

## **Blood sampling in the Emergency Department**

The survey designed to evaluate the situation of the preclinical process in the European emergency departments (ED) will only take you ten minutes to fill, your information will be the basis of future recommendations looking for improvement in this important part of the patient management.

To facilitate and improve the quality of the provided information, a brief description of the survey variables are outlined.

To improve the quality of your response follows these general recommendations. Please select at least one option on each question.

Select the "I do not know" option if the information is not accessible for you. In the few open questions, be brief in your response

### Variables definitions

- 1. Country: Select the Country of the responder from the list that open**
- 2. Centre name: What is the name of your hospital/healthcare provider: Working place.**
- 3. Responder: Qualification of the professional that provides the information.**
  - a) Emergency physician
  - b) Emergency nurse
  - c) Lab professional
  - d) ED director or administration
  - e) Other (please specify)
- 4. Centre Level: Depending on the number of beds select the status of your hospital. University hospitals are always Tertiary Hospitals.**
  - a) Tertiary hospitals: 500 or more beds or University hospitals
  - b) Secondary hospitals: 100 to 499 beds
  - c) Primary hospital: fewer than 100 beds (Only one option)

**5. Annual number of visits of the Emergency Department (ED) Total number of visits, including paediatric and adults**

- a) More than 100.000
- b) 60.000 to 100.000
- c) 30.000 to 60.000
- d) Less than 30.000 (Only one option)

**6. Can you estimate the proportion of ED visits that at least have one blood test in your centre. Include the estimation or the precise figure on the box and reflect if it is precise or estimation.**

Label: fill in estimated value (%)

**7. How are blood requests from your ED generated**

- a) Paper
- b) Computer
- c) Both
- d) I do not know

If answer is Paper or I do not know, the system will skip questions 8 and 9 and go to question 10

**8. Select the options that reflect the IT support for blood text management.**

- a) For test requests
- b) For lab results
- c) To control test status (Track test process)
- d) Other (please specify)

(Multiple compatible responses are accepted)

**9. Who does electronic order entry?**

- a) Physician
- b) Nurse or physician assistant
- c) Nurse or physician assistant, with subsequent validation by a physician
- d) Other (please specify)

**10. Is your ED is using key performance indicators (KPIs)**

- a) Yes
- b) No
- c) I do not know

If answer is no or I do not know, the system will skip to question 12

**11. Select all the KPI that your ED uses:**

- a) Total ED Time. Total time from arrival to disposition or any other formula that approaches the time in the ED
- b) Time to Treatment in specific conditions as is done in Stroke, Acute Coronary Syndrome, Sepsis, or trauma
- c) Time to Triage
- d) Time to be seen by a doctor.
- e) (Turnaround time) TAT for lab test: Total time to have a blood sample result (request-extraction to result disposition)
- f) TAT for Rx Total time to have a RX result

(multiple responses are accepted)

**12. What are the laboratory's ED-related key performance indicators (KPI's)?**

Select all in use in your ED, if different from options please specify the alternative.

- a) Turn around time (TAT)
- b) We don't have KPI's
- c) % rejected results
- d) I do not know
- e) Other (please specify) (Multiple responses)

If no TAT was selected in the previous question (12) the survey will skip questions, 13,14,15,16,17,18 and go to 19

**13. How is the sampling time documented?**

- a) manually paper based on a request form
- b) manually in the electronic order entry system
- c) automatically by a handheld device
- d) automatically by another device (please describe)

**14. What is the starting time for your TAT: Select the one used in your centre. If the information is not accessible select "I do not know".**

- a) Ordering test time
- b) Blood sampling time
- c) Receiving sample at the lab
- d) I do not know
- e) Other (please specify)

**15. What is your ending time for your TAT? Select the used in your centre. If the information is not accessible select "I do not know".**

- a) When results are delivered from the lab
- b) When results are accessible to the ordering physician
- c) When results are used by the ordering physician
- d) I do not know
- e) Other (please specify)

**16. If you have TAT. What is the target sample TAT in the ED from prescription to reported result? In this question we look to the target TAT value in your centre. Include in the target value goal set in your centre.**

- a) Non applicable
- b) Include the target value

**17. IF TAT is used. What is the actual achieved patient TAT in the emergency department (ED) at your hospital? Select the most appropriated interval.**

- a) Less than 1 hours
- b) 1-2 hours
- c) 2-3 hours
- d) More than 3 hours
- e) I do not know it (Only one option)

**18. If your centre use TAT as KPI, indicate the percentage the target is achieved? Select the proper interval.**

- a) In more than 75%
- b) 50-75%
- c) 50-25%
- d) In less than 25%
- e) I do not know (Only one option)

**19. How important would you rate the impact of sample TAT on patient length of stay in your ED?**

**Considering for the process of care, total time on the ED or time to treatment.**

- a) Not important
- b) Moderately important
- c) Very important
- d) I do not know (please specify)

(Only one option)

**20. Where are the ED blood samples processed in your hospital?**

- a) Central lab
- b) Dedicated ED lab
- c) Point of Care Testing (POCT) exclusively
- d) Combination of POCT and another lab
- e) ED tests are processed outside of the hospital
- f) I do not know

If central lab, dedicated ED lab, ED tests are processed outside of hospital or I do not know are selected you will skip to question 22

(Multiple responses)

**21. If POCT (Point of care Test) is used in your ED: Who is in charge of point-of-care testing (POCT) oversight (governance) in the ED at your hospital? Select who oversees the POCT.**

- a) The central or dedicated lab
- b) The ED
- c) I do not know
- d) Other (please specify) (Only one option)

Every answer will redirect to question 23

**22. If no POCT on place. How are the samples transported to the Lab.**

- a) Using a mechanical system (i.e. pneumatic systems)
- b) Manual transport
- c) I do not know
- d) Other (please specify)

(only one option)

**23. What is the sample rejection rate? Select the interval that corresponds to the blood samples rejection rate in your centre. Rejection means that the blood sampling has to be repeated or the results are not useful due to interferences.**

- a) Less than 2%
- b) 2-5%
- c) More than 5%
- d) I do not know (Only one option)

**24. What are the reasons for rejection of sampled blood tests. Rank the importance from 1 to 9. Been 1 the lower and 9 the highest.**

Started with Haemolysis

**25. Under filling**

**26. Clotting**

**27. Identification failure**

**28. Other**

**29. What is the rate of haemolysis in the ED lab samples from the ED?**

- a) <2.5%
- b) >2.5% - <5%
- c) >5% - <7.5%
- d) >7.5% - <10%
- e) I do not know

**30. Remarks**