

# SUPPLEMENTARY APPENDIX I

<p>9/11/24, 4:35 PM Current Philosophy and Practice of Intracranial Pressure (ICP) monitoring in Severe Traumatic Brain Injury (TBI)</p> <h2>Current Philosophy and Practice of Intracranial Pressure (ICP) monitoring in Severe Traumatic Brain Injury (TBI)</h2> <p>Severe traumatic brain injury is a major cause of death and long term disability worldwide. Issues around intracranial pressure monitoring in severe TBI have formed the cornerstone of most modern TBI research and treatment guidelines. However, divergent opinions exist among practitioners on whether ICP monitoring makes a difference in the management of patients with sTBI especially since the BEST TRIP Trial. This study intends to gather high-quality data on physicians' philosophy and practice of ICP monitoring in patients with severe TBI as one moves from one geographic region to another. It should take less than 5 minutes to fill this questionnaire and the data collected will be used for research purposes only. Participation in this research is voluntary and the answers you provide will be completely anonymous.</p> <p>For more information about this project; contact Dr U. Ajoku, +234 703 806 9227 <a href="mailto:gjosatchay@yahoo.com">gjosatchay@yahoo.com</a> Dr M. Kullmann, +49 1515 321 3767 <a href="mailto:marcel.kullmann@klinikum-ostalb.de">marcel.kullmann@klinikum-ostalb.de</a> Mr Livingston Hycinth, +234 816 926 7713 <a href="mailto:hycinthlivingston@gmail.com">hycinthlivingston@gmail.com</a></p> <p><i>* Indicates required question</i></p> <p>1. 1. What is your age? *</p> <p>Mark only one oval.</p> <p><input type="radio"/> 30-40 <input type="radio"/> 41-50 <input type="radio"/> 51-60 <input type="radio"/> 61-70 <input type="radio"/> 71-80</p>	<p>9/11/24, 4:35 PM Current Philosophy and Practice of Intracranial Pressure (ICP) monitoring in Severe Traumatic Brain Injury (TBI)</p> <p>2. 2. Sex *</p> <p>Mark only one oval.</p> <p><input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Nonbinary</p> <p>3. 3. Current position *</p> <p>Mark only one oval.</p> <p><input type="radio"/> Resident <input type="radio"/> Attending (Consultant)</p> <p>4. 4. What year in residency? *</p> <p>Mark only one oval.</p> <p><input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> Not a resident</p>
<p>https://docs.google.com/forms/d/1LYvnoE9S0Hrcdn41-V1SfW6QLYOG1pVbuKrhDGcd0/edit 1/12</p> <p>9/11/24, 4:35 PM Current Philosophy and Practice of Intracranial Pressure (ICP) monitoring in Severe Traumatic Brain Injury (TBI)</p> <p>5. 5. Attending/Consultant years in practice *</p> <p>Mark only one oval.</p> <p><input type="radio"/> 1-5 <input type="radio"/> 6-10 <input type="radio"/> 11-15 <input type="radio"/> 16-20 <input type="radio"/> &gt;20 <input type="radio"/> Not an attending/consultant</p> <p>6. 6. Continent of practice *</p> <p>Mark only one oval.</p> <p><input type="radio"/> Africa <input type="radio"/> Asia <input type="radio"/> Australia <input type="radio"/> Europe <input type="radio"/> North America <input type="radio"/> South America</p> <p>7. 7. Country of practice *</p> <p>_____</p> <p>8. 8. Type of Practice *</p> <p>Mark only one oval.</p> <p><input type="radio"/> Public Non-academic Hospital <input type="radio"/> University Hospital <input type="radio"/> Private Practice <input type="radio"/> Public and Private Practice</p>	<p>https://docs.google.com/forms/d/1LYvnoE9S0Hrcdn41-V1SfW6QLYOG1pVbuKrhDGcd0/edit 2/12</p> <p>9/11/24, 4:35 PM Current Philosophy and Practice of Intracranial Pressure (ICP) monitoring in Severe Traumatic Brain Injury (TBI)</p> <p>9. 9. Have you had any training on how to insert ICP Monitors and obtain reading? *</p> <p>Mark only one oval.</p> <p><input type="radio"/> Yes <input type="radio"/> No</p> <p>10. 10. If yes above, when did you have the training? *</p> <p>Mark only one oval.</p> <p><input type="radio"/> Had it as a resident <input type="radio"/> Had it after residency <input type="radio"/> I/we have no training on ICP monitoring</p> <p>11. 11. What type of ICU do you manage your TBI patients? *</p> <p>Mark only one oval.</p> <p><input type="radio"/> General ICU <input type="radio"/> Trauma ICU <input type="radio"/> Neuro ICU <input type="radio"/> Surgical ICU <input type="radio"/> Medical ICU <input type="radio"/> Others</p>

12. 12. How many TBI patients do you see per year? \*

Mark only one oval.

- 10-50
- 51-100
- 101-150
- 151-200
- 201-250
- 251-300
- >300

13. 13. Of this number, how many are Severe TBI i.e GCS less than 9/15? \*

Mark only one oval.

- <50
- 50-100
- 101-150
- >150

14. 14. Do you think you follow the Brain Trauma Foundation (BTF) guidelines when managing TBI? \*

Mark only one oval.

- All the time
- Most of the time
- Half of the time
- Occasionally/rarely
- Never

15. 15. If never, do you have any local guideline you follow? \*

Mark only one oval.

- Yes
- No
- I/We follow the Brain Trauma Foundation (BTF) guidelines

16. 16. For patients with Severe TBI, do you monitor ICP invasively? \*

Mark only one oval.

- Yes, I do
- No, I use clinical and/or radiological parameters

17. 17. If yes above, what percentage of patients who require it from the BTF guidelines have it inserted? \*

Mark only one oval.

- <25
- 25-50
- 50-75
- 75-99
- 100
- I/We do not monitor ICP

18. 18. If less than 50%, what is the reason for this? \*

Tick all that apply.

- Cost
- Availability
- Fear of complications
- I/We insert ICP monitors when indicated in over 50% of the patients
- I/We do not monitor ICP

19. 19. What type of invasive ICP monitor do you use? \*

Mark only one oval.

- intraventricular
- intraparenchymal
- subdural
- epidural probe
- I/We don't use Invasive ICP monitoring

20. 20. Who inserts the ICP monitor? \*

Mark only one oval.

- Neuro surgeon
- Neurosurgical resident
- Neuro intensivist
- I/We don't use Invasive ICP monitoring

21. 21. If you don't use invasive ICP, what is the reason(s)? select all that applies \*

Tick all that apply.

- It is too expensive to use
- I/we have no experience with it
- I/we don't think it make any difference
- I/we are concerned about complications
- I/we use invasive ICP Monitoring

22. 22. If you don't use invasive ICP monitor, how do you monitor ICP? \*

Tick all that apply.

- Neurological exams
- Neuro imaging
- Ultrasound
- TMD
- Transcranial doppler
- Near infrared spectroscopy
- Others
- I/we use invasive ICP Monitoring

23. 23. what are your indications for ICP monitoring? (tick all that applies). \*

Tick all that apply.

- GCS <9 with abnormal CT
- GCS <9 with normal CT
- GCS 9-12 with contusions at the risk of expanding
- Inability to access a patient with CT abnormalities
- Polytrauma patient who requires extracranial surgery
- Polytrauma patient requiring mechanical ventilation
- I/We do not monitor ICP

24. 24. When you monitor ICP, what is your first line treatment for elevated ICP? (tick all that applies)

Tick all that apply.

- Hyperventilation
- Fentanyl
- Propofol
- Midazolam
- Morphine
- NM Blockers
- CSF drainage
- Hypertonic saline
- Mannitol
- I/We do not monitor ICP

25. 25. what is your second line of treatment for elevated ICP? (tick all that applies) \*

*Tick all that apply.*

- Barbiturates
- Hypothermia
- Decompressive craniectomy
- Deep hyperventilation
- I/We do not monitor ICP

26. 26. What is your threshold for introducing non-surgical intervention for elevated ICP? \*

*Mark only one oval.*

- 15mmHg
- 20mmHg
- 22mmHg
- 25mmHg
- I/We don't measure ICP

27. 27. What is your threshold for surgical intervention after exhausting all non-surgical ICP control measures? \*

*Mark only one oval.*

- 20mmHg
- 22mmHg
- 25mmHg
- I/We don't use ICP monitoring

28. 28. What is your target CPP? \*

*Mark only one oval.*

- 50mmHg
- > 60mmHg
- >70mmHg
- I/We don't use ICP monitoring

29. 29. What agents do you use for CPP support? (Tick all that applies) \*

*Tick all that apply.*

- Crystalloids
- Colloids
- Vasopressor
- Inotrops
- I/We don't use ICP monitoring

30. 30. Do you follow any protocol(s) or recommendation(s) for removal of ICP monitors? For example, SIBICC algorithms. \*

*Mark only one oval.*

- Yes
- No
- I/We don't use ICP monitors

31. 31. What other parameters do you monitor in severe TBI? \*

*Mark only one oval per row.*

	All the time	Most of the time	Half of the time	Occasionally/rarely	Never
<b>Ph02</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Pressure Reactivity Index (PRx)</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Microdialysis</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>CPP</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Others</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>I/We don't use invasive ICP monitoring</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

32. 32. Do you think ICP monitoring is supported by level 1 evidence? \*

*Mark only one oval.*

- Yes
- No

33. 33. Are you aware of any RCT that has investigated the role of invasive ICP monitoring in severe TBI? \*

*Mark only one oval.*

- Yes
- No

34. 34. If yes above, how many of such trial are you aware of? \*

*Mark only one oval.*

- 1
- 2
- 3
- 4
- 5
- >5
- I am not aware

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