

Appendix

PROMOTING CULTURE IN GOOD PRACTICES / INTENSIVE MEDICINE**FUNCTIONAL UNIT OF PATIENT QUALITY AND SAFETY / HOSPITAL DE SAGUNTO**

Answer these questions YES or NO.

1. "Not – to - do" recommendations

a. Do you know the "not – to – do" recommendations promoted by your scientific society?

http://www.mscbs.gob.es/ca/organizacion/sns/planCalidadSNS/cal_sscc.htm

b. Should empirical antibiotic treatment be initiated after admission due to serious infection, and continued without assessing its relevance and possible de-escalation on a daily basis?

c. Should blood tests be performed, routinely, without specific clinical indications?

d. Should chest x-rays be done routinely in intensive care units?

e. Should isolation measures be maintained in patients with confirmed communicable disease during their stay in the ICU without assessing the duration of the infectious disease or colonization by a germ?

F. Should red blood concentrates be transfused in hemodynamically stable, non-bleeding critical patients without cardiac or central nervous system involvement, with a hemoglobin concentration > 7 g / dl?

Figure A: First side of our survey.

2. Informed Consent of a treatment / diagnostic procedure

- a. Have you recently received learning on the completion of Informed Consent?
- b. Have you discussed with the patient the need for a physical and / or psychic preparation for the completion of the treatment / diagnostic test?
- c. Have you evaluated with the patient the diet to follow, the previous medication and the necessary drugs for the completion of the treatment / diagnostic test?
- d. Do you always use the Informed Consent by techniques or treatments in which its use is established?
- e. Do you think that the tacit consent of the patient is enough for all the actions that you do as a doctor?
- f. Do you present yourself as patient's responsible profesional?
- g. Do you explain to the patient, in detail, the technique to which he is going to submit?
- h. Do you explain to the patient, in an appropriate way, the benefits that are expected to be obtained, the risks, and the benefit / risk ratio of this technique?
- i. Do you explain to the patient alternatives to the offered technique?
- j. Do you answer to all the doubts raised by the patient?
- k. Do you finally ask the patient if he has any doubt in particular?
- l. If informed consent cannot be obtained, do you consider the option of making oral consent?

Figure B: Second face of our survey.

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S
1			E1	E2	E3	E4	E5												
2																			
3		a	no	no	no	yes	no answer												
4		b	no	si	no	no	no												
5		c	no	no	no	no	no												
6		d	no	no	no	no	no												
7		e	no	no	no	no	no												
8																			
9																			
10																			
11																			
12																			

Right answers	23		
Wrong answers	1 yes	1 no answer	
Percentage of right answers in the questions about NTDR			
	23 / 25 =	92%	

Figure C: How to calculate the percentage of right answers in the question about NTDR. There are 23 correct answers (the question is answered in a negative way) and 2 incorrect answers (one answer is affirmative in 1 case, and there is no answer in another case).

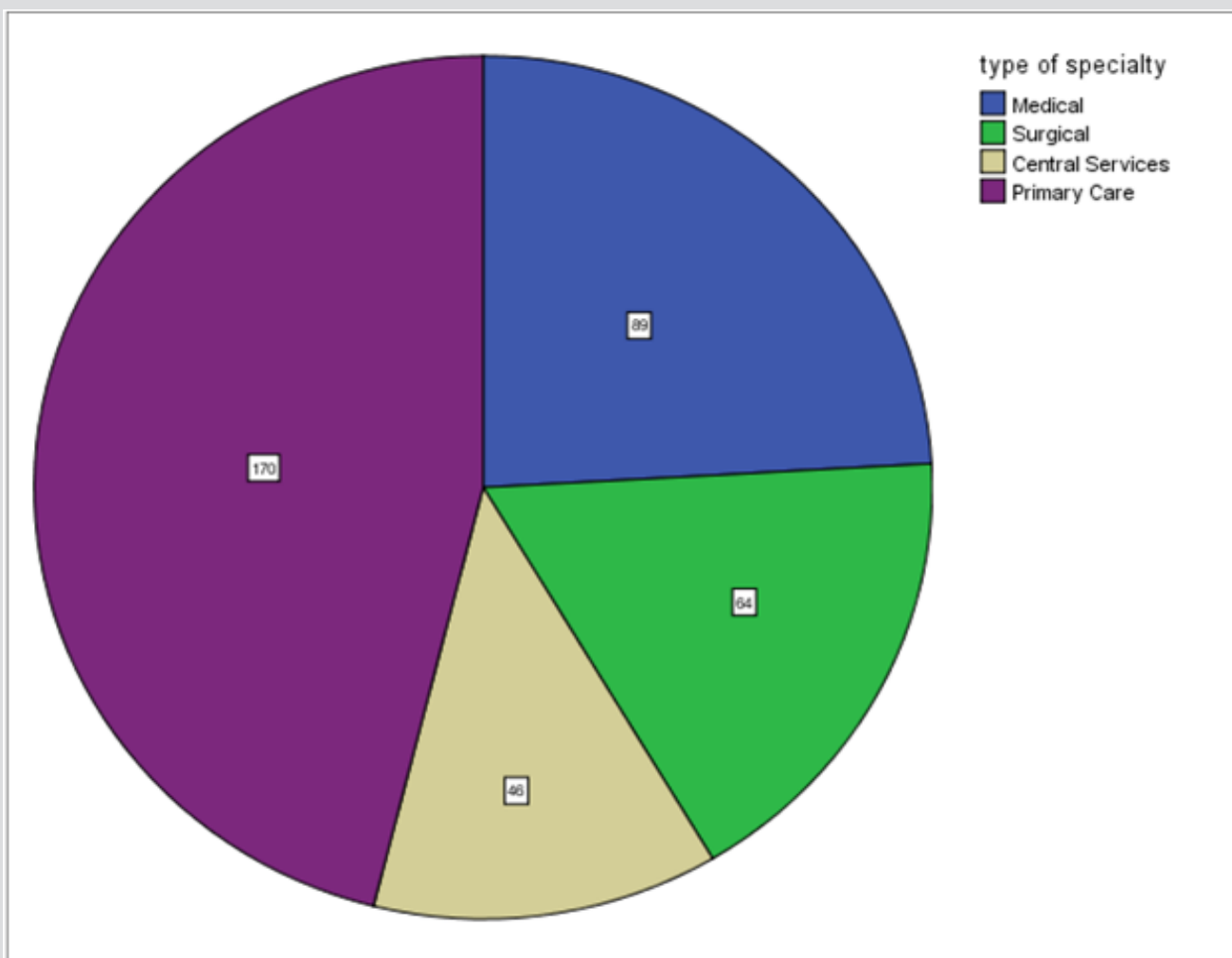


Figure D: Pie chart of the types of specialty included in this work.

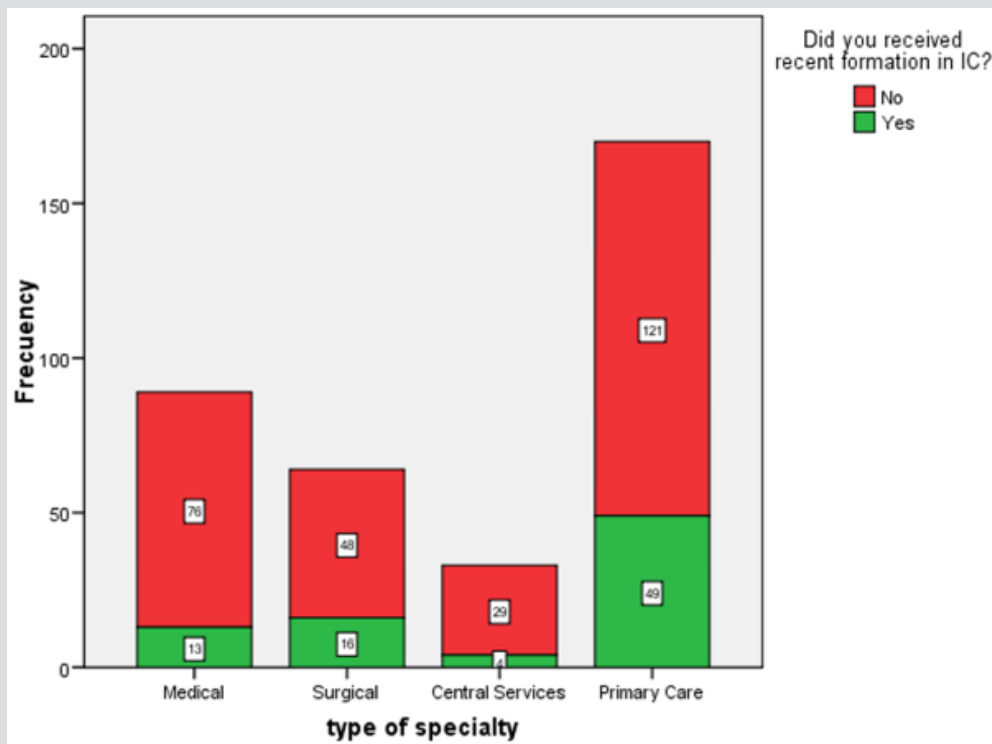


Figure E: Graph of stacked bars about recent training in IC in the different types of specialties. The numbers in the box are absolute values (number of answers).

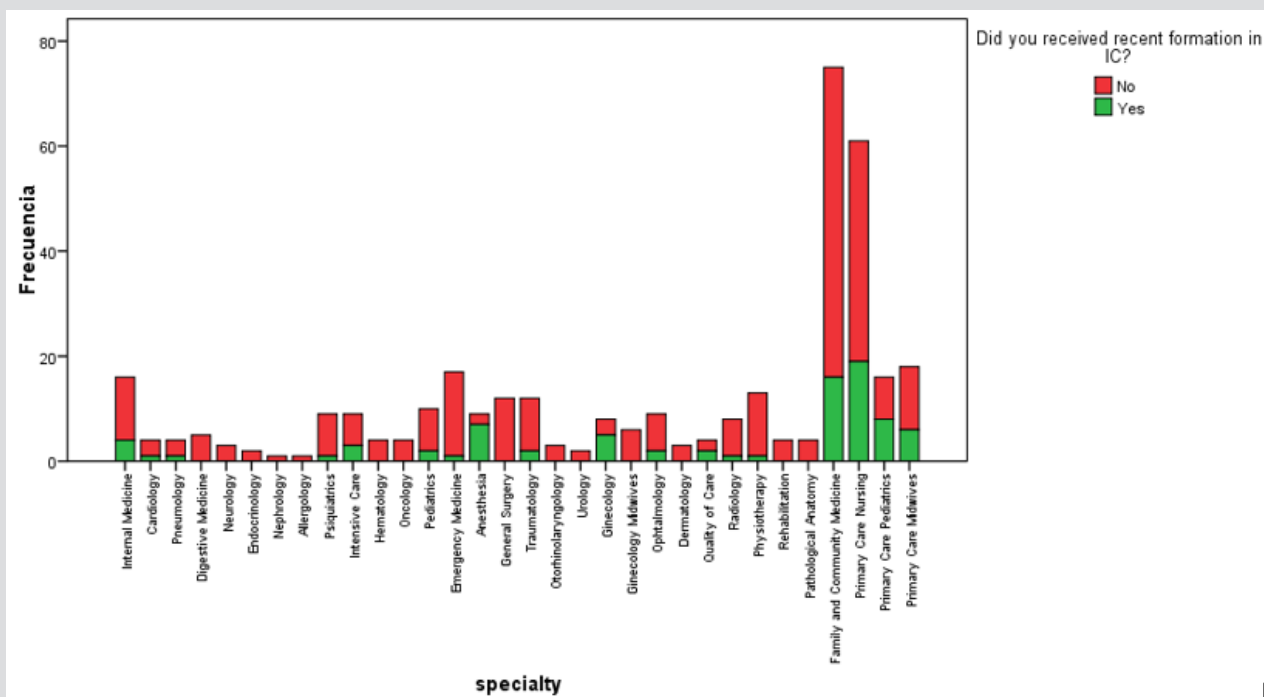


Figure F: Graph of stacked bars on recent training in IC in the different specialties included in our work.