

APPENDIX 1: STUDY QUESTIONNAIRE**Section 1: Participant Information**

1. In which specialty have you spent the majority of the pandemic working (i.e. March 2020-present)?

A&E	
ENT/ Max fax	
Internal Medicine	
ITU/ Anaesthetics	
General Practice	
General Surgery	
Gynaecology/ Obstetrics	

Ophthalmology	
Orthopaedics	
Paediatrics	
Palliative Care	
Psychiatry	
Urology	
Other:	

If other, please state:

2. Tick all other specialities you have worked in since March 2020

A&E	
ENT/ Max fax	
Internal Medicine	
ITU/ Anaesthetics	
General Practice	
General Surgery	
Gynaecology/ Obstetrics	

Ophthalmology	
Orthopaedics	
Paediatrics	
Palliative Care	
Psychiatry	
Urology	
Other:	

If other, please state:

3. What level of doctor are you?

FY1	
SHO or equivalent	
SpR or equivalent	
Consultant/ GP	
Other	

If other, please state:

Section 2: DNACPR Decisions

4. Do you think that you are making more or less patients DNACPR **now** compared with pre-pandemic (pre-March 2020)?

Significantly Less	
Somewhat Less	
Same or Unsure	
Somewhat More	
Significantly More	

5. In making DNACPR decisions **pre-pandemic**, which factors significantly contributed to your decision making? (tick all that apply)

Likely futility of CPR	
Frailty score	
Co-morbidities	
Age	
Patient Wishes	
Advance Care Plans	

Family Wishes	
Quality of Life Pre-arrest	
Likely Quality of Life Post-ROSC	
Limited Resources e.g. ITU beds	
Others	

If others, please state:

6. In making DNACPR decisions **now**, which factors significantly contribute to your decision making? (tick all that apply)

Likely futility of CPR	
Frailty score	
Co-morbidities	
Age	
Patient Wishes	
Advance Care Plans	

Family Wishes	
Quality of Life Pre-arrest	
Likely Quality of Life Post-ROSC	
Limited Resources e.g. ITU beds	
Others	

If others, please state:

7. If your decision-making processes around DNACPRs have changed since the pandemic, can you explain why? (optional)

Section 3: Treatment Escalation

8. Do you think you have a lower or higher threshold for referring (or accepting) patients to ITU, **now** compared with pre-pandemic?

Significantly Lower (i.e. referring more)	
Somewhat Lower	
Same or Unsure	
Somewhat Higher	
Significantly Higher (i.e. referring less)	

9. Do you think you have a lower or higher threshold for palliating patients, **now** compared with pre-pandemic?

Significantly Lower (i.e. palliating more)	
Somewhat Lower	
Same or Unsure	
Somewhat Higher	
Significantly Higher (i.e. palliating less)	

10. If your thresholds for escalation and/or palliation have changed since the start of the pandemic, can you explain why? (optional)

Section 4: Euthanasia and Physician-Assisted Suicide

11. How would you describe your views on the legalisation of euthanasia, **pre-pandemic (pre-2020)**?

Strongly Opposed	
Somewhat Opposed	
Neutral or Unsure	
Somewhat In Favour	
Strongly In Favour	

12. How would you describe your views on the legalisation of physician-assisted suicide, **pre-pandemic (pre-2020)**?

Strongly Opposed	
Somewhat Opposed	

Neutral or Unsure	
Somewhat In Favour	
Strongly In Favour	

13. How would you describe your views on the legalisation of euthanasia **now**?

Strongly Opposed	
Somewhat Opposed	
Neutral or Unsure	
Somewhat In Favour	
Strongly In Favour	

14. How would you describe your views on the legalisation of physician-assisted suicide, **now**?

Strongly Opposed	
Somewhat Opposed	
Neutral or Unsure	
Somewhat In Favour	
Strongly In Favour	

15. If your views on euthanasia and/or physician-assisted suicide have changed since the start of the pandemic, can you explain why? (optional)

Section 5: Conclusion

16. Are there any other ways in which covid has changed the ways you make end of life decisions? (optional)