Appendix 1: Staff Survey and Trainee Survey

Double Gloving Staff Survey

Staff Survey

Survey Items

- **Page One**
  - 1) Are you affiliated with the:
    - University of Alberta
    - University of Calgary
  - 2) Are you a:
    - Resident or Fellow (survey logic to go to Resident Survey)
    - **Staff Surgeon (survey logic to go to page Staff Survey)**
  - 3) What is your primary area of practice?
    - Cardiac Surgery
    - Colorectal Surgery
    - General Surgery
    - Neurosurgery
    - Obstetrics and Gynaecology
    - Ophthalmology
    - Orthopedic Surgery
    - Otolaryngology
    - Pediatric Surgery
    - Plastic Surgery
    - Surgical Oncology
    - Thoracic Surgery
    - Transplant Surgery
    - Urology
    - Vascular Surgery

- **Page 2**
  - 4) Age
    - <25
    - 25-29
    - 30-34
    - 35-39
    - 40-44
    - 45-49
    - 50-54
    - 55-59
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- 60-64
- 65 or older
  - 5) Years in Practice (enter value)
  - 6) Gender
    - Female
    - Male

- **Page 3**
  - 7) Do you ever double glove in the operating room?
    - Yes (Proceed to page 4)
    - No (Proceed to page 5)

- **Page 4 (if yes to question 7 from page 3) → after this page proceed to page 6**
  - 8) How often do you double glove?
    - Always/Routinely
    - Rarely
    - Select Cases (please elaborate)
  - 9) What method of double gloving do you use?
    - Larger glove on the inside
    - Larger glove on the outside
    - Two gloves of equal size
    - Glove liners
    - Other (please describe)
  - 10) When did you begin double gloving? (Survey logic – choices of medical student, resident, and fellow redirect to question 11, choice of as a staff surgeon redirects to question 12).
    - As a medical student
    - As a resident
    - As a fellow
    - As a staff surgeon
  - 11) I began to double glove in training because:
    - My staff double gloved and I followed their practice
    - My senior resident double gloved and I followed their practice
    - The nursing staff in the operating room double gloved and I followed their practice
    - I was explicitly told to double glove by a senior member of the surgical team such as a nurse, resident, or staff surgeon
    - I felt pressure from my staff or senior colleagues to double glove
  - 12) As a staff surgeon I chose to double glove because:
    - My current trainees double glove
    - I felt it was the best way to protect my patients
    - I felt it was the best way to protect myself
    - I received a previous percutaneous injury/exposure
    - I want to set a good example
    - Other (please elaborate – free text box)
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- **Page 5 (if not to question 7 from page Three ➔ after this page proceed to page 6**
  - 13) If you do not routinely double glove in the operating room, please rank the factors in order of importance that prevent you from double gloving (Likert Scale – least important, less important, neutral, more important, most important):
    - Habit/How you trained
    - Decrease in manual dexterity
    - Decreased comfort/Poor fit
    - Poor evidence for the practice of double gloving
    - Reduced tactile feedback
    - Low risk of contamination or percutaneous injury
    - Short procedures
    - Other (please elaborate)
  - 14) If you do not routinely double glove in the operating room, please rank the factors in order of importance that would influence you to double glove for a procedure (Likert Scale – least influence, less influence, no influence, more influence, most influence)
    - My fellow or resident double gloves
    - Patient Factors
      - Suspected Infection
      - Known Infection
    - Procedure Factors
      - Complex
      - Lengthy
      - Delicacy
      - Bony Fragments
      - Expectation of potential for glove compromise
      - Sharp or heavy surgical instruments

- **Page 6 ➔ after this page proceed to page 7**
  - 15) Have you ever had a needle stick injury (i.e. a sharp has broken your skin)?
    - Yes
    - No
  - 16) Do you routinely change out your gloves during procedures greater than 4 hours in length?
    - Yes
    - No
    - Procedures are all less than 4 hours in length

- **Page 7**
  - 17) Do you wear eye protection in the operating room?
    - Yes (Proceed to page 9)
    - No (End of survey)

- **Page 8 ➔ survey complete at end of this page**
  - 18) How often do you wear eye protection while operating?
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- Always/Routinely
- Rarely
- Select Cases (please elaborate)
  19) What form of eye protection do you wear in the operating room?
     - Safety glasses
     - Prescription Glasses
     - Safety glasses overtop of prescription glasses
     - Surgical mask with integrated eye shield
     - Surgical Loupes

THANK YOU! THIS CONCLUDES THE SURVEY.
Double Gloving Trainee Survey

Resident/Fellow Survey

Survey Items

- **Page One**
  - 1) Are you affiliated with the:
    - University of Alberta
    - University of Calgary
  - 2) Are you a:
    - Resident or Fellow (survey logic to go to Trainee Survey)
    - Staff Surgeon (survey logic to go to page Staff Survey)
  - 3) What is your primary area of practice?
    - Cardiac Surgery
    - Colorectal Surgery
    - General Surgery
    - Neurosurgery
    - Obstetrics and Gynaecology
    - Ophthalmology
    - Orthopedic Surgery
    - Otolaryngology
    - Pediatric Surgery
    - Plastic Surgery
    - Surgical Oncology
    - Thoracic Surgery
    - Transplant Surgery
    - Urology
    - Vascular Surgery

- **Page 2**
  - 4) Age
    - <25
    - 25-29
    - 30-34
    - 35-39
    - 40-44
    - 45-49
    - 50-54
    - 55-59
    - 60-64
    - 65 or older
  - 5) Year of Surgical Training (include research years in your total tally)
    - PGY-1
    - PGY-2
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- PGY-3
- PGY-4
- PGY-5
- PGY-6
- PGY-7
- PGY-8 or greater

6) Gender
- Female
- Male

Page 3
7) Do you ever double glove in the operating room?
   - Yes (Proceed to page 4)
   - No (Proceed to page 5)

Page 4 (if yes to question 7 from page 3) → after this page proceed to page 6
8) How often do you double glove?
   - Always/Routinely
   - Rarely
   - Select Cases (please elaborate)

9) What method of double gloving do you use?
   - Larger glove on the inside
   - Larger glove on the outside
   - Two gloves of equal size
   - Glove liners
   - Other (please describe)

10) When did you begin double gloving?
    - As a medical student
    - As a resident
    - As a fellow

11) As a trainee, I double glove because:
    - My staff/preceptors routinely double glove
    - My senior residents and fellows routinely double glove
    - The nursing staff in the operating room routinely double glove
    - I was explicitly told to double glove by another member of the surgical team such as a nurse, resident, or staff surgeon
    - I felt it was the best way to protect my patients
    - I felt it was the best way to protect myself
    - I experienced a previous percutaneous injury/exposure
    - I feel pressured to double glove

Page 5 (if no to question 7 from page Three → after this page proceed to page 6
12) If you do not routinely double glove in the operating room, please rank the factors in order of importance that prevent you from double gloving (Likert Scale – least important, less important, neutral, more important, most important):
    - Habit/How you trained
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- Decrease in manual dexterity
- Decreased comfort/Poor fit
- Poor evidence for the practice of double gloving
- Reduced tactile feedback
- Low risk of contamination or percutaneous injury
- Short procedures
- Other (please elaborate)

13) If you do not routinely double glove in the operating room, please rank the factors that would influence you to double glove for a procedure (Likert Scale – least influence, less influence, no influence, more influence, most influence)
- My staff double gloves
- My fellow or senior resident double gloves
- Patient Factors
  - Suspected Infection
  - Known Infection
- Procedure Factors
  - Complex
  - Lengthy
  - Delicacy
  - Bony Fragments
  - Expectation of potential for glove compromise
  - Sharp or heavy surgical instruments

Page 6 ➔ after this page proceed to page 7

14) Have you ever had a needle stick injury (i.e. a sharp has broken your skin)?
- Yes
- No

15) Do you routinely change out your gloves during procedures greater than 4 hours in length?
- Yes
- No
- Procedures are all less than 4 hours in length

Page 7

16) Do you wear eye protection in the operating room?
- Yes (Proceed to page 9)
- No (End of survey)

Page 8 ➔ survey complete at end of this page

17) How often do you wear eye protection while operating?
- Always/Routinely
- Rarely
- Select Cases (please elaborate)

18) What form of eye protection do you wear in the operating room?
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- Safety glasses
- Prescription Glasses
- Safety glasses overtop of prescription glasses
- Surgical mask with integrated eye shield
- Surgical Loupes

THANK YOU! THIS CONCLUDES THE SURVEY.