

## Supplemental Information

Thank you for participating in our evaluation of ethical issues at Children's Hospital of Colorado research project.

As a survey respondent no information is being collected about you that can be tracked to any of your responses.

Please answer the questions below as completely and accurately as you can. Please try to respond in every box.

I have read the Postcard Consent-Information Sheet for this anonymous study. I understand the risks, benefits, alternatives, and reasons for participating in this study. I consent to participate in the survey based research study.

- Yes  
 No

What is your staff title?

- Attending Physician  
 Fellow Physician  
 Resident Physician  
 Medical Student  
 Nursing Staff  
 Nursing Student  
 Respiratory Therapist  
 CNA, MA  
 Occupational Therapist, Speech Therapist, Physical Therapist  
 Social Support (Chaplain, Social Worker)  
 Administrative Staff  
 Pharmacy Staff  
 Pharmacy Student  
 No Response  
 Other

Other: Staff Title

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How old are you?

- 18-40 years old  
 41-60 years old  
 61-80 years old  
 No Response

What is your gender?

- Female  
 Male  
 No Response

What is your religion?

- Judaism  
 Christianity-Catholic  
 Christianity-Non Catholic  
 Buddhism  
 Islam  
 Hindu  
 Sikh  
 Atheist  
 Agnostic  
 Other  
 No response

Other: Religion

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**SUPPLEMENTAL FIGURE 2** Prospective ethics survey version 2. CNA, certified nursing assistant; ED, emergency department; MA, medical assistant; MRN, medical record number.

What was the highest education level you achieved?

- Elementary School
- High School
- College
- Graduate School
- Post Graduate Education
- No Response

Have you received formal ethics education?

- Yes
- No

What Inpatient Unit Did the Ethical Issue Occur?

- ED
- 3rd Floor/PICU
- 3rd Floor/CICU
- 4th Floor/NICU
- Blue Team
- Purple Team
- Green Team
- Orange Team
- Pulmonary Team
- Heme/Onc Team
- General Surgery
- Surgical Subspecialties
- Cardiology Team
- Yellow Team
- Other  
(Inpatient Unit)

Other: Inpatient Unit

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What was the date of admission for the patient you are concerned about an ethical issues? If the issue is not regarding a patient leave blank. If you are uncomfortable entering date please leave blank.

Do you feel any distress personally or professionally as a result of this ethical issue?

- Yes
- No

What topic or area of ethics do you best think the issue you are concerned about can be placed into?

- Shared Decision Making with Patients (To include religious cultural issues, transition of care, consent, assent, surrogate or parental decision making, social issues related to decision making)
- Ethical Practices in End-of-Life Care
- Patient Privacy and Confidentiality
- Professionalism in Patient Care (To include personal moral distress, provider disagreement, claims of conscience to refuse to provide care by provider)
- Ethical Practices in Resource Allocation (To include Organ Transplantation, insurance issues, medical cost, socio/economic issues, supply availability, location of providers, appointment availability, social issues, immigration)
- Ethical Practices in business and management of the hospital
- Ethical Practices in Research
- Ethical Practices in everyday workplace
- Ethical Practices at the beginning of life
- Other or Multiple Areas

Other Topic or Multiple Areas of Ethics

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**SUPPLEMENTAL FIGURE 2 Continued.**

Please describe your ethical concern in this area.  
Please do not use the name, MRN, or any person  
identifier involved in your description. Please use  
fake names, basic staff member titles, or numbers if  
needed to identify people involved. :

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**SUPPLEMENTAL FIGURE 2** Continued.