

USE OF RESOURCES QUESTIONNAIRE (to be completed by a hospital representative)

1. For the use of routine oxygen supplementation (ROS) for a stroke patient in the first 72 hours, what types and grades of staff are required and what is the average **additional** time required per member of staff (over and above all other standard care for the patient)?

Use of staff in ROS per treatment group				
Staff member (title)	Grade	Total time (in minutes) allocated per intervention		
		Treatment group 2 Night-time ROS for 72 hours	Treatment group 3 Continuous ROS for 72 hours	

2. Please give information on the <u>additional</u> equipment required per patient to administer routine oxygen supplementation (ROS) for a stroke patient (over and above the equipment required in standard care). The average number of units mean, on average how many pieces of equipment are required over a 72 hour period (e.g. 2 oxygen masks, 3 nasal tubes)? We do not need information on the amount of oxygen required per patient as we will be able to calculate this using trial data.

	Use of equipment for ROS in a stroke		Additional
Equipment	patient		information to
	Average number of units per patient		assist with
	Treatment group 2	Treatment group 3	costing e.g.
	Night-time ROS for	Continuous ROS	manufacturer (if
	72 hours	for 72 hours	known)
Oxygen tubing(s)			
D + 11			
Portable oxygen			
cylinder			
Nasal tubes			
Oxygen mask			
(Venturi mask,			
MC mask)			

Other (please		
specify)*		

3. Please answer the following questions as accurate as possible:

Questions	Answers
What was the percentage of patients using masks?	
What was the percentage of patients in a cannula	
What was the percentage of patients having oxygen from a bottle	
Do you use dehumidifiers with the cannula?	
Do you use dehumidifiers with the oxygen mask?	
If a patient had a scan did they have the oxygen disconnected during the scan? Or did the patient have a scan with the oxygen bottle?	
How often things get replaced over 3 days?	
Other comments or further clarification?	

4. If you have any further information which you feel may be useful in our estimation of ROS costs, please write it here.

^{*}Please, indicate if there is a piece of equipment normally used by your institution in ROS for stroke patients which is not included here



Thank you for your time