Appendix 1

General questions

1. What is your age?
years
2. What is your gender? Male Female
3. How many years of experience do you have as a general practitioner (GP)?
years
 4. Do you work as a locum GP or as a regular GP? ☐ Locum general practitioner ☐ Regular general practitioner
5. Where do you work most of the time (4 numbers of Postal Code)?
6. How many advance euthanasia directives (AED) do you think you receive monthly? ☐ <1 per month ☐ 1 per month ☐ >1 per month
 7. How much time do you spend on average discussing AEDs monthly? <20 minutes per month 20 minutes per month >20 minutes per month
8. How often is, estimated, a euthanasia request for dementia included in the AED? Less than 50% About 50% More than 50%
9. Have you ever contacted any of these healthcare professionals to discuss a case of a person with dementia? (Several answers possible) Colleague GP Elderly care physician SCEN physician Consultant palliative care Health care chaplain Humanistic caregiver Spiritual care provider Practice nurse specialized in psychiatrics Psychologist

None						
☐ Other						
10. Have you ever had a editional request from a patient without dementiar						
□Yes						
\square No \rightarrow Skip to question 13						
11. Have you ever performed euthanasia on a patient WITHOUT dementia?						
Yes						
□ No						
12. What kind of burden have you experienced regarding the euthanasia request and possible						
euthanasia procedure? (Several answers possible)						
☐ Pressure from the patient						
☐ Pressure from relatives						
☐ Emotional burden						
☐ Uncertainty concerning the technical execution						
☐ Uncertainty concerning the mental competence						
Uncertainty concerning the advance euthanasia directive						
☐ Time pressure						
☐ No burden						
☐ Other						
Questions regarding to patients with dementia						
13. Have you ever had a euthanasia <u>request</u> from a patient WITH dementia?						
(Several answers possible)						
☐ Yes, the patient was competent at that time						
☐ Yes, the patient was incompetent at that time						
☐ No → Skip to question 17						
44.11.						
14. Have you ever <u>performed</u> euthanasia on a patient WITH dementia? (Several answers possible)						
☐ Yes, the patient was competent at that time						
\square Yes, the patient was incompetent at that time						
□ No						
15. What form of burden have you experienced regarding the euthanasia request and possible						
euthanasia procedure? (Several answers possible)						
☐ Pressure from the patient						
☐ Pressure from relatives						
☐ Emotional burden						
☐ Uncertainty concerning the technical execution						
☐ Uncertainty concerning the mental competence						
☐ Uncertainty concerning the advance euthanasia directive						
☐ Time pressure						
☐ No burden						
☐ Other						

16. Please give a short outline of the situation in which there was ambiguity regarding the competency of the patient, if applicable.								
17. Is it possible that you will perform euthanasia in a patient with dementia in the future? ☐ Yes, I think that can be possible ☐ No, but I will always refer these patients to a colleague ☐ No, and I will never refer these patients to a colleague								
18. Did the recent debates about euthanasia in patients with dementia influence your way of acting (Several answers possible) Yes, I am more reserved in performing euthanasia Yes, I am more fearful for the legal processes Yes, I am more prone to forward these patients to a colleague/end-of-life clinic Yes, I consult other healthcare professionals more often No, no influence Other								
19. Which treatment options regarding end of life listed below, do you discuss with your patients with dementia? (Several answers possible) No antibiotics for infections No life-extending treatments No CPR No hospital admissions Palliative sedation Physician-assisted suicide Not applicable								

Support of healthcare professionals regarding euthanasia requests in patients with dementia

If you have never had a euthanasia request of a patient with dementia, you can skip to question 21.

20. Wh	at kinds	of sup	port h	ave you ı	used wh	nen deal	ing with	previou	s eutha	nasia requests or	
proced	lures? (S	everal	answe	rs possib	le)					·	
☐ Consulting palliative care											
☐ Geriatric consult team ☐ Humanistic caregiver											
	☐ End	-of-life	e clinic (physician/nurse)								
	☐ Mor	al deliberation									
 □ PaTz-group¹ □ SCEN physician □ Spiritual care provider 											
	☐ Spir	itua <u>l ca</u>	re pro	vider							
	☐ Oth	er									
21. Wh	at kinds	of sup	port w	ould you	ı like to	use whe	n dealir	ng with e	euthana	sia requests in th	e
future	? (Severo	al answ	ers po	ssible)							
	☐ Con	sulting	palliat	ive care							
	☐ Geri	atric co	nsult [·]	team							
	☐ Hun	nanistic	careg	iver							
	☐ End	of-life	clinic (physiciar	n/nurse)					
	☐ Mor	al delib	eratio	n							
	☐ PaT	z-group	1								
	SCE										
	 ☐ Spir			vider							
	☐ Oth										
		·									
22. Hov	w impor	tant do	vou r	ate the s	upport	of health	ncare pr	ofession	als in th	e different phase	s of the
										very important)	
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The pe	rformar	nce of t	he eut	hanasia							
0	1	2	3	4	5	6	7	8	9	10	
The pro	ocedure	after t	he pei	formand	e of the	e euthar	nasia				
0	1	2	3	4	5	6	7	8	9	10	

 $^{^1}$ Group of general practitioners and district nurses that debate six times a year under the supervision of a palliative care consultant to identify palliative care early, to act proactively.

Training regarding euthanasia in patients with dementia									
23. In which area would you like to increase your knowledge during training?									
(Several answers possible)									
☐ Communication techniques to discuss end of life									
☐ Signaling symptoms (pain for example) in patients with a cognitive impairment									
☐ Dealing with the pressure by relatives									
☐ Legislation and interpretation of euthanasia regarding PWD									
☐ Advance care planning									
☐ Disease trajectory of dementia									
☐ How to compose and handle an advance euthanasia directive									
☐ No wishes to increase knowledge of skills									
☐ Other									
Your own input									
If you feel like something you want to share is missing in the questionnaire, please write it down in									
the box below.									
This is the end of this questionnaire. We want to thank you very much for participating. If you are interested in									
the results of this study, write down your email address in the box below.									
Your email address will only be used for sharing the results.									
You can return the completed questionnaire in the attached self-addressed envelop									

Euthanasia request in patients with dementia.