**Title: Survey: clinical management of the COVID-19 infection disease in Italy**

**-Section: PROFESSIONAL EXPERIENCE**

**1)What is your age group?**

≤30

31-40

41-50

51-60

61-70

>70

**2)Since how many years have you completed your specialization?**

not yet specialized

<5 anni

5-10 anni

11-15 anni

16-20 anni

20-30 anni

>30 anni

**3)** **What is your area of specialization?**

Cardiology

Internal Medicine

Pulmonology

General practitioners

Infectious Disease

Anesthesia and Resuscitation

Emergency Medicine

Other medical specialty

Other surgical specialty

**4)In which macro-area of Italy do you work?**

North

Center

South

Islands

**5)In which type of hospital do you work?**

Community Hospital

University Hospital

COVID Center

Other

**6)How do you define your workplace?**

COVID

NON COVID

Other/not defined

**7) In which main setting do you work?**

Department of Medicine

Pulmonology Department

Department of Infectious Diseases

Department of Emergency Medicine

Intensive care Unit

Semi-intensive care Unit

Other surgical department

Other medical department

**8)Have you experience in the application of CPAP and NIV?**

No, I do not have experience

Yes, experience of < than 1 year

Yes, from 1 to 3 years experience

Yes, experience of >3 years

**9)** **Do you consider yourself an “expert” in the management of patients with acute respiratory failure caused by COVID-19?**

Yes, I consider myself as “very expert” (eg. I followed over 20 patients)

Yes, I consider myself as “quite expert” (eg. I followed less 20 patients)

No

-Section: **TRAINING**

**10)Do you receive training regarding personal protective equipment (PPE) utilization for COVID-19 disease in your workplace?**

Yes

No, I considered it useless

No, I had no time to attend it

*If yes, to specify what modality you consider more useful (possible multiple choice):*

Frontal lessons in your workplace

Refresh courses (FAD)

Webinar organized by several Scientific Society or Company

Social media (eg. facebook)

Chat with colleagues (eg. whatsapp)

Other (specify)

**11)Do you receive educational training regarding COVID-19 disease in your workplace?**

Yes

No, I considered it useless

No, I had no time to attend it

*If yes, to specify what modality you consider more useful (possible multiple choice):*

Frontal lessons in your workplace

FAD Refresh courses

Research on Web

Scientific journals

Webinar organized by several Scientific Society or Company

Social media (eg. facebook)

Chat with colleagues (eg. whatsapp)

Other (specify)

-Section: **“YOUR CLINICAL PRACTICE”**

**12)During this pandemic, how do you consider the diagnosis of COVID-19 in a patient with suggestive symptoms for pneumonia and with 1 or more negative nasopharyngeal swabs?**

Very likely

Unlikely

Not likely

**13) Which imaging method firstly do you use to diagnose COVID-19 pneumonia in your workplace?**

Thorax radiograph

Thorax computed tomography

Lung ultrasound

**14) Which imaging method do you use to monitor the COVID-19 respiratory consequences in your workplace?**

Thorax radiograph

Thorax Computed tomography

Lung ultrasound

**15)In your workplace, do you follow a standard protocol for patient’s discharge consisting of two consecutive negative nasopharyngeal swabs (sampling interval of at least 1 day)?**

No

No, I only obtain 1 negative swab vs clinical improvement

Yes, always

Yes, but it is often hard to follow through due to lack of resources

**16)What do you recommend as a first line treatment in a patient with COVID-19 pneumonia associated with moderate/severe acute respiratory distress syndrome (ARDS) (P/F <200 mmHg)?**

High flow nasal cannula oxygen (HFNC)

Continuous positive airway pressure (CPAP)

Non-invasive ventilation (NIV)

Urgent endotracheal intubation

**17)Which PEEP values during CPAP do you start with in a patient with moderate/severe ARDS?**

Low values (e.g. 8 cmH2O)

Intermediate values (10-12 cmH2O)

High values (> 12 cmH2O)

**18)Do you use HFNC to treat hypoxia in patients with COVID-19?**

Yes, often

Yes, rarely

No

*If yes, what is the most common outcome?*

Positive

Negative with need for therapy upgrade

**19)When do you request and/or perform endotracheal intubation if respiratory failure does not improve/worsens after using CPAP/NIV?**

Within 1 hour

1-8 hours

>8 hours

**20)Do you use low-molecular-weight heparin in high risk patients with COVID-19 pneumonia without contraindications?**

Yes, always

Yes, most of the time

No

i*f yes, what dose do you use?*

Higher dosages than standard dosages

Standard dosages

**21)Do you use corticosteroids in the treatment of acute moderate/severe ARDS (P/F<200)?**

Yes, since the early phases

Yes, in select cases (resolution of fever ≥72h or absence of symptoms ≥7 days)

No

**22)Do you use antiviral experimental therapy?**

No therapy

Chloroquine / hydroxychloroquine

Chloroquine / hydroxychloroquine + azithromycin

Chloroquine / hydroxychloroquine + protease inhibitors (lopinavir, ritonavir, darunavir)

Remdesivir

Other

**23)Do you request physiotherapy for patients with COVID-19?**

No, the service is not available

No, I don't find it useful

Yes, both

Yes, motor physiotherapy

Yes, respiratory physiotherapy

**24)How are patients receiving CPAP/NIV fed in your ward?**

CPAP/NIV is not suspended and total parenteral nutrition is used

CPAP/NIV is not suspended and enteral nutrition with NGT is used

CPAP/NIV is not suspended and IRT is used

CPAP/NIV is suspended and the patient eats

**25)How do you manage the communication between patient and family members in your ward?**

Telephone calls

Video calls (e.g. tablet or smartphone)

None of the above

-Section: **“WHAT YOU CAN DO”**

**26)Which interface do you prefer for the purpose of reducing aerosolization of droplets during CPAP/NIV treatment?**

Facial mask with double tube circuit with antiviral filter

Single-tube face mask with antiviral filter and whisper

Helmet

Other (specify)

**27)Do you use the anti-IL6 monoclonal antibody (Tocilizumab) in patients with COVID-19?**

In the initial phases of the infection in the presence of risk factors

In the advanced phases of the infection <24 h from intubation

In the advanced phases of the infection > 24 h from intubation

I do not use it

**28)Are patients receiving CPAP/NIV monitored in your ward?**

No

Yes, each patient is under monitoring not connected to the control panel

Yes, there is a telemetry center

**29)Do you think that the medical and/or nursing staff is numerically appropriate to satisfy the job request?**

Yes, for both

No, for both

No, inappropriate medical staff

No, inappropriate nursing staff

**30)Are there filter/control systems for healthcare personnel at the entrance of your hospital and/or ward?**

Yes

No

*If yes, which ones among them (possible multiple choice)?*

temperature control

PPE (e.g. surgical mask)

alcoholic solution, gel or other composition for hand disinfection

Other (specify)

**31)Is psychological support for the medical personnel offered in your workplace?**

Yes

No

*If yes, did you use it?*

No, I didn't feel the need for it

No, I had no time to attend it

Yes, and it was useful

Yes, but it was useless

**32)Is there a follow-up program for inpatients with COVID-19 pneumonia after discharge?**

Yes, by specific territorial outsourcing

Yes, by evaluation of the general practitioner

Yes, by outpatient clinical evaluation shortly

Yes, by telephone service

Yes, by telemedicine

No, it was not expected

**33)Based on your recent COVID experience, Have you reported “sequelae” in hospitalized patients with pneumonia after discharge?**

Very serious for both

Modest respiratory consequences

Relevant respiratory consequences

Modest motor consequences

Relevant motor consequences

Negligible

**34)Which of these tips do you think they are the most important to give to colleagues who are preparing to treat COVID patients *(possible multiple choice)*?**

Distinguish covid area for infected and suspected patients from non-covid area

Training on PPE use

Training on ventilatory therapy

Training on Covid drugs use

Multidisciplinary team creation

Increase beds in Intensive Care Unit

Increase beds in Semi-Intensive Care Unit