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OYEKAN ET AL.

INCREASING QUALITY AND FREQUENCY OF GOALS-OF-CARE DOCUMENTATION IN THE HIGHEST-RISK SURGICAL CANDIDATES. ONE-YEAR

Results of the Surgical Pause Program

http://dx.doi.org/10.2106/JBJS.OA.22.00107

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1 The following content was supplied by the authors as supporting material and has not

been copy-edited or verified by JBJS.

4 Appendix A. Goals of Care Documentation Evaluation

5 GOC documentation trained qualitative analysts utilized the codebook and electronic submission form

demonstrated in the image below to submit their evaluations of electronic records. This survey was

created using Microsoft Forms and the output format was Microsoft Excel spreadsheet. The survey has

11 possible questions with 7 questions which must answered at minimum. A "no" answer to Question 3

prompts the addition of 1 more question which evaluates if the GOC documentation is in an alternative,

inappropriate location. A "yes" answer to Question 5 prompts the addition of 4 more questions which

evaluate 1) clear statement and discussion of prognosis, 2) clear articulation of the patient's values and

goals; 3) clear and detailed articulation of the next steps in clinical management (e.g. change in code

status, time limited trial), and 4) narrative description of the conversations and decision-making process.

The form questions are as follows:

1) What is the study patient's FIN number [Freetext]

2) What is the study patient's last name? [Freetext]

3) Is there a GOC note in the appropriate location? Look in ortho consult note, H&P (ortho, ICU,

hospitalist), Progress note (ortho, ICU, hospitalist), or GOC powernote in GOC section. [Yes or

Nol

4) [Only if "No" to question 3] If GOC note is not documented in the appropriate location, is there

clear GOC documentation in an alternate, inappropriate location? i.e. Ortho attending attestation,

ortho operative note, H&P, or progress note by ortho, ICU, or Hospitalist services? [Yes or No]

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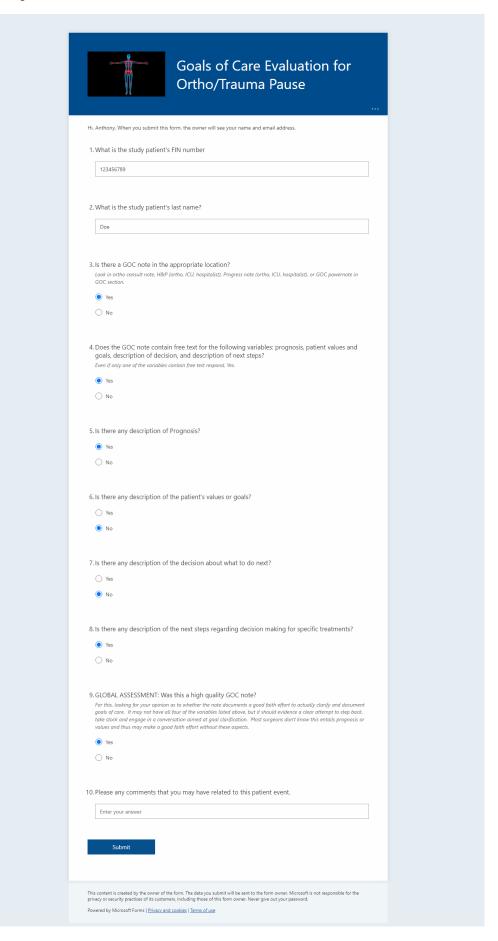
- 5) Does the GOC note contain free text for the following variables: prognosis, patient values and goals, description of decision, and description of next steps? Even if only one of the variables contain free test respond, Yes. [Yes or No]
- 6) [Only if "Yes" to Q4] Is there any description of Prognosis? [Yes or No]
- 7) [Only if "Yes" to Q4] Is there any description of the patient's values or goals? [Yes or No]
- 8) [Only if "Yes" to Q4] Is there any description of the decision about what to do next? [Yes or No]
 - 9) [Only if "Yes" to Q4] Is there any description of the next steps regarding decision making for specific treatments? [Yes or No]
 - 10) GLOBAL ASSESSMENT: Was this a high quality GOC note? For this, looking for your opinion as to whether the note documents a good faith effort to actually clarify and document GOC. It may not have all four of the variables listed above, but it should evidence a clear attempt to step back, take stock and engage in a conversation aimed at goal clarification. Most surgeons don't know this entails prognosis or values and thus may make a good faith effort without these aspects. [Yes or No]
 - 11) Please any comments that you may have related to this patient event. [Freetext]

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Appendix B. Goals of Care Documentation Interface

GOC documentation was indented to be recorded within a predetermined section of the medical record using the note template reproduced below. A GOC note within this note template constituted a note within an "appropriate location". Trained qualitative analysts reviewed the medical record for the presence of goals of care documentation within the intended section or anywhere otherwise within the electronic medical record, rating each document with codebook in Appendix A.

	Goals of Care/Family Meeting Information
Clinicians attending	Attending Physician / Bedside nurse / Intensivist - Critical Care / Palliative care service / PCP / Resident / Social Worker / Subspecialty physician / OTHER===
Family members attending	Patient / Spouse/Partner / Parent / Child / Sibling / Friend / OTHER
Topics Discussed	Disease Information / Prognosis / Patient values and preferences / Current treatments / Option for future treatments / Patient-family understanding of condition and goals of treatment / Preferred setting of future care if applicable / Advanced directive / OTHER
Main points of conversation and decisions that were made	Free Text conversation and decisions
What is the followup plan with communicating with the family	Free Text followup plan