1. Welcome to the Global Cardiopulmonary Bypass Survey

Dear colleague,

Thank you for agreeing to participate in this research project. It consists of 17 questions, and should only take 5 - 10 minutes to complete.

As a reminder, participation is entirely voluntary, and results will be deindentified and kept confidential. Our hope is that this survey will allow us to assess similarities and differences in adult cardiopulmonary bypass practice between various regions around the world. It has been approved by various professional bodies, including the SCA, EACTA and many others.

By continuing with this survey, you are indicating that you have read and understood our participant information form and consent to participation in the study. This form can be found here.

It is possible that you may have received this survey from more than one source, as we have chosen to distribute it through the various regional specialist societies. If this is the case, please do not complete the survey more than once

Thank you once more for agreeing to assist us with this important reseach project.

On behalf of the investigators,

Yours Sincerely,

Dr Lachlan Miles MBBS (Hons.) FANZCA
Clinical Fellow
Department of Anaesthesia and Intensive Care
Papworth Hospital NHS Foundation Trust
Cambridge, United Kingdom

Global Cardiopulmonary Bypass Survey
2. Previous participation
1. Have you completed this survey already?
Yes
○ No

3. Institution location
2. Which of the following best describes the region to which your institution belongs?
North and Central America
Europe
Middle East
Asia
○ Africa
South America
Australia/New Zealand
3. To what country does your institution belong?

4. Anticoagulation for cardiopulmonary bypass.
4. What is the minimum activated clotting time (ACT) that your institution considers safe before initiating cardiopulmonary bypass?
Less than 350 seconds
350 seconds
400 seconds
450 seconds
500 seconds
550 seconds or greater
My institution does not use activated clotting time

5. Institutional case load

These questions assess the volume and demographics of "on-pump" of performed at your institution.	cardiac surgery cases
5. What is the approximate number of cases requiring cardiopulmonary bypainstitution each year?	ass performed by your
Less than 250 cases	
251 to 500 cases	
501 to 750 cases	
751 to 1000 cases	
More than 1000 cases	
6. Please describe the rough percentage that each of the following case type "on pump" case load. Please do not include "off-pump" cases. The sum of a 100%. Isolated bypass grafting	
or isolated bypass granting or isolated valve repair/replacement	
Combined bypass grafting and valve replair/replacement	
Multiple valve repair or replacement	
Redo bypass grafting or valve repair/replacement	
Thoracic aortic surgery	
Heart transplant, ECMO or ventricular assist devices	
	-

6. Cardioplegia practice

These questions assess the cardioplegia preferences and practices of your institution.
7. Which of the following techniques are used to arrest myocardial contraction in your institution?
Chemical cardioplegia
Cross-clamp ventricular fibrillation
Both techniques are used
9. If applicable, what is the abomical cardioplagic technique most frequently used at your institution?
8. If applicable, what is the chemical cardioplegia technique most frequently used at your institution?
Blood cardioplegia
Crystalloid cardioplegia
Both techniques are used with equal frequency
Chemical cardioplegia is not used at my institution
9. If blood cardioplegia is used at your institution, what is the ratio of blood to crystalloid that you most commonly use?
Blood cardioplegia is not used at my institution
<u> </u>
<u>2:1</u>
3:1
<u>4:1</u>
5:1
Other (please specify)
10. Which of the following best describes the most frequently used cardioplegia solution in your institution?
St Thomas' solution
Bretschneider solution/Custodiol HTK
University of Wisconscin solution
Celsior
Other (please specify)

11. Do you routinely use substrate enhancement in your cardioplegia solution?
Yes
○ No
12. What substrate enhancement do you routinely use in your cardioplegia solution?
Glucose
Calcium channel blockers
THAM
Aspartate
Glutamate
Esmolol
Other (please specify)

7. Priming solution practice

These questions assess the pump priming preferences and practices of your institution.
13. Which of the following are used as the final priming solutions of cardiopulmonary bypass circuits in your institution? More than one answer may be selected.
Crystalloid only
Colloid only
Crystalloid and colloid
Retrograde autologous perfusion
14. If crystalloid is used to prime your cardiopulmonary bypass circuit, which of the following do you most frequently use?
0.9% normal saline
Hartmann's or Ringer's solution
Plasmalyte 148
My institution does not use crystalloid in our priming solution
Other (please specify)
15. If a colloid is used to prime your cardiopulmonary bypass circuit, which of the following do you most frequently use? 4% albumin
20% albumin
Hydroxyethyl starch
Gelatin
My insitution does not use colloid in our priming solution
Other (please specify)
16. Do you routinely add any additional compounds to your pump priming solution?
Yes
○ No

17. What additives do you routinely use in your pump priming solution? More than one answer may be
selected.
Heparin —
Bicarbonate
Mannitol
Corticosteroids
Calcium
Other (please specify)

8. Thank you for completing the Global Cardiopulmonary Bypass Survey

Dear colleague,

Thank you for participating in this research project.

If you have any questions, comments, or concerns, please feel free to contact the study investigators Dr Lachlan Miles or Dr Florian Falter at GlobalCPBSurvey@gmail.com.

On behalf of the investigators,

Yours Sincerely,

Dr Lachlan Miles MBBS (Hons.) FANZCA Clinical Fellow Department of Anaesthesia and Intensive Care Papworth Hospital NHS Foundation Trust Cambridge, United Kingdom