Parenteral Nutrition in Advanced Cancer: The Healthcare Providers’ Perspective

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Experience with Parenteral Nutrition (PN) in Cancer Patients

Electronic Survey Powered by SurveyMonkey – Translation from Norwegian to English

Welcome to this assessment of your experiences with parenteral nutrition (PN) for cancer patients who are transferred from hospital to home or a primary health care facility. Completing the survey will take about five minutes. Responses are stored anonymously.

This assessment is an introduction to a larger project aiming to improve procedures and follow up-plans for cancer patients being discharged from hospital with PN.

Questions

1. Do you have any experience with cancer patients receiving PN?
   [Yes]
   [No]

Part 1. Background Questions

2. Gender
   [Male]
   [Female]

3. Year of birth
   [insert year]

4. In which part of the health care services do you work? (multiple choice)
   [University hospital]
   [Local hospital]
   [Nursing home / care facility]
   [Home care services]
   [Other (please specify)]
5. What is your profession?
[Physician]
[Oncology nurse]
[Nurse (e.g. with other further education than oncology)]
[Health worker (e.g. enrolled nurse, care worker, auxiliary nurse)]

6. In which county are you employed?
[North Trøndelag]
[South Trøndelag]
[Møre and Romsdal]

Part 2. Your Experience with the Patient Cohort

7. Have you been certified/recertified in use of infusion pumps for PN during the last three years?
[Yes]
[No]

8. In which setting have you experienced PN for cancer patients?
[Hospital]
[Nursing home / care facility]
[In the patients' home]
[Other (please specify)]

9. How many patients receiving PN do you follow per year?
[0]
[1-5]
[6-10]
[11-15]
[16-20]
10. When was the last time you administered PN to a cancer patient?
[During the last week]
[During the last month]
[During the last six months]
[During the last year]
[More than one year ago]

11. What are your positive experiences of PN to cancer patients?
[Free text box]

12. What are your negative experiences of PN to cancer patients?
[Free text box]

Part 3. Decision-making processes for patients receiving PN at your workplace

13. Who makes decisions regarding PN at your workplace?
[Physician in charge at my workplace]
[Physician in charge at my workplace in collaboration with regional palliative care physicians]
[Other (please specify)]

14. When is PN terminated at your workplace (multiple choice)?
[When effect of treatment is lacking or ceasing]
[At the request of next of kin]
[When the patient experiences side effects (e.g., dyspnea, GI side effects, oedema or other)]
[When the patient’s life expectancy is short (days)]
[At the request of the patient]
[Other (please specify)]
15. How is PN terminated at your workplace (multiple choice)?

[Gradually]
[Termination without gradual cessation]
[After a treatment pause]
[Other (please specify)]

16. How do you perceive patients' and relatives' reactions to PN treatment termination?

[Free text box]

17. How do you perceive the collaboration across levels of care when a patient is discharged from the hospital with PN?

[Free text box]

18. Do you have any other comments regarding PN?

[Free text box]