**Supplementary Content 2. Questions of the second round of the survey.**

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| **QUESTIONS** | **ANSWERS** |
| 1. Could you kindly provide your email address? |  |
| 1. Hospital |  |
| 1. Do you have patients currently getting treated with COVID-19 in your hospital? | Yes/No |
| 1. How many suspected / confirmed cases of COVID-19 do you have at your hospital? | <10/11-20/21-30/31-40/41-50/>50/51-70/71-100/101-200/>200/Unknown |
| 1. Using the following system, what is the current CRITCON level of your hospital? | CRITCON 0/1/2/3/4 |
| 1. Have you developed or are you applying special protocols for the treatment of oncological patients during the pandemic in your hospital? | Yes/No |
| 1. Is preclinical COVID-19 testing (e.g. by the family doctor) required in your hospital before admission? | Yes/No |
| 1. Do you test patients in your clinic/department for COVID-19 before surgery? | All (100%) - with swab+PCR/All (100%) - with antibody test/All (100%) - with antibody test and swab+PCR/Yes (<100%) - with swab+PCR/Yes (<100%) - with antibody test/Yes (<100%) - with antibody test and swab+PCR/No |
| 1. How long should you wait for the test results? | ca. 6h/12h/24h/>24h |
| 1. Did you or your staff operate on patients with COVID-19? | Yes/No |
| 1. Is there adequate and sufficient personal protective clothing (e.g. FFP2 / FFP3 mask) / equipment for the staff in the operating rooms? | Yes/No |
| 1. Is there adequate and sufficient personal protective equipment for the staff at non-Covid wards? | Yes/No |
| 1. In your hospital, are you and your staff tested for COVID-19? | Yes - only with typical symptoms of a Covid infection (fever, cough, etc.)/Yes - regularly, even without typical symptoms of a Covid infection (fever, cough, etc.)/No - Routine screening not available |
| 1. With which test were you and your employees tested with on COVID-19? | Antibody test/Swab+PCR/No - Routine screening not available |
| 1. Did you have symptoms typical for a Covid infection (fever, cough, etc.) and were you tested for COVID-19 (swab+PCR or antibody test)? | Yes - positiv/Yes - negativ/No |
| 1. Did you do a period of self-isolation? | Yes, 1 week/Yes, 2weeks/ Yes, >2 weeks, No, Not applicable |
| 1. How many members of your team were sick or had to isolate themselves because of Covid? (Positive staff/total staff) |  |
| 1. Have you or a member of your team been transferred from surgery to other departments of the hospital? (Please tick all that apply) | No - no changes/ No - Home office/ Yes - ICU/ Yes- Emergency department/ Yes - internal medicine ward/ Yes - management department |
| 1. Are tumour boards at your center running as usual? | Yes (face-to-face)/No, limited number of people in the room/No, vitual tumor board (Skype)/No, they have stopped |
| 1. If "no," do you find the new tumor boards efficient? | Yes/No |
| 1. Endoscopy - How has the availability of examinations changed in the last 2 weeks? | Normal, as usual/ stable, but still limited/delayed availability/improved/further worsened |
| 1. Radiology - How has the availability of examinations changed in the last 2 weeks? | Normal, as usual/Stable, but still limited/delayed availability/Improved/Further worsened |
| 1. Are you considering changing your standard treatment for RESEKTABLE pancreatic cancer to address the problems of the pandemic? (Please tick all that apply) | No/Yes, even resectable pancreatic carcinomas are treated with neoadjuvant chemotherapy |
| 1. Are you considering changing your standard treatment for BORDERLINE/LOKAL ADVANCED pancreatic cancer to address the problems of the pandemic? (Please tick all that apply) | Yes, extension of the duration/cycles of neoadjuvant chemotherapy/Yes, not neoadjuvant therapy, but primary resection/Yes, definitive chemotherapy/No |
| 1. Because of COVID-19 pandemic and consequent limited access to ICU capacity and access to surgery, how long would you wait before surgery? | 1-2 weeks/2-4 weeks/4-6 weeks/>6 weeks |
| 1. Because of COVID-19 pandemic and consequent limited ICU capacity and reduced surgical activity, how long would you wait after neoadjuvant therapy? | No changes/Neoadjuvant therapy is not available/<6 weeks/6-8 weeks/8-10 weeks/10-12 weeks/>12 weeks |
| 1. Due to the COVID 19 pandemic, have you prioritized certain patient groups for upcoming resections? | Yes/No |
| 1. Are the legal requirements in your country/state interpreted more strictly at your center regarding the permitted number of interventions (emergency) (e.g. no elective procedures performed yet, although permitted by law)? | Yes/No |
| 1. Did patients still refuse or postpone surgery in the last 2 weeks because of fear of COVID-19? | Yes/No |
| 1. During COVID-19 pandemic, are adjuvant treatments running as usual? | Yes/No - we have noticed problems or delay/No - adjuvant treatments have stopped |
| 1. During COVID-19 pandemic, is follow-up running as usual? | Yes/No - we have noticed problems or delay/No - follow-up have stopped |
| 1. Will the ambulatory service during the COVID 19 pandemic run as usual? | Yes/No - we visit more patients/No - we visit less patients/No - ambulatory service have stopped |
| 1. How many more/less patients do you examine during the ambulatory service? | 10%/20%/30%/50%/<50% |
| 1. Have you set up a virtual ambulatory service or follow-up? | Yes/No |
| 1. Has the ICU capacity for COVID patients in your hospital been increased? | Yes/No |
| 1. Has the ICU availability for surgical patients in your hospital been further reduced in the last 2 weeks? | Yes/No |
| 1. Is there a change in the postoperative course of treatment during the COVID pandemic? | Yes - we transfer the patients back to the ward earlier/Yes - we do not transfer patients to the intensive care / monitoring unit after the operation/Yes - we are considering moving patients to another hospital/No |
| 1. During the COVID pandemic has there been a change in the management of complications? | No/Yes - we have limited/delayed radiological/endoscopic interventions/Yes - we have limited ICU beds/Both |
| 1. During the COVID pandemic has there been a change in the post-operative lenght of stay? | No/Yes - we consider to anticipate the discharge/Yes - we consider to send patients to a different hospital/Yes - we consider to send patients to a rehabilitation center |
| 1. Have patients developed postoperative COVID-19 infections after pancreatic resections? | Yes/No |
| 1. How many patients have developed postoperative COVID-19 infections after pancreatic resections? | 0%/1-5%/5-10%/10-20%/20-30%/>30%/Unknown |
| 1. In your opinion, did Covid-positive patients have more complications? | Yes/No/Unknown |
| 1. How do you judge the current situation of your hospital in the last 2 weeks? | Normal, as usual/Problematic but stable/Improved/Worsened |
| 1. How do you judge the measures taken by your hospital against the pandemic? | Insufficient and delayed/Adequately and in time/Excessive/Greatly exaggerated |
| 1. How do you judge the restriction of surgical activity during the pandemic? | Insufficient/Adequately/Excessive/Greatly exaggerated |
| 1. Do you think that this COVID-19 pandemic changed your clinical practice? | Yes/No/Maybe |
| 1. Do you think that COVID-19 pandemic is reducing the quality of your clinical practice? | Yes/No/Maybe |
| 1. Do you feel yourself under stress more than usual during the COVID-19 pandemic? | Yes/No/Maybe |
| 1. Do you think that patients still worry about uncertainties and risks due to COVID-19 before surgery? | Yes/No |
| 1. Do you think that patients still continue to avoid the hospital because of the COVID-19 pandemic? | Yes/No |
| 1. According to the previous question, do you believe that the diagnosis of pancreatic cancer has been delayed and could be at a more advanced stage? | Yes/No/Maybe |
| 1. Do you think that virtual consultation services (consultation hours/aftercare) could be useful for patients? | Yes/No |
| 1. Please suggest possible solutions for the future to avoid restrictions in oncological surgery: |  |