewing the intensive care consultants who have made them and the ICU outreach nurses who have been involved. We recognise that we have provided very little information, and more would help the decision-making; please answer as best you can with the information provided.

In order to help you to make a decision we will set some hypothetical constraints on the situation:
1) Please imagine you are unable to attend the patients and must rely on this information provided by a senior registrar whose opinion is reliable
2) The patients are too unwell to provide any opinion on what they would want to happen

Once you have completed the choices you will be asked a small number of questions about yourself and your intensive care unit. Your replies to this questionnaire will be entirely anonymous; these choice questions are being posed solely to determine how intensive care clinicians determine whether or not a patient is admitted to the ICU. At the end of the questionnaire you will be asked to provide your name and institution. This is for the purpose of logging accrual to the NIHR portfolio at your institution and within the critical care speciality. This personal information will be separated from your answers before data is passed to the researcher team. Your answers will be anonymous. You do not have to provide this information if you prefer not to.

1. The following two patients have both been referred with sepsis.

Please keep in mind:

1) Please imagine you are specifically <u>unable to attend the patients</u> and must rely on this information provided by a senior registrar whose opinion is reliable
2) The <u>patients are too unwell to provide any opinion</u> on what they would want to happen

Patient A
79 years old
with mild dementia, started on Aricept in the last month
Mobile to shops with family; has to rest climbing stairs.
NEWS of 8 (Temp: 36.1C; Resp rate: 24; SpO2: 92% on 60% FiO2; GCS:15; Pulse: 120; Systolic BP: 140mmHg)
Registrar saw the patient earlier and tells you that they look like they are tiring
Patient is on a busy acute ward with 1 trained nurse per 8 patients; The ward sister is worried the ward cannot cope with looking after the patient.
The patient's family have already approached the ward doctors and said that they insist on the patient being admitted to ICU

Patient B
66 years old
with moderate COPD (FEV1 65% predicted). One course of steroids and antibiotics in the last year
Mobilises independently; walks dog daily.
NEWS of 11 (Temp: 37.7C; Resp rate: 23; SpO2: 90% on 60% FiO2; GCS: 15; Pulse: 90; Systolic BP: 85mmHg after adequate iv fluids).
Registrar has seen the patient and tells you that they are stable, and "holding their own"
Patient is on a busy acute ward with 1 trained nurse per 4 patients; critical care outreach nurses are available to provide further support
The patient's family say they have never discussed ICU admission or end-of life care: they will leave all the decisions to the medical team

*For each patient please indicate if you would **NOT** admit the patient*:

Patient A ☐   **Patient B** ☐

Now assuming there is only one ICU bed currently available: Please indicate which patient you would prioritise for admission:
(If you would not admit either patient, for the purposes of this questionnaire, we would still like you to prioritise on of the patients for admission. In this case please indicate which patient you would be <u>more likely</u> to admit for life-sustaining therapy)

Patient A ☐   **Patient B** ☐

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2. The following two patients have both been referred with sepsis.

Please keep in mind:

1) Please imagine you are specifically <u>unable to attend the patients</u> and must rely on this information provided by a senior registrar whose opinion is reliable.
2) The <u>patients are too unwell to provide any opinion</u> on what they would want to happen.

Patient A	Patient B
39 years old	66 years old
with heart failure; echo shows severe LV impairment. They have had numerous long hospital admissions. They have a biventricular pacemaker and are on spironolactone and b.d. furosemide.	with prostate cancer – a recent CT scan revealed bone metastases.
Mobile to shops with family; has to rest climbing stairs.	Mobilises independently; walks dog daily.
NEWS of 8 (Temp: 36.1C; Resp rate: 24; SpO2: 92% on 60% FiO2; GCS:15; Pulse: 120; Systolic BP: 140mmHg)	NEWS of 11 (Temp: 37.7C; Resp rate: 23; SpO2: 90% on 60% FiO2; GCS: 15; Pulse: 90; Systolic BP: 85mmHg after adequate iv fluids).
Registrar saw the patient earlier and says that they look dreadful now.	Registrar has seen the patient and tells you that they are stable, and "holding their own"
Patient is on a busy acute ward with 1 trained nurse per 4 patients; critical care outreach nurses are available to provide further support	Patient is on a busy acute ward with 1 trained nurse per 8 patients; The ward sister is worried the ward cannot cope with looking after the patient.
The patient's family say that they think the patient would not want to be admitted to ICU.	The patient's family have already approached the ward doctors and said that they insist on the patient being admitted to ICU

For each patient please indicate if you would NOT admit the patient:

Patient A ☐   Patient B ☐

Now assuming there is only one ICU bed currently available: Please indicate which patient you would prioritise for admission:
(If you would not admit either patient, for the purposes of this questionnaire, we would still like you to prioritise on of the patients for admission. In this case please indicate which patient you would be <u>more likely</u> to admit for life-sustaining therapy)

Patient A ☐   Patient B ☐

3. The following two patients have both been referred with sepsis.

Please keep in mind:

1) Please imagine you are specifically <u>unable to attend the patients</u> and must rely on this information provided by a senior registrar whose opinion is reliable
2) The <u>patients are too unwell to provide any opinion</u> on what they would want to happen

Patient A	Patient B
79 years old	89 years old
with heart failure; echo shows severe LV impairment. They have had numerous long hospital admissions. They have a biventricular pacemaker and are on spironolactone and b.d. furosemide.	with very severe COPD (FEV1 28% predicted. 2 hospital admissions for exacerbations in the last year
Mobilises independently; walks dog daily.	Mobile to shops with family; has to rest climbing stairs.
NEWS of 8 (Temp: 36.1C; Resp rate: 24; SpO2: 92% on 60% FiO2; GCS:15; Pulse: 120; Systolic BP: 140mmHg)	NEWS of 11 (Temp: 37.7C; Resp rate: 23; SpO2: 90% on 60% FiO2; GCS: 15; Pulse: 90; Systolic BP: 85mmHg after adequate iv fluids).
Registrar saw the patient earlier and tells you that they look like they may be tiring	Registrar has seen the patient and tells you that they are stable, and "holding their own"
Patient is on a busy acute ward with 1 trained nurse per 4 patients; critical care outreach nurses are available to provide further support	Patient is on a busy acute ward with 1 trained nurse per 8 patients; The ward sister is worried the ward cannot cope with looking after the patient.
The patient's family have already approached the ward doctors and said that they insist on the patient being admitted to ICU	The patient's family say that they think the patient would not want to be admitted to ICU

For each patient please indicate if you would NOT admit the patient:

<div align="center">

Patient A ☐ **Patient B** ☐

</div>

Now assuming there is only one ICU bed currently available: Please indicate which patient you would prioritise for admission:
(If you would not admit either patient, for the purposes of this questionnaire, we would still like you to prioritise one of the patients for admission. In this case please indicate which patient you would be <u>more likely</u> to admit for life-sustaining therapy)

<div align="center">

Patient A ☐ **Patient B** ☐

</div>

4. The following two patients have both been referred with sepsis.

Please keep in mind:

1) Please imagine you are specifically <u>unable to attend the patients</u> and must rely on this information provided by a senior registrar whose opinion is reliable
2) The <u>patients are too unwell to provide any opinion</u> on what they would want to happen

Patient A
66 years old
with ischaemic heart disease; moderate heart failure on echo, on regular furosemide and ramipril
Mobile to shops with family; has to rest climbing stairs
NEWS of 5 *(Temp: 37.8C; Resp rate: 22; SpO2: 96% on air; GCS: 15). Pulse: 108; systolic BP: 91mmHg after adequate iv fluids)*
Registrar saw the patient earlier and says that they look dreadful now
Patient is on a busy acute ward with 1 trained nurse per 4 patients; critical care outreach nurses are available to provide further support
The patient's family say they have never discussed ICU admission or end-of life care: they will leave all the decisions to the medical team

Patient B
39 years old
with moderate COPD (FEV1 65% predicted). One course of steroids and antibiotics in the last year
Mobilises around the ground-floor of their home; cannot manage stairs. Has carers twice a day
NEWS of 11 (Temp: 37.7C; Resp rate: 23; SpO2: 90% on 60% FiO2; GCS: 15; Pulse: 90; Systolic BP: 85mmHg after adequate iv fluids).
Registrar saw the patient earlier and tells you that they look like they are tiring
Patient is on a busy acute ward with 1 trained nurse per 8 patients; The ward sister is worried the ward cannot cope with looking after the patient.
The patient's family have already approached the ward doctors and said that they insist on the patient being admitted to ICU

For each patient please indicate if you would NOT admit the patient:

Patient A ☐   **Patient B** ☐

Now assuming there is only one ICU bed currently available: Please indicate which patient you would prioritise for admission:
(If you would not admit either patient, for the purposes of this questionnaire, we would still like you to prioritise one of the patients for admission. In this case please indicate which patient you would be <u>more likely</u> to admit for life-sustaining therapy)

Patient A ☐   **Patient B** ☐

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5. The following two patients have both been referred with sepsis.

Please keep in mind:

1) Please imagine you are specifically <u>unable to attend the patients</u> and must rely on this information provided by a senior registrar whose opinion is reliable
2) The <u>patients are too unwell to provide any opinion</u> on what they would want to happen

Patient A	Patient B
79 years old	66 years old
with severe COPD (FEV1 45% predicted). 3 courses of steroids and antibiotics over the last 12 months	who has recently been referred by GP to a memory clinic for a suspected diagnosis of dementia; otherwise well.
Mobilises around the ground-floor of their home; cannot manage stairs. Has carers twice a day.	Mobilises independently; walks dog daily
NEWS of 11 *(Temp: 37.7C; Resp rate: 23; SpO2: 90% on 60% FiO2; GCS: 15; Pulse: 90; Systolic BP: 85mmHg after adequate iv fluids)*	NEWS of 5 (Temp: 37.8C; Resp rate: 22; SpO2: 96% on air; GCS: 15). Pulse: 108; systolic BP: 91mmHg after adequate iv fluids)
Registrar has seen the patient and tells you that they are stable, and "holding their own"	Registrar saw the patient earlier and tells you that they look like they may be tiring
Patient is on a busy acute ward with 1 trained nurse per 4 patients; critical care outreach nurses are available to provide further support	Patient is on a busy acute ward with 1 trained nurse per 8 patients; The ward sister is worried the ward cannot cope with looking after the patient.
The patient's family say they have never discussed ICU admission or end-of life care: they will leave all the decisions to the medical team	The patient's family say that they think the patient would not want to be admitted to ICU

For each patient please indicate if you would NOT admit the patient:

Patient A ☐   Patient B ☐

Now assuming there is only one ICU bed currently available: Please indicate which patient you would prioritise for admission:
(If you would not admit either patient, for the purposes of this questionnaire, we would still like you to prioritise one of the patients for admission. In this case please indicate which patient you would be <u>more likely</u> to admit for life-sustaining therapy)

Patient A ☐   Patient B ☐

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6. The following two patients have both been referred with sepsis.

Please keep in mind:

1) Please imagine you are specifically <u>unable to attend the patients</u> and must rely on this information provided by a senior registrar whose opinion is reliable
2) The <u>patients are too unwell to provide any opinion</u> on what they would want to happen

Patient A	Patient B
79 years old	66 years old
with a history of a previous MI; recent echo shows LVH and a mildly decreased ejection fraction; on ramipril.	with prostate cancer with local spread on recent staging CT; on hormonal therapy with planned radiotherapy
Mobilises independently; walks dog daily.	Mobile to shops with family; has to rest climbing stairs
NEWS of 5 *(Temp: 37.8C; Resp rate: 22; SpO2: 96% on air; GCS: 15). Pulse: 108; systolic BP: 91mmHg after adequate iv fluids)*	NEWS of 11 *(Temp: 37.7C; Resp rate: 23; SpO2: 90% on 60% FiO2; GCS: 15; Pulse: 90; Systolic BP: 85mmHg after adequate iv fluids)*
Registrar has seen the patient and tells you that they are stable, and "holding their own"	Registrar saw the patient earlier and says that they look dreadful now.
Patient is on a busy acute ward with 1 trained nurse per 8 patients; The ward sister is worried the ward cannot cope with looking after the patient.	Patient is on a busy acute ward with 1 trained nurse per 4 patients; critical care outreach nurses are available to provide further support
The patient's family say they have never discussed ICU admission or end-of life care: they will leave all the decisions to the medical team	The patient's family have already approached the ward doctors and said that they insist on the patient being admitted to ICU

For each patient please indicate if you would NOT admit the patient:

Patient A ☐   **Patient B** ☐

Now assuming there is only one ICU bed currently available: Please indicate which patient you would prioritise for admission:
(If you would not admit either patient, for the purposes of this questionnaire, we would still like you to prioritise one of the patients for admission. In this case please indicate which patient you would be <u>more likely</u> to admit for life-sustaining therapy)

Patient A ☐   **Patient B** ☐

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7. The following two patients have both been referred with sepsis.

Please keep in mind:

1) Please imagine you are specifically <u>unable to attend the patients</u> and must rely on this information provided by a senior registrar whose opinion is reliable
2) The <u>patients are too unwell to provide any opinion</u> on what they would want to happen

Patient A	Patient B
89 years old	79 years old
with prostate cancer with local spread on recent staging CT; on hormonal therapy with planned radiotherapy	with established dementia. They forget many recent conversations and needs some help washing and dressing; family say they remain contented
Mobilises around the ground-floor of their home; cannot manage stairs. Has carers twice a day	Mobilises independently; walks dog daily.
NEWS of 8 *(Temp: 36.1C; Resp rate: 24; SpO2: 92% on 60% FiO2; GCS:15; Pulse: 120; Systolic BP: 140mmHg)*	NEWS of 11 (Temp: 37.7C; Resp rate: 23; SpO2: 90% on 60% FiO2; GCS: 15; Pulse: 90; Systolic BP: 85mmHg after adequate iv fluids).
Registrar saw the patient earlier and tells you that they look like they are tiring	Registrar saw the patient earlier and says that they look dreadful now
Patient is on a busy acute ward with 1 trained nurse per 4 patients; critical care outreach nurses are available to provide further support	Patient is on a busy acute ward with 1 trained nurse per 8 patients; The ward sister is worried the ward cannot cope with looking after the patient.
The patient's family say they have never discussed ICU admission or end-of life care: they will leave all the decisions to the medical team	The patient's family say that they think the patient would not want to be admitted to ICU

For each patient please indicate if you would NOT admit the patient:

Patient A ☐   **Patient B ☐**

Now assuming there is only one ICU bed currently available: Please indicate which patient you would prioritise for admission:
(If you would not admit either patient, for the purposes of this questionnaire, we would still like you to prioritise one of the patients for admission. In this case please indicate which patient you would <u>more likely</u> to admit for life-sustaining therapy)

Patient A ☐   **Patient B ☐**

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8. The following two patients have both been referred with sepsis.

Please keep in mind:

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2) The <u>patients are too unwell to provide any opinion</u> on what they would want to happen

Patient A	Patient B
39 years old	89 years old
with severe COPD (FEV1 45% predicted). 3 courses of steroids and antibiotics over the last 12 months	On hormonal therapy for local prostate cancer
Mobile to shops with family; has to rest climbing stairs.	Mobilises independently; walks dog daily.
NEWS of 5 (Temp: 37.8C; Resp rate: 22; SpO2: 96% on air; GCS: 15). Pulse: 108; systolic BP: 91mmHg after adequate iv fluids)	NEWS of 8 (Temp: 36.1C; Resp rate: 24; SpO2: 92% on 60% FiO2; GCS:15; Pulse: 120; Systolic BP: 140mmHg)
Registrar saw the patient earlier and tells you that they look like they may be tiring	Registrar saw the patient earlier and says that they look dreadful now.
Patient is on a busy acute ward with 1 trained nurse per 4 patients; critical care outreach nurses are available to provide further support	Patient is on a busy acute ward with 1 trained nurse per 8 patients; The ward sister is worried the ward cannot cope with looking after the patient.
The patient's family say that they think the patient would not want to be admitted to ICU	The patient's family say they have never discussed ICU admission or end-of life care: they will leave all the decisions to the medical team

For each patient please indicate if you would NOT admit the patient:

Patient A ☐ **Patient B** ☐

Now assuming there is only one ICU bed currently available: Please indicate which patient you would prioritise for admission:
(If you would not admit either patient, for the purposes of this questionnaire, we would still like you to prioritise one of the patients for admission. In this case please indicate which patient you would be <u>more likely</u> to admit for life-sustaining therapy)

Patient A ☐ **Patient B** ☐

9. The following two patients have both been referred with sepsis.

Please keep in mind:

1) Please imagine you are specifically <u>unable to attend the patients</u> and must rely on this information provided by a senior registrar whose opinion is reliable
2) The <u>patients are too unwell to provide any opinion</u> on what they would want to happen

Patient A	Patient B
89 years old	79 years old
with a history of a previous MI; recent echo shows LVH and a mildly decreased ejection fraction; on ramipril.	who has recently been referred by GP to a memory clinic for a suspected diagnosis of dementia; otherwise well.
Mobile to shops with family; has to rest climbing stairs	Mobilises around the ground-floor of their home; cannot manage stairs. Has carers twice a day
NEWS of 5 (Temp: 37.8C; Resp rate: 22; SpO2: 96% on air; GCS: 15). Pulse: 108; systolic BP: 91mmHg after adequate iv fluids)	NEWS of 8 (Temp: 36.1C; Resp rate: 24; SpO2: 92% on 60% FiO2; GCS:15; Pulse: 120; Systolic BP: 140mmHg)
Registrar saw the patient earlier and says that they look dreadful now	Registrar has seen the patient and tells you that they are stable, and "holding their own"
Patient is on a busy acute ward with 1 trained nurse per 4 patients; critical care outreach nurses are available to provide further support	Patient is on a busy acute ward with 1 trained nurse per 8 patients; The ward sister is worried the ward cannot cope with looking after the patient.
The patient's family have already approached the ward doctors and said that they insist on the patient being admitted to ICU	The patient's family say they have never discussed ICU admission or end-of life care: they will leave all the decisions to the medical team

For each patient please indicate if you would NOT admit the patient:

Patient A ☐   **Patient B** ☐

Now assuming there is only one ICU bed currently available: Please indicate which patient you would prioritise for admission:
(If you would not admit either patient, for the purposes of this questionnaire, we would still like you to prioritise one of the patients for admission. In this case please indicate which patient you would be <u>more likely</u> to admit for life-sustaining therapy)

Patient A ☐   **Patient B** ☐

10. The following two patients have both been referred with sepsis.

Please keep in mind:

1) Please imagine you are specifically <u>unable to attend the patients</u> and must rely on this information provided by a senior registrar whose opinion is reliable
2) The <u>patients are too unwell to provide any opinion</u> on what they would want to happen

Patient A	Patient B
79 years old	39 years old
with moderate COPD (FEV1 65% predicted). One course of steroids and antibiotics in the last year	with prostate cancer - a recent CT scan revealed bone metastases
Mobile to shops with family; has to rest climbing stairs.	Mobilises independently; walks dog daily.
NEWS of 5 (Temp: 37.8C; Resp rate: 22; SpO2: 96% on air; GCS: 15). Pulse: 108; systolic BP: 91mmHg after adequate iv fluids)	NEWS of 8 *(Temp: 36.1C; Resp rate: 24; SpO2: 92% on 60% FiO2; GCS:15; Pulse: 120; Systolic BP: 140mmHg)*
Registrar saw the patient earlier and tells you that they look like they are tiring	Registrar saw the patient earlier and says that they look dreadful now
Patient is on a busy acute ward with 1 trained nurse per 8 patients; The ward sister is worried the ward cannot cope with looking after the patient.	Patient is on a busy acute ward with 1 trained nurse per 4 patients; critical care outreach nurses are available to provide further support
The patient's family have already approached the ward doctors and said that they insist on the patient being admitted to ICU	The patient's family say they have never discussed ICU admission or end-of life care: they will leave all the decisions to the medical team

For each patient please indicate if you would NOT admit the patient:

Patient A ☐   **Patient B** ☐

Now assuming there is only one ICU bed currently available: Please indicate which patient you would prioritise for admission:
(If you would not admit either patient, for the purposes of this questionnaire, we would still like you to prioritise one of the patients for admission. In this case please indicate which patient you would be <u>more likely</u> to admit for life-sustaining therapy)

Patient A ☐   **Patient B** ☐

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11. The following two patients have both been referred with sepsis.

Please keep in mind:

1) Please imagine you are specifically <u>unable to attend the patients</u> and must rely on this information provided by a senior registrar whose opinion is reliable
2) The <u>patients are too unwell to provide any opinion</u> on what they would want to happen

Patient A	Patient B
89 years old	79 years old
with ischaemic heart disease; moderate heart failure on echo, on regular furosemide and ramipril	On hormonal therapy for local prostate cancer
Mobilises around the ground-floor of their home; cannot manage stairs. Has carers twice a day	Mobile to shops with family; has to rest climbing stairs
NEWS of 8 *(Temp: 36.1C; Resp rate: 24; SpO2: 92% on 60% FiO2; GCS:15; Pulse: 120; Systolic BP: 140mmHg)*	NEWS of 5 *(Temp: 37.8C; Resp rate: 22; SpO2: 96% on air; GCS: 15). Pulse: 108; systolic BP: 91mmHg after adequate iv fluids)*
Registrar saw the patient earlier and tells you that they look like they are tiring	Registrar has seen the patient and tells you that they are stable, and "holding their own"
Patient is on a busy acute ward with 1 trained nurse per 8 patients; The ward sister is worried the ward cannot cope with looking after the patient.	Patient is on a busy acute ward with 1 trained nurse per 4 patients; critical care outreach nurses are available to provide further support
The patient's family say that they think the patient would not want to be admitted to ICU	The patient's family say they have never discussed ICU admission or end-of life care: they will leave all the decisions to the medical team

For each patient please indicate if you would NOT admit the patient:

Patient A ☐   Patient B ☐

Now assuming there is only one ICU bed currently available: Please indicate which patient you would prioritise for admission:
(If you would not admit either patient, for the purposes of this questionnaire, we would still like you to prioritise one of the patients for admission. In this case please indicate which patient you would be <u>more likely</u> to admit for life-sustaining therapy)

Patient A ☐   Patient B ☐

12. The following two patients have both been referred with sepsis.

Please keep in mind:

1) Please imagine you are specifically <u>unable to attend the patients</u> and must rely on this information provided by a senior registrar whose opinion is reliable
2) The <u>patients are too unwell to provide any opinion</u> on what they would want to happen

Patient A	Patient B
39 years old	89 years old
with mild dementia, started on Aricept in the last month	with established dementia. They forget many recent conversations and needs some help washing and dressing; family say they remain contented
Mobilises around the ground-floor of their home; cannot manage stairs. Has carers twice a day	Mobile to shops with family; has to rest climbing stairs
NEWS of 5 (Temp: 37.8C; Resp rate: 22; SpO2: 96% on air; GCS: 15). Pulse: 108; systolic BP: 91mmHg after adequate iv fluids)	NEWS of 11 *(Temp: 37.7C; Resp rate: 23; SpO2: 90% on 60% FiO2; GCS: 15; Pulse: 90; Systolic BP: 85mmHg after adequate iv fluids)*
Registrar saw the patient earlier and says that they look dreadful now	Registrar saw the patient earlier and tells you that they look like they are tiring
Patient is on a busy acute ward with 1 trained nurse per 8 patients; The ward sister is worried the ward cannot cope with looking after the patient.	Patient is on a busy acute ward with 1 trained nurse per 4 patients; critical care outreach nurses are available to provide further support
The patient's family say that they think the patient would not want to be admitted to ICU	The patient's family say they have never discussed ICU admission or end-of life care: they will leave all the decisions to the medical team

For each patient please indicate if you would NOT admit the patient:

<div align="center">

Patient A ☐   **Patient B** ☐

</div>

Now assuming there is only one ICU bed currently available: Please indicate which patient you would prioritise for admission:
(If you would not admit either patient, for the purposes of this questionnaire, we would still like you to prioritise one of the patients for admission. In this case please indicate which patient you would be <u>more likely</u> to admit for life-sustaining therapy)

<div align="center">

Patient A ☐   **Patient B** ☐

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13. The following two patients have both been referred with sepsis.

Please keep in mind:

1) Please imagine you are specifically <u>unable to attend the patients</u> and must rely on this information provided by a senior registrar whose opinion is reliable
2) The <u>patients are too unwell to provide any opinion</u> on what they would want to happen

Patient A	Patient B
66 years old	79 years old
with heart failure; echo shows severe LV impairment. They have had numerous long hospital admissions. They have a biventricular pacemaker and are on spironolactone and b.d. furosemide.	who has recently been referred by GP to a memory clinic for a suspected diagnosis of dementia; otherwise well.
Mobile to shops with family; has to rest climbing stairs.	Mobilises around the ground-floor of their home; cannot manage stairs. Has carers twice a day.
NEWS of 11 *(Temp: 37.7C; Resp rate: 23; SpO2: 90% on 60% FiO2; GCS: 15; Pulse: 90; Systolic BP: 85mmHg after adequate iv fluids)*	NEWS of 8 *(Temp: 36.1C; Resp rate: 24; SpO2: 92% on 60% FiO2; GCS:15; Pulse: 120; Systolic BP: 140mmHg)*
Registrar has seen the patient and tells you that they are stable, and "holding their own"	Registrar saw the patient earlier and says that they look dreadful now
Patient is on a busy acute ward with 1 trained nurse per 8 patients; The ward sister is worried the ward cannot cope with looking after the patient.	Patient is on a busy acute ward with 1 trained nurse per 4 patients; critical care outreach nurses are available to provide further support
The patient's family say they have never discussed ICU admission or end-of life care: they will leave all the decisions to the medical team	The patient's family have already approached the ward doctors and said that they insist on the patient being admitted to ICU

*For each patient please indicate if you would NOT admit the patient***:**

Patient A ☐   Patient B ☐

*Now assuming there is only one ICU bed currently available: Please indicate which patient you would prioritise for admission***:**
(If you would not admit either patient, for the purposes of this questionnaire, we would still like you to prioritise one of the patients for admission. In this case please indicate which patient you would be <u>more likely</u> to admit for life-sustaining therapy)

Patient A ☐   Patient B ☐

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14. The following two patients have both been referred with sepsis.

Please keep in mind:

1) Please imagine you are specifically <u>unable to attend the patients</u> and must rely on this information provided by a senior registrar whose opinion is reliable
2) The <u>patients are too unwell to provide any opinion</u> on what they would want to happen

Patient A	Patient B
79 year old	66 year old
with mild dementia, started on Aricept in the last month	with moderate COPD (FEV1 65% predicted). One course of steroids and antibiotics in the last year
Mobile to shops with family; has to rest climbing stairs.	Mobilises independently; walks dog daily.
NEWS of 8 (Temp: 36.1C; Resp rate: 24; SpO2: 92% on 60% FiO2; GCS:15; Pulse: 120; Systolic BP: 140mmHg)	NEWS of 11 (Temp: 37.7C; Resp rate: 23; SpO2: 90% on 60% FiO2; GCS: 15; Pulse: 90; Systolic BP: 85mmHg after adequate iv fluids).
Registrar saw the patient earlier and tells you that they look like they are tiring	Registrar has seen the patient and tells you that they are stable, and "holding their own"
Patient is on a busy acute ward with 1 trained nurse per 8 patients; The ward sister is worried the ward cannot cope with looking after the patient.	Patient is on a busy acute ward with 1 trained nurse per 4 patients; critical care outreach nurses are available to provide further support
The patient's family have already approached the ward doctors and said that they insist on the patient being admitted to ICU	The patient's family say they have never discussed ICU admission or end-of life care: they will leave all the decisions to the medical team

For each patient please indicate if you would NOT admit the patient:

Patient A ☐   Patient B ☐

Now assuming there is only one ICU bed currently available: Please indicate which patient you would prioritise for admission:
(If you would not admit either patient, for the purposes of this questionnaire, we would still like you to prioritise one of the patients for admission. In this case please indicate which patient you would be <u>more likely</u> to admit for life-sustaining therapy)

Patient A ☐   Patient B ☐

15. The following two patients have both been referred with sepsis.

Please keep in mind:

3) Please imagine you are specifically <u>unable to attend the patients</u> and must rely on this information provided by a senior registrar whose opinion is reliable
4) The <u>patients are too unwell to provide any opinion</u> on what they would want to happen

Patient A	Patient B
39 year old	89 year old
with a history of a previous MI; recent echo shows LVH and a mildly decreased ejection fraction; on ramipril.	with established dementia. They forget many recent conversations and needs some help washing and dressing; family say they remain contented
Mobilises independently; walks dog daily.	Mobilises around the ground-floor of their home; cannot manage stairs. Has carers twice a day.
NEWS of 11 (Temp: 37.7C; Resp rate: 23; SpO2: 90% on 60% FiO2; GCS: 15; Pulse: 90; Systolic BP: 85mmHg after adequate iv fluids).	NEWS of 5 (Temp: 37.8C; Resp rate: 22; SpO2: 96% on air; GCS: 15). Pulse: 108; systolic BP: 91mmHg after adequate iv fluids)
Registrar saw the patient earlier and says that they look dreadful now.	Registrar has seen the patient and tells you that they are stable, and "holding their own"
Patient is on a busy acute ward with 1 trained nurse per 8 patients; The ward sister is worried the ward cannot cope with looking after the patient.	Patient is on a busy acute ward with 1 trained nurse per 4 patients; critical care outreach nurses are available to provide further support
The patient's family have already approached the ward doctors and said that they insist on the patient being admitted to ICU	The patient's family say that they think the patient would not want to be admitted to ICU

For each patient please indicate if you would NOT admit the patient:

<p align="center">Patient A ☐   Patient B ☐</p>

Now assuming there is only one ICU bed currently available: Please indicate which patient you would prioritise for admission:
(If you would not admit either patient, for the purposes of this questionnaire, we would still like you to prioritise one of the patients for admission. In this case please indicate which patient you would be <u>more likely</u> to admit for life-sustaining therapy)

<p align="center">Patient A ☐   Patient B ☐</p>

Part 2: Questions about you

Q16. What is your gender? (Please tick one box)
- ☐ Male
- ☐ Female

Q17. What is your age?
Age (Please specify): …..

Q18. How long have you worked in intensive care in total?
Number of years (Please specify): …..

About your ICU

Q19. What is the number of beds in the primary ICU in which you work?
Number of ICU beds (Please specify): …..

Q20. Do you work in a University Hospital? (Please tick one box)
- ☐ Yes
- ☐ No

Your views on life prolonging medical treatment

We are interested in whether clinicians' personal views on how they would want to be treated influence how they make decisions. The following questions ask you to consider what you would want for yourself if you were in the situation described.

Q21. If I was diagnosed as having a terminal illness, with less than 12 months to live, I would want to undergo invasive ventilation (Please tick one box)
- ☐ Strongly Disagree
- ☐ Disagree
- ☐ Neutral
- ☐ Agree
- ☐ Strongly Agree

Q22. If I was diagnosed as having a terminal illness, with less than 12 months to live, I would want to be admitted to ICU for other organ support (Please tick one box)
- ☐ Strongly Disagree
- ☐ Disagree
- ☐ Neutral
- ☐ Agree
- ☐ Strongly Agree

Q23. If I was diagnosed as having a terminal illness, with less than 12 months to live, I would want to undergo CPR (Please tick one box)

- ☐ Strongly Disagree
- ☐ Disagree
- ☐ Neutral
- ☐ Agree
- ☐ Strongly Agree

Q24. If I was suffering from severe dementia, I would want to undergo invasive ventilation (Please tick one box)

- ☐ Strongly Disagree
- ☐ Disagree
- ☐ Neutral
- ☐ Agree
- ☐ Strongly Agree

Q25. If I was suffering from severe dementia, I would want to be admitted to ICU for other organ support (Please tick one box)

- ☐ Strongly Disagree
- ☐ Disagree
- ☐ Neutral
- ☐ Agree
- ☐ Strongly Agree

Q26. If I was suffering from severe dementia, I would want to undergo CPR (Please tick one box)

- ☐ Strongly Disagree
- ☐ Disagree
- ☐ Neutral
- ☐ Agree
- ☐ Strongly Agree

Q27. One potential risk of ICU is that a patient's life is prolonged but they are left with a severe disability which may be unacceptable to them. Please indicate on the following table what level of risk you would accept for yourself in order to opt for life-sustaining care on ICU over end-of-life palliative care?

Chance of surviving in current functional state	Chance of surviving with severe disability	Please tick
1%	99%	
5%	95%	
10%	90%	
15%	85%	
20%	80%	
25%	75%	
50%	50%	
75%	25%	
Higher than 75%	Lower than 25%	
If higher than 75% please specify	If lower than 25% please specify	

Part 3: Questions about the choice tasks

Q28. How difficult did you find the choice tasks (Please tick one box)
- ☐ Very difficult
- ☐ Difficult
- ☐ Neutral
- ☐ Easy
- ☐ Very easy

Q29. How reflective of real life practice did you find the choice tasks? (Please tick one box)
- ☐ Poor
- ☐ Fair
- ☐ Good
- ☐ Very good
- ☐ Excellent

Q30. Do you feel there was enough information about the patients? (Please tick one box)
- ☐ Far Too Little (*Some key features have been omitted*)
- ☐ Too Little
- ☐ About Right (*All key features have been identified*)
- ☐ Too Much
- ☐ Far Too Much (*More information than needed to make admission decisions*)

Q31. Would you recommend this questionnaire to a colleague? (Please tick one box)
- ☐ Not probable
- ☐ Somewhat improbable
- ☐ Neutral
- ☐ Somewhat probable
- ☐ Very probable

Q32. Did you learn something about ICU-related decision making? (Please tick one box)
- ☐ None
- ☐ Little
- ☐ Some
- ☐ Substantial

Q33. Where did you complete the questionnaire? (Please tick one box)
- ☐ At work between clinical commitments
- ☐ At work in non-clinical time
- ☐ While travelling/commuting
- ☐ At home
- ☐ Other

Thank you for taking the time to complete this questionnaire. The answers you have given will help us to understand how decisions are made on behalf of acutely and severely ill patients.

This study is part of an NIHR funded project that is on the national research portfolio. Institutions and speciality groups collect data on recruitment into these studies to demonstrate their research capabilities. These data feed into the process of allocating future funding to the NIHR Local Clinical Research Networks (LCRNs) to ensure that infrastructure/ NHS service support are directed to where they are required.

So that we can accredit your institution with your participation in this study please give your name and institution in the boxes below. This information will be separated from your answers to the questions before the data is supplied to the researchers to prevent anonymity. You do not have to provide this information if you would prefer not to.

34. Name

35. Hospital

Thank you again for completing this questionnaire

Christopher Bassford Chief Investigator
Mandy Ryan DCE lead

Thank you, please click Save to finish

Save