

Appendix 1 – Procurement Travel Survey Questions

1. Please enter the name of your Transplant Program. (These data will not be released, and are collected ONLY for assessment of breadth of responses.)
2. What UNOS Region is your center in? (These data will not be released, and are collected ONLY for assessment of breadth of responses.)
3. What DSA is your center in? (These data will not be released, and are collected ONLY for assessment of breadth of responses.)
4. How many years have you been practicing transplant surgery?
5. Are you currently a transplant surgery fellow?
6. Please specify the organ(s) that you personally transplant (choose all that apply).

Heart
Lung
Liver
Kidney
Pancreas
Intestine
None of the above

7. Please specify the organ(s) that your center transplants (choose all that apply).

Heart
Lung
Liver
Kidney
Pancreas
Intestine
None of the above

8. How many deceased donor organ procurement operations did you personally perform between in the last 12 months?

0
1-10
11-20
21-30
31-40
41-50
51-60
61+

9. Which of the following types of transportation were used in these deceased donor organ procurement operations? (Choose all that apply)

Fixed wing aircraft
Helicopter
Ambulance
Vehicle owned and operated by the OPO
Hired vehicle with a professional driver (such as taxi, town car, or van)
Your personal car (to drive to the donor hospital)
Other (please specify)
Dedicated organ procurement facility
'In-house' donors where no travel was required

10. For each of the types of transportation you specified, please indicate what percent of your procurement operations included each modality. Consider each type of transportation separately. The sum of the percentages will likely exceed 100%, unless you only took one type of transportation for each procurement operation. For example, if you took a fixed wing aircraft on all of the donors and an ambulance on all of the donors, each would be recorded as 100%.

Fixed wing aircraft
Helicopter
Ambulance
Vehicle owned and operated by the OPO
Hired vehicle with a professional driver (such as taxi, town car, or van)
Your personal car (to drive to the donor hospital)
Other (please specify)
Dedicated organ procurement facility
'In-house' donors where no travel was required

11. When traveling to a donor, how often are the following people traveling with you, besides yourself?

Always Often Sometimes Rarely Never
OPO perfusionist
Non surgeon assistant from your center
Another attending
Fellow
Resident
Medical student

12. When doing an organ recovery, who makes arrangements for travel?

Your Hospital/Transplant Center
Practice group

The OPO
Other (please specify)

13. When doing an organ recovery outside of your center for organs to be used by YOUR center, you are functioning as which of the following?

Staff/faculty member of your transplant center
Independent contractor
Employee of the OPO
Unsure
Other (please specify)

14. When doing an organ recovery outside of your center for organs to be used by YOUR center, who provides your insurance coverage against a travel related accident?

The transplant center or hospital life and disability plan
Personal life and disability plans
OPO life and disability plans
Unsure

15. When doing an organ recovery outside of your center for organs to be used by ANOTHER center, you are functioning as which of the following?

Staff/faculty member of your transplant center
Independent contractor
Employee of the OPO
Unsure
Other (please specify)

16. When doing an organ recovery outside of your center for organs to be used by ANOTHER center, who provides your insurance coverage against a travel related accident?

The transplant center or hospital life and disability plans
Personal life and disability plans
OPO life and disability plans
Unsure

17. Please rate YOUR PERSONAL preference for procurement of each type of organ which YOU transplant. If you do not transplant these organs, please leave the row blank.

Organs
Heart
Lung – brain dead donor
Lung – DCD donor
Liver – brain dead donor

Liver – DCD donor
Kidney – brain dead donor
Kidney – DCD donor
Pancreas – brain dead donor
Pancreas – DCD donor
Intestine

Responses

Always want my center to procure
Sometimes OK with another center procuring
No preference
Prefer other centers to procure

18. Please rate your understanding of YOUR CENTER'S preference for procurement of each type of organ which YOUR CENTER transplants. If your center does not transplant these organs, please leave the row blank.

Organs

Heart
Lung – brain dead donor
Lung – DCD donor
Liver – brain dead donor
Liver – DCD donor
Kidney – brain dead donor
Kidney – DCD donor
Pancreas – brain dead donor
Pancreas – DCD donor
Intestine

Responses

Always want my center to procure
Sometimes OK with another center procuring
No preference
Prefer other centers to procure

19. Please rate your understanding of the preferences of TRANSPLANT CENTERS NATIONWIDE for procurement of each type of organ.

Organs

Heart
Lung – brain dead donor
Lung – DCD donor
Liver – brain dead donor
Liver – DCD donor
Kidney – brain dead donor

Kidney – DCD donor
Pancreas – brain dead donor
Pancreas – DCD donor
Intestine

Responses

Always want my center to procure
Sometimes OK with another center procuring
No preference
Prefer other centers to procure

20. How much influence does each of the following have on the method of travel? Please answer with one of the options below for the following questions.

Variables

Preservation of organ quality
Safety of donor team
Cost
Donor hospital schedule
Recipient hospital schedule
OPO schedule

Responses

Not a consideration
Minor consideration
Moderate consideration
Dominant consideration

21. When traveling for an organ procurement, how safe do you feel?

Very Unsafe
Unsafe
Usually Safe
Safe
Very Safe

22. Consider each of the following things you might worry about while traveling for a procurement. Please indicate how often you worry about each. Please answer with one of the options below.

Variables

Fatigue of the person driving the team?
Fatigue of the person flying the team?
Mechanical failure?
Operator failure?

Weather?

My spouse or significant other worrying about me.

Responses

Never

Rarely

Sometimes

Often

Always

23. Please list the number of incidents involving GROUND TRAVEL in which YOU PERSONALLY have been involved over the course of your career. You may leave blank any squares for which you do not have an answer (i.e., only answer "0" if you know this to have never occurred).

Accident with fatalities among procurement personnel

Accident with serious injuries among procurement personnel

Accident with minor or no injuries to donor personnel

'near-miss' incident with significant danger to donor personnel

Travel-related aborted procurement or loss of procured organs

24. Please list the number of incidents involving AIR TRAVEL in which YOU PERSONALLY have been involved over the course of your career. You may leave blank any squares for which you do not have an answer (i.e., only answer "0" if you know this to have never occurred).

Accident with fatalities among procurement personnel

Accident with serious injuries among procurement personnel

Accident with minor or no injuries to donor personnel

'near-miss' incident with significant danger to donor personnel

Travel-related aborted procurement or loss of procured organs

25. Please describe any incidents or near misses involving YOU PERSONALLY during procurement travel.

26. Please list the number of incidents involving GROUND TRAVEL in which PERSONNEL FROM YOUR CENTER have been involved over the course of your career. You may an answer leave blank if you know this to have never occurred).

Accident with fatalities among procurement personnel

Accident with serious injuries among procurement personnel

Accident with minor or no injuries to donor personnel

'near-miss' incident with significant danger to donor personnel

Travel-related aborted procurement or loss of procured organs

27. Please list the number of incidents involving AIR TRAVEL in which PERSONNEL FROM YOUR CENTER have been involved over the course of your career. You may leave blank any squares for which you do not have an answer (i.e., only answer "0" if you know this to have never occurred).

Accident with fatalities among procurement personnel

Accident with serious injuries among procurement personnel

Accident with minor or no injuries to donor personnel

'near-miss' incident with significant danger to donor personnel

Travel-related aborted procurement or loss of procured organs

28. Please describe any incidents or near misses involving YOUR CENTER during procurement travel.

29. Do you have other concerns while traveling for a procurement other than those described above? If so, please specify.

30. What percent of your annual income for 2017 will come from organ procurement operations?

31. How valuable do you think the following would be in reducing your risk with travel to donor procurements

Variables

Video/still images of bronchoscopy

Bedside liver assessment by ultrasound (Fibroscan® or similar)

Bedside liver biopsy

Enhanced predictive score for assessment of DCD time to death after withdrawal

Responses

Not valuable

Slightly valuable

Somewhat valuable

Highly valuable

No opinion

32. Please note any additional comments you have on travel policies and practices for organ procurement.