

Appendix: Questionnaire of Current Practice in Obstetric Anesthesia and Analgesia in Greek Public Hospitals

CONTACT DETAILS/HOSPITAL TYPE (*optional)

Anesthesiologist's name*:

Address/City:

Telephone:E-mail:

Name of the Hospital*:

PART 1: OBSTETRIC ANESTHESIA FOR CESAREAN DELIVERY (CD)

1. Number of CDs performed in your hospital (under any type of anesthesia) during the 6-months study period (from 03-01-2016 to 08-31-2016):
2. Number of CDs performed under spinal anesthesia:
3. Number of CDs performed under epidural anesthesia:
4. Number of CDs performed under CSEA:
5. Number of CDs performed under GA:
6. Of the above number, how many were:
 - a. Emergency CD with no enough time for regional anesthesia, Number: ...
 - b. Parturient refusal for RA or request for GA, Number:
 - c. Parturients pathology, Number:
 - d. Other reasons, Number:
7. Regarding analgesia after CD:
 - a. How many women received epidural analgesia after CD (epidural catheter remained in place postoperatively):
 - b. How many women received opioids with a long duration of action (i.e., morphine) spinally for analgesia after CS
 - c. How many women received analgesia after CD with simple analgesics and systemic opioids (i.e., morphine, pethidine, tramadol-IV, IM, and SC)
 - d. Please describe if other methods of analgesia were used:

PART 2: OBSTETRIC ANALGESIA FOR LABOR

8. Number of VDs in your hospital (under any type of analgesia) during the 6-months study period (from 03-01-2016 to 08-31-2016):
9. Number of epidurals used for labor analgesia:
10. Number of combined spinal-epidurals used for labor analgesia:
11. Number of spinal injections used for labor analgesia:
12. Other methods for labor analgesia used in your hospital (you may select more than one box)
 - a. PCA with remifentanyl:
 - b. Pethidine IM:
 - c. Paracetamol:
 - d. Blockage performed by the obstetrician (i.e., pudendal):
 - e. Other methods: please describe:
 - f. No analgesia:
 - g. Do not know, anesthesiologists are not involved with the delivery suite:

PART 3: EQUIPMENT/TECHNIQUES

13. Availability of spinal needles: YES NO
14. Availability of epidural sets: YES NO
15. Availability of combined spinal-epidural sets: YES NO
16. Availability of ultrasound suitable for regional techniques/blocks: YES NO
17. Do you use ultrasound for regional techniques in obstetric cases: YES NO

PART 4: COMPLICATIONS

18. Number of epidural hematomas:
19. Number of epidural abscesses:
20. Number of accidental dural punctures with tuohy needle/post-dural puncture headache:
21. Number of cases with permanent neurological damage: cases.....
22. Other serious complications related to regional techniques (please describe):

PART 5: FACTORS AFFECTING THE USE OF REGIONAL TECHNIQUES

23. Number of consultant anesthesiologists in your department:
24. How many anesthesiologists are involved in obstetric cases:

 - a. How many anesthesiologists are familiar and perform spinal blocks in obstetrics cases:
 - b. How many of anesthesiologists are familiar and perform epidurals/combined spinal-epidurals in obstetrics cases:
 - c. How many of anesthesiologists are not familiar with regional techniques and provide only GA in obstetrics cases:

25. Main reasons for not applying RA/analgesia in your hospital and department (you may select more than one box):
 - a. Lack of Equipment:
 - b. Lack of Knowledge/Education/training:
 - c. Parturients' refusal for regional techniques:
 - d. Anesthesiologists' preferences:
 - e. Obstetricians' Preferences:
 - f. Other/Specify: