

## **Appendix 1**

### **Peri-operative drug dosing in class III obese surgical patients - a survey of Anaesthetists**

#### **Demographic Information**

**State/Territory:**

ACT / NSW / NT / New Zealand / QLD / SA / TAS / VIC / WA

**What is your Professional Designation?**

Specialist / Trainee

**How many years have you been practising anaesthesia?**

\_\_\_\_\_ (Numerical Value)

**Where do you spend the majority of your clinical time?**

Private / Public / Equal in both settings

**What is your work routine?**

Full Time / Part-time

**Please estimate what proportion of your patients in the last 4 weeks have had a BMI  $\geq 40$  kg/m<sup>2</sup>?**

Up to one third / More than one third

## **Dosing Practices**

**When anaesthetising patients with a BMI  $\geq 40$  kg/m<sup>2</sup> (and no other significant comorbidities), what dosing strategy would you normally use for the following drugs?**

Total Body Weight (TBW) = weight in kilograms

Lean Body Weight (LBW) = TBW minus body fat weight

Ideal Body Weight (IBW) = Weight corrected for sex, height and frame size

Adjusted/Corrected Body Weight (ABW/CBW) = Correction factor of excess weight above IBW added to IBW

<b>Propofol (For IV induction)</b>	Total body weight	Lean body weight	My own practice(specify)	NA (Don't use in practice)
<b>Propofol (For TIVA)</b>	Total body weight	Lean body weight	My own practice(specify)	NA (Don't use in practice)
<b>Atracurium</b>	Total body weight	Lean body weight	My own practice(specify)	NA (Don't use in practice)
<b>Cisatracurium</b>	Total body weight	Lean body weight	My own practice(specify)	NA (Don't use in practice)
<b>Rocuronium (Not for RSI)</b>	Total body weight	Lean body weight	My own practice(specify)	NA (Don't use in practice)
<b>Suxamethonium</b>	Total body weight	Lean body weight	My own practice(specify)	NA (Don't use in practice)
<b>Sugammadex (For rocuronium reversal when TOF count <math>\geq 2</math>)</b>	Total body weight	Lean body weight	My own practice(specify)	NA (Don't use in practice)
<b>Morphine</b>	Total body weight	Lean body weight	My own practice(specify)	NA (Don't use in practice)
<b>Fentanyl</b>	Total body weight	Lean body weight	My own practice(specify)	NA (Don't use in practice)
<b>Remifentanyl</b>	Total body weight	Lean body weight	My own practice(specify)	NA (Don't use in practice)
<b>Alfentanil</b>	Total body weight	Lean body weight	My own practice(specify)	NA (Don't use in practice)

**If you selected “my own practice”, please provide details in the comment box for the specific drug.**

## **Clinical Difficulties**

**In patients with BMI  $\geq 40$  kg/m<sup>2</sup>, have you observed any increased frequency of the following complications compared to non-obese patients (BMI < 30 kg/m<sup>2</sup>)?**

<b>Inadequate paralysis for intubation under general anaesthesia (requiring extra muscle relaxant dosing)?</b>	Yes	No
<b>Hypoxic events in recovery due to inadequate reversal?</b>	Yes	No
<b>Hypoxic events in recovery due to narcosis?</b>	Yes	No
<b>Post-operative hypoxic problems on wards (such as due to obesity hypoventilation syndrome)</b>	Yes	No

## **Resources**

**Do you use any information resources to assist you in dosing patients with BMI  $\geq 40$  kg/m<sup>2</sup>?**

**(select one or more):**

- |  |                                 |
|--|---------------------------------|
| 1. Internal hospital/departmental guidelines | 2. Drug dosing phone apps       |
| 3. Australian Medicines Handbook             | 4. Therapeutic guidelines (eTG) |
| 5. Journal reading                           | 6. Colleagues                   |
| 7. Nil                                       | 8. Other (Specify) _____        |