

Electronic Supplementary Digital Content (SDC)

SDC 1 - CVI

The survey's content reliability score was calculated using SPSS version 23, resulting in Cronbach's alpha .671, based on 38 items. The Content Validity Index for each item and the entire scale was calculated by hand. The total number of panel members who selected a question to be either highly relevant or quite relevant was combined, and divided by 8 (the total number of Advisory Panel members), resulting in each Item CVI (I-CVI) (I-CVI Range 0.375-1). As recommended, to achieve excellent content validity a panel consisting of 6 to 10 people should assess each item in the scale and achieve an I-CVI of .78.^{31,32} The Scale CVI (S-CVI) was calculated by adding together the total number of individual I-CVI's, divided by 38 items in the instrument, to produce an average and S-CVI of .842. The S-CVI could be recalculated following the amendments made to the instrument, yet given 3 questions were deleted, 7 questions were added and 8 questions were modified as a result of Advisory Panel feedback, the figure would be inaccurate.

SDC 2 - Survey instrument

The physical examination performed on potential organ and tissue donors

Section 1: Behaviours / Practice

Q1 In your jurisdiction, who completes the potential donor physical examination? Select all that apply

- ☐ DSN Donation Specialist Nurse
- ☐ DSC Donation Specialist Coordinator
- ☐ DSNC Donation Specialist Nursing Coordinator
- ☐ DSM Donation Specialist Medical
- ☐ ICU Doctor
- ☐ Other _____

Q2 On average, how many minutes does it take you to complete the potential donor physical examination?

Q3 What techniques do you use during the donor physical examination? Select all that apply.

- ☐ Observation
- ☐ Auscultation
- ☐ Palpation
- ☐ Percussion

Q4 Please list 5 physical findings that you would identify as potentially high risk?

Q5 Have you ever identified an abnormality during your potential donor physical examination that has stopped the donation from going ahead?

- ☐ Yes
- ☐ No

Skip To: Q7 If Q5 = No

Q6 What was the physical examination finding and can you briefly describe what happened?

Q7 What main steps best describe how you perform the physical examination? Please list the main steps

Q8 What are the steps you take if you identify an abnormal or suspicious finding?

Q9 Have you ever requested someone else look at an abnormal finding to seek a second opinion?

- Yes
- No

Skip To: Q11 If Q9 = No

Q10 If you have requested someone else look at an abnormal finding, who do you ask in the first instance?

Q11 In terms of contacting the donor's GP, when is the ideal time to complete the donor physical examination?

- BEFORE contacting the donor's GP
- AFTER contacting the donor's GP
- I'm not sure

Q12 When a physical examination is performed, what best describes your practice. Do you:

- Have someone assist you in positioning / turning the patient during the examination
- Perform the physical examination without repositioning the patient / turning the patient

Q13 How many donor physical examinations have you performed in the past 12 months?

Q14 Has education +/- training to perform the donor physical examination been provided to you?

- Yes
- No

Skip To: End of Block If Q14 = No

Q15 If education +/- training has been received, when did the training occur? For example, during your orientation, ongoing professional development

Q16 a) How was the education and training delivered? For example, power point presentation, eLearning, simulation...

b) Briefly outline the content, focus or key messages of the training you received?

Q17 Did the education +/- training include how to document physical examination findings?

- Yes
- No

Q18 How would you describe the value of the training?

- Extremely valuable
- Very valuable
- Moderately valuable
- Slightly valuable
- Not valuable at all

End of Block

Section 2: Knowledge

Please select your level of agreement to the following statements

Q19 The appearance of a traumatic scar is obviously different to a surgical scar

- Strongly agree
- Somewhat agree
- Neither agree nor disagree
- Somewhat disagree
- Strongly disagree

Q20 There is no expectation to palpate a potential donor's lymph nodes

- Strongly agree
- Somewhat agree
- Neither agree nor disagree
- Somewhat disagree
- Strongly disagree

Q21 The appearance of the nipple or the skin on the breast can give an indication of cancer

- Strongly agree
- Somewhat agree
- Neither agree nor disagree
- Somewhat disagree
- Strongly disagree

Q22 Observing the donor's general physical appearance in relation to their age should be documented as part of the physical examination

- Strongly agree
- Somewhat agree
- Neither agree nor disagree
- Somewhat disagree
- Strongly disagree

Q23 During the physical examination, listening to the donor's lungs with a stethoscope is important

- ☐ Strongly agree
- ☐ Somewhat agree
- ☐ Neither agree nor disagree
- ☐ Somewhat disagree
- ☐ Strongly disagree

Q24 Transplant units are very interested in the donor physical examination

- ☐ Strongly agree
- ☐ Somewhat agree
- ☐ Neither agree nor disagree
- ☐ Somewhat disagree
- ☐ Strongly disagree

Q25 Breast tissue should be palpated as part of the potential donor physical examination

- ☐ Strongly agree
- ☐ Somewhat agree
- ☐ Neither agree nor disagree
- ☐ Somewhat disagree
- ☐ Strongly disagree

Q26 It is ideal for the physical examination to be performed by the person who conducts the medical social questionnaire with the donor's family

- ☐ Strongly agree
- ☐ Somewhat agree
- ☐ Neither agree nor disagree
- ☐ Somewhat disagree
- ☐ Strongly disagree

Q27 It is expected that all adult girth measurements are taken at the xiphoid process

- ☐ Strongly agree
- ☐ Somewhat agree
- ☐ Neither agree nor disagree
- ☐ Somewhat disagree
- ☐ Strongly disagree

Q28 There is a lot of pressure to identify the difference between a malignant or benign mole

- ☐ Strongly agree

- Somewhat agree
- Neither agree nor disagree
- Somewhat disagree
- Strongly disagree

Q29 It's important to always examine the front and back of the donor

- Strongly agree
- Somewhat agree
- Neither agree nor disagree
- Somewhat disagree
- Strongly disagree

Q30 The potential donor's genital area doesn't need to be inspected

- Strongly agree
- Somewhat agree
- Neither agree nor disagree
- Somewhat disagree
- Strongly disagree

Q31 Thoroughly looking in the donor's mouth is always part of the examination

- Strongly agree
- Somewhat agree
- Neither agree nor disagree
- Somewhat disagree
- Strongly disagree

Q32 The septum of the nose should be inspected for erosion

- Strongly agree
- Somewhat agree
- Neither agree nor disagree
- Somewhat disagree
- Strongly disagree

Q33 The transplant units often enquire about the donor's physical examination

- Strongly agree
- Somewhat agree
- Neither agree nor disagree
- Somewhat disagree
- Strongly disagree

Q34 It's obvious if a tattoo was performed by an unprofessional tattooist

- ☐ Strongly agree
- ☐ Somewhat agree
- ☐ Neither agree nor disagree
- ☐ Somewhat disagree
- ☐ Strongly disagree

Q35 The physical examination is useless

- ☐ Strongly agree
- ☐ Somewhat agree
- ☐ Neither agree nor disagree
- ☐ Somewhat disagree
- ☐ Strongly disagree

Q36 The donor's weight is easy to estimate

- ☐ Strongly agree
- ☐ Somewhat agree
- ☐ Neither agree nor disagree
- ☐ Somewhat disagree
- ☐ Strongly disagree

Q37 Palpating the donor's abdomen is not a requirement of the physical examination

- ☐ Strongly agree
- ☐ Somewhat agree
- ☐ Neither agree nor disagree
- ☐ Somewhat disagree
- ☐ Strongly disagree

Q38 Sites of intravenous drug use can be hidden between the toes

- ☐ Strongly agree
- ☐ Somewhat agree
- ☐ Neither agree nor disagree
- ☐ Somewhat disagree
- ☐ Strongly disagree

End of Block

Section 3: Attitudes

Q39 I feel confident to identify signs of potential risk when I perform the donor physical examination

- ☐ Strongly agree
- ☐ Somewhat agree
- ☐ Neither agree nor disagree
- ☐ Somewhat disagree
- ☐ Strongly disagree

Q40 The physical examination is an important component of donor screening

- ☐ Strongly agree
- ☐ Somewhat agree
- ☐ Neither agree nor disagree
- ☐ Somewhat disagree
- ☐ Strongly disagree

Q41 Practice is consistent around the country when performing the physical examination on all potential donors

- ☐ Strongly agree
- ☐ Somewhat agree
- ☐ Neither agree nor disagree
- ☐ Somewhat disagree
- ☐ Strongly disagree

Q42 A national guideline for performing the potential donor physical examination would be helpful

- ☐ Strongly agree
- ☐ Somewhat agree
- ☐ Neither agree nor disagree
- ☐ Somewhat disagree
- ☐ Strongly disagree

End of Block

Section 4: Demographics

Q43 Where are you working?

- | | |
|---------------------------|---------------------------|
| <input type="radio"/> ACT | <input type="radio"/> SA |
| <input type="radio"/> NSW | <input type="radio"/> TAS |
| <input type="radio"/> NT | <input type="radio"/> VIC |
| <input type="radio"/> QLD | <input type="radio"/> WA |

Q44 Are you currently employed part time or full time?

- ☐ Full time
- ☐ Part time

Q45 How many years have you worked in the organ and tissue donation sector?

Q46 What is your role?

- ☐ Donation Specialist Coordinator (DSC)
- ☐ Donation Specialist Nurse (DSN)
- ☐ Donation Specialist Nursing Coordinator (DSNC)

Q47 What is your professional background prior to working within the organ and tissue donation sector? If nursing please also include the area, for example, nursing (ICU / ED / OT...), allied health, other...

Q48 Have you completed any post graduate qualifications?

- ☐ Yes
- ☐ No

Q49 Are there any other comments you would like to make?

Q50 If further information is required about the potential donor physical examination, are you interested in being contacted for a phone interview? If so, please email

Justine.a.holloway@act.gov.au and provide your contact details.

If not, please leave the answer box blank.

End of Block