

* 1. I am presently working as a nephrologist in clinical practice managing nephrology patients.

☐

Yes.

☐

No. Thank you for taking the survey!

About you generally...

* 2. I am an interventional nephrologist.

☐ Yes

☐ No

* 3. The number of years I have practiced nephrology (including fellowship training) is

☐ < 5 years

☐ 5-10 years

☐ >10-20 years

☐ >20 years

* 4. I primarily practice in the following geographic area

☐ a. Northeast (CT, ME, MA, NH, RI, VT, NJ, NY, PA)

☐ b. Southern (FL, GA, MD, NC, SC, VA, WV, DE, AL, KY, MS, TN, AR, LA, OK, TX, DC, Puerto Rico)

☐ c. Midwest (IL, IN, IA, KS, MI, MN, MO, NE, ND, SD, OH, WI)

☐ d. West (AZ, CO, ID, MT, NV, NM, UT, WY, AK, CA, HI, OR, WA)

* 5. My present practice is predominantly

☐ urban

☐ suburban

☐ rural

* 6. Are you involved in training Nephrology fellows?

☐ Yes

☐ No

7. What is the structure of your nephrology practice (select the best match)?

- ☐ Solo practice
- ☐ Small group practice (<5 nephrologists)
- ☐ Large to medium group practice (5 or more nephrologists)
- ☐ Hospital-based healthcare system (military or non-military)
- ☐ Academic practice (associated with fellowship program)
- ☐ Other (please specify)

About your temporary dialysis catheter insertion practice...

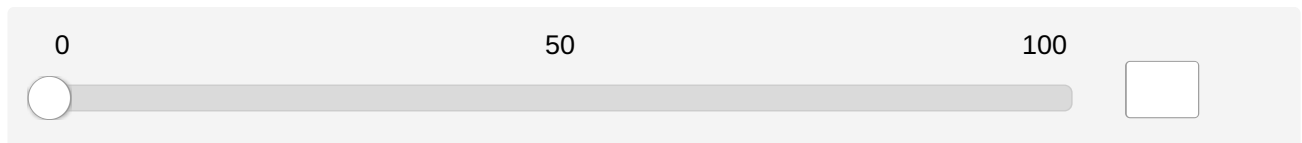
* 8. Do you place temporary dialysis catheters (TDC)?

☐ Yes

☐ No

9. If you place temporary dialysis catheters (TDC), approximately how many do you do a year? (Skip the question if you don't do TDC placements.) If you do more than 100 per year, please indicate in the comments at the end of the survey.

0 50 100



Types and Frequency of TDC you insert...

10. Please indicated the types of TDCs that you place, and the approximate percentage of each type that you do? (Skip this question if you no longer place TDCs)?

	0%	0-25%	>25-50%	>50-75%	>75-100%
Femoral?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
IJ?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Subclavian?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

About your temporary dialysis insertion catheter practice...

* 11. If you place temporary dialysis catheters, which do you use to localize the vein? (Select all that apply).

- ☐ Real-time ultrasound
- ☐ Ultrasound localization only
- ☐ Fluoroscopy
- ☐ Physical landmarks only
- ☐ NA (I no longer perform TDC insertion)
- ☐ Other (please specify)

* 12. If you no longer place temporary dialysis catheters, how many years ago did you stop? (Please choose the best answer.)

- ☐ Not applicable, I continue to do TDC placement
- ☐ I never did them after completing fellowship
- ☐ <5 years
- ☐ 5-10 years
- ☐ >10-20 years
- ☐ >20 years

* 13. To whom do you refer patients for temporary dialysis catheter placement, if you no longer do them or not all of them? (Select all that apply.)

- ☐ Interventional Radiologist
- ☐ Interventional Nephrologist
- ☐ Other Nephrologist
- ☐ General Surgeon
- ☐ Vascular access service associated with my practice
- ☐ Critical Care/ICU Medicine specialist
- ☐ Hospitalist
- ☐ I do not refer patients for TDC placement
- ☐ Other (please specify)

About your training in TDC insertion...

* 14. I was adequately prepared to place temporary dialysis catheters without direct supervision at the end of my nephrology fellowship.

Strongly Disagree	Disagree	Neither Agree or Disagree	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

15. Approximately how many temporary dialysis catheters (TDC) did you place during fellowship? If you did more than 100, please indicate in the comments at the end of the survey.

0	50	100	<input type="text"/>
<input type="range"/>			

16. I received simulation training in TDC placement either as a fellow at Walter Reed, and/or in a training course during or after fellowship.

- ☐ Yes
- ☐ No

Your opinions about simulation training for TDC placement...

* 17. Simulation training is a valuable supplement to adequate training in TDC placement.

Strongly Disagree	Disagree	Neither Agree or Disagree	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 18. Simulation training is a necessary part of adequate training in TDC placement.

Strongly Disagree	Disagree	Neither Agree or Disagree	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Opinions about TDC placement...

* 19. If you perform TDC placement, do you continue to do so because (chosed all that apply)?

- ☐ I enjoy doing the procedure.
- ☐ It is an essential emergency procedure.
- ☐ I am an interventional nephrologist
- ☐ I practice in an area where there is limited/no access to other physicians will and able to place a TDC.A
- ☐ All nephrologists should be willing and able to place a TDC.
- ☐ It is a source of RVUs and reimbursement
- ☐ It makes me more competitive in a private practice environment.
- ☐ I am faculty in a nephrology training program
- ☐ I no longer place TDC
- ☐ Other (please specify)

* 20. Which of the following are barriers to performing or continuing to perform TDC placement (chosed all that apply).

- ☐ Logistics of preparing to insert the TDC.
- ☐ Timely availability of ultrasound.
- ☐ Timely availability of supplies and/or nursing support.
- ☐ Time it takes to do the procedure.
- ☐ Difficulty in obtaining a CXR after IJ or subclavian TDC placement.
- ☐ Difficulty in obtaining credentials to do TDC placement.
- ☐ Loss of TDC placement skills (Don't do enough to maintain proficiency).
- ☐ Disinterest in performing TDC placement.
- ☐ Lack of adequate reimbursement.
- ☐ Risk of procedural complications.
- ☐ Cost of liability insurance.
- ☐ There are no barriers to performing TDC for me.
- ☐ Other (please specify)

* 21. In your opinion, which of the following is the most significant barrier to continuing to perform TDC placement (chose only one)?

- ☐ Logistics of preparing to insert the TDC.
- ☐ Timely availability of ultrasound.
- ☐ Timely availability of supplies and/or nursing support.
- ☐ Time it takes to do the procedure.
- ☐ Difficulty in obtaining a CXR after IJ or subclavian TDC placement.
- ☐ Difficulty in obtaining credentials to do TDC placement.
- ☐ Loss of TDC placement skills (Don't do enough to maintain proficiency).
- ☐ Disinterest in performing TDC placement.
- ☐ Lack of adequate reimbursement.
- ☐ Risk of procedural complications.
- ☐ Cost of liability insurance.

22. Do you have any comments or suggestions?

Thank you for taking the survey. Please click done if you are finished.