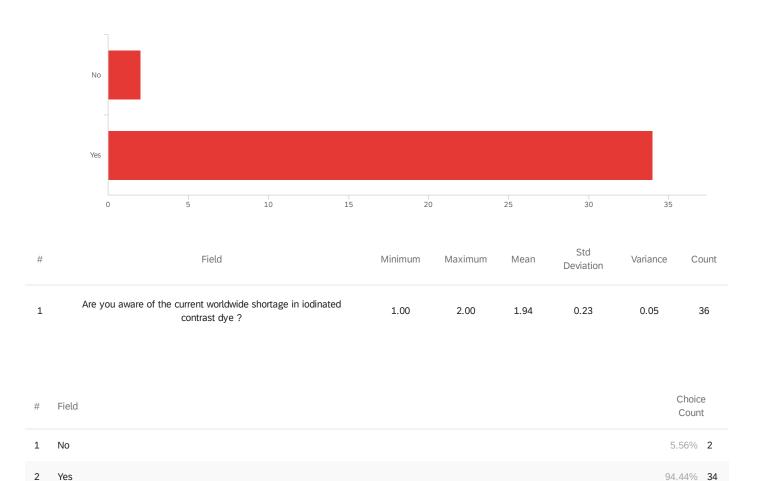
Default Report

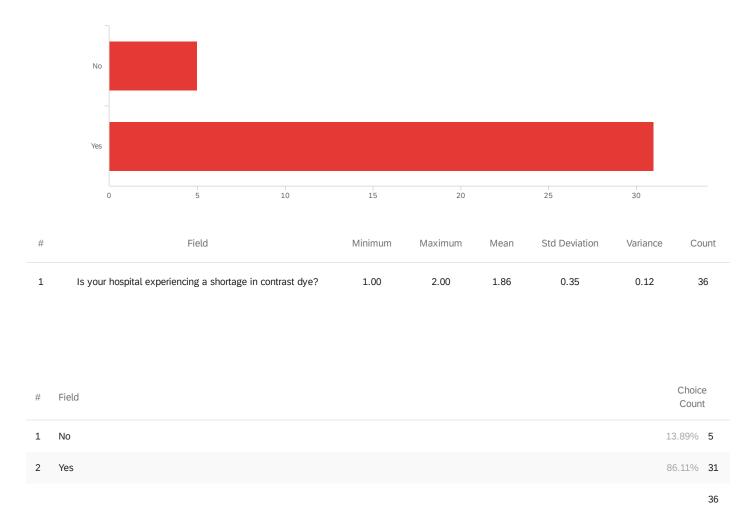
Contrast Shortage Survey July 23, 2022 3:34 PM MDT



Q4 - Are you aware of the current worldwide shortage in iodinated contrast dye ?

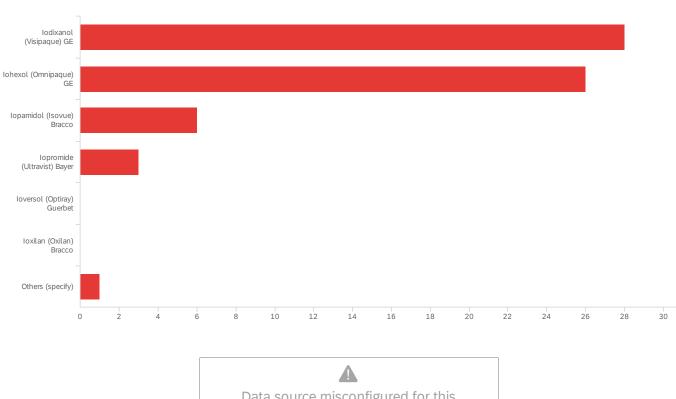
Showing rows 1 - 3 of 3

36



Q5 - Is your hospital experiencing a shortage in contrast dye?

Q6 - Which contrast agents do you use in the catheterization laboratory? (select all that



apply)



#	Field	Choic Coun	
1	Iodixanol (Visipaque) GE	43.75%	28
2	Iohexol (Omnipaque) GE	40.63%	26
3	Iopamidol (Isovue) Bracco	9.38%	6
4	Iopromide (Ultravist) Bayer	4.69%	3
5	Ioversol (Optiray) Guerbet	0.00%	0
6	Ioxilan (Oxilan) Bracco	0.00%	0
7	Others (specify)	1.56%	1
			64

Others (specify)

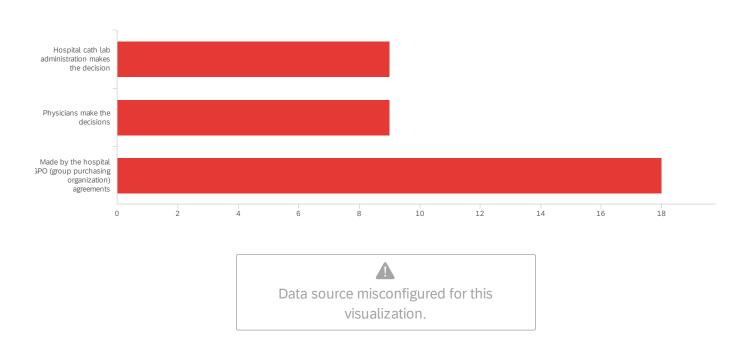
Iobitridol (Guerbet)

Q7 - Do you or the medical director of the cath lab have input into the choice of contrast



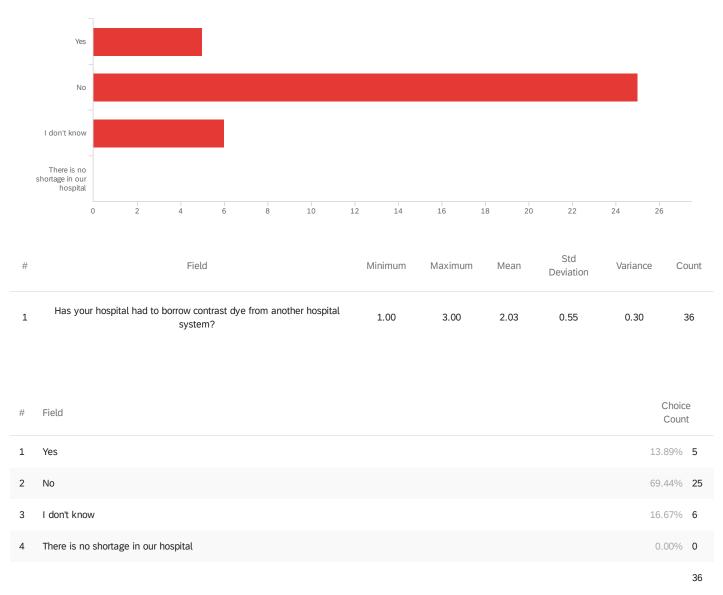
media purchased?

Q8 - How is the decision made to purchase specific types of contrast agents? (select all



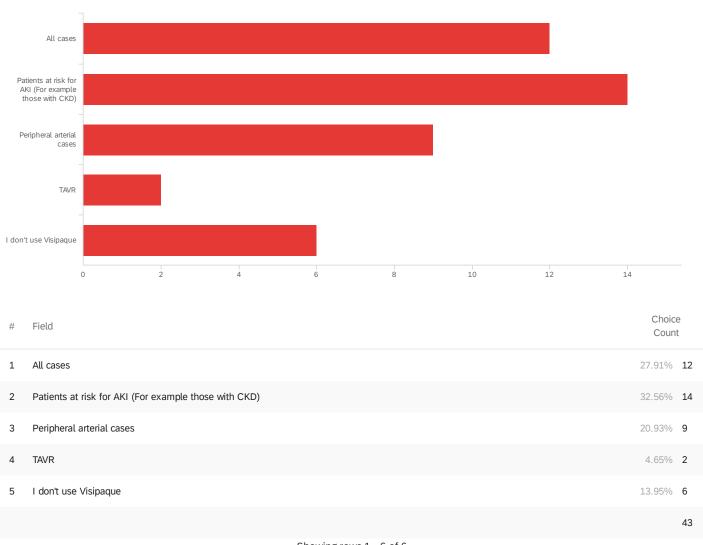
that apply)

#	Field	Choice Count	
1	Hospital cath lab administration makes the decision	25.00%	9
2	Physicians make the decisions	25.00%	9
3	Made by the hospital GPO (group purchasing organization) agreements	50.00%	18
			36

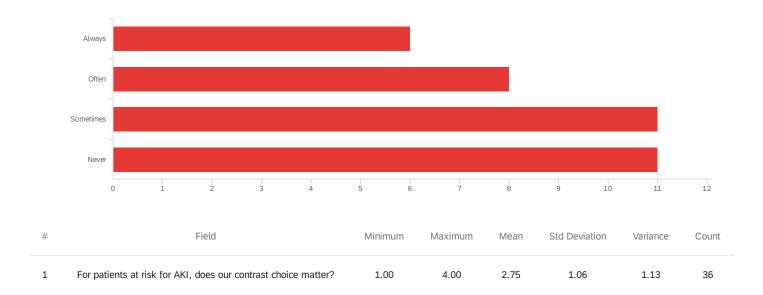


Q9 - Has your hospital had to borrow contrast dye from another hospital system?

Q10 - For what types of cases do you use Iodixanol (Visipaque) GE in your cath lab?



(select all that apply)



Q11 - For patients at risk for AKI, does our contrast choice matter?

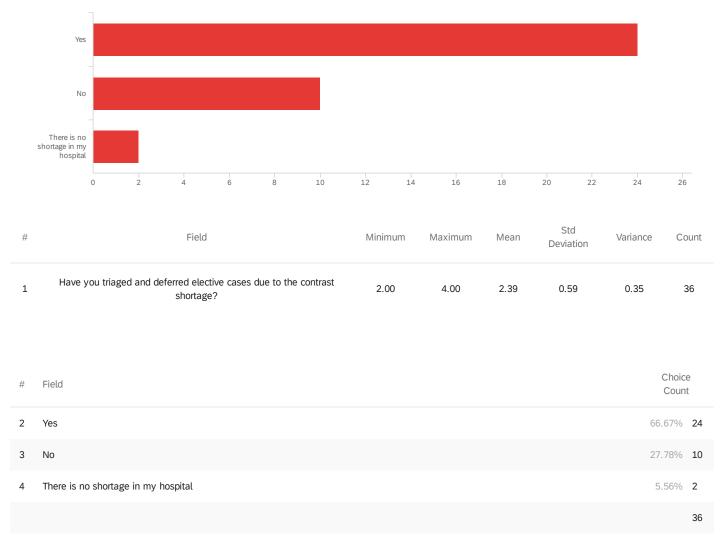
#	Field	Choic Coun	
1	Always	16.67%	6
2	Often	22.22%	8
3	Sometimes	30.56%	11
4	Never	30.56%	11
			36

Q12 - Approximately how much contrast dye does your hospital have on hand currently

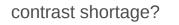


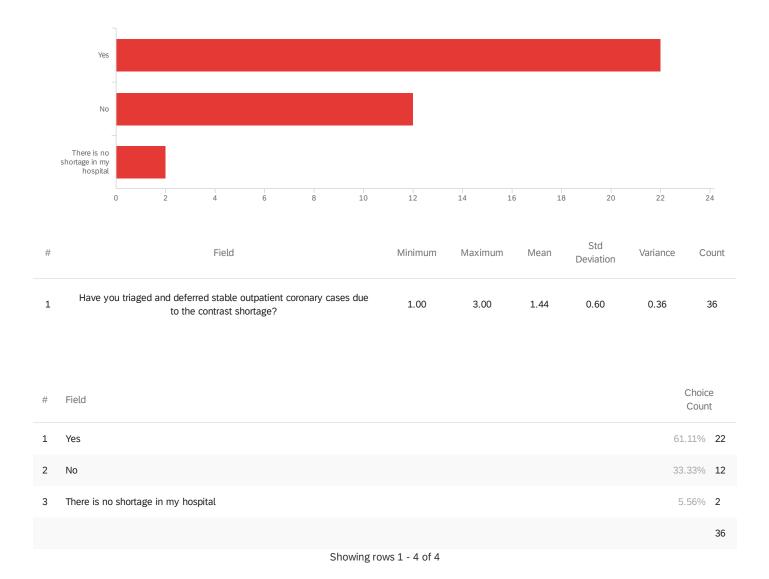
for the cath lab?

Q13 - Have you triaged and deferred elective cases due to the contrast shortage?

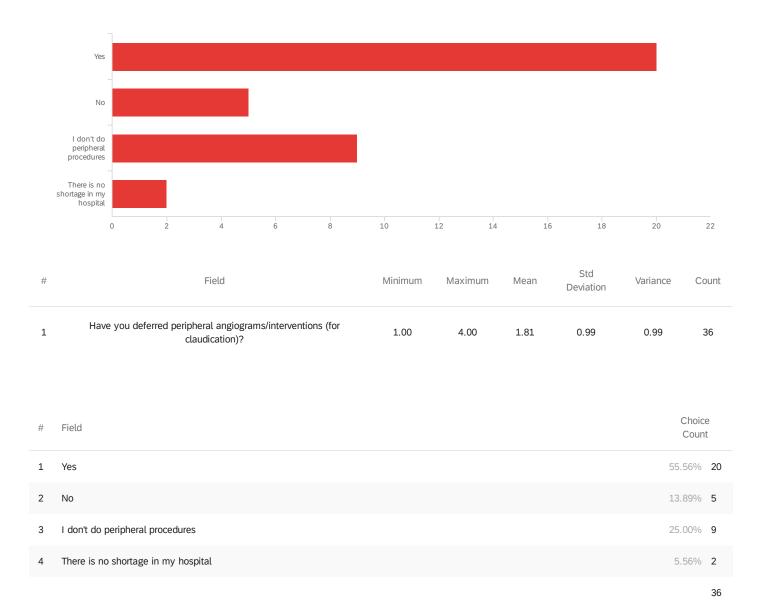


Q14 - Have you triaged and deferred stable outpatient coronary cases due to the





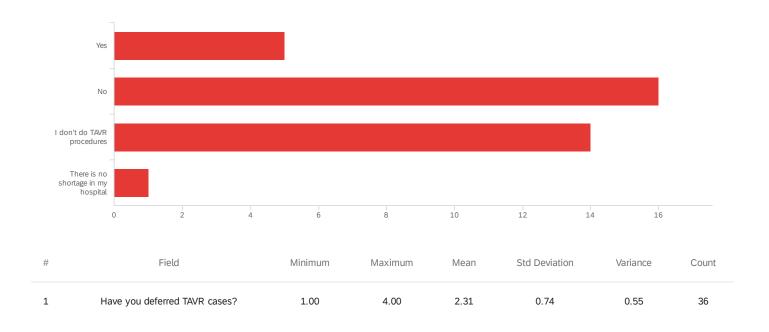






Q16 - Have you deferred peripheral angiograms/interventions (for CLI)?

Q17 - Have you deferred TAVR cases?



#	Field	Choic Coun	
1	Yes	13.89%	5
2	No	44.44%	16
3	I don't do TAVR procedures	38.89%	14
4	There is no shortage in my hospital	2.78%	1
			36

Q18#1 - For outpatients, what is your approach to deferring/rescheduling due to the

contrast shortage? - Select most widely used strategy

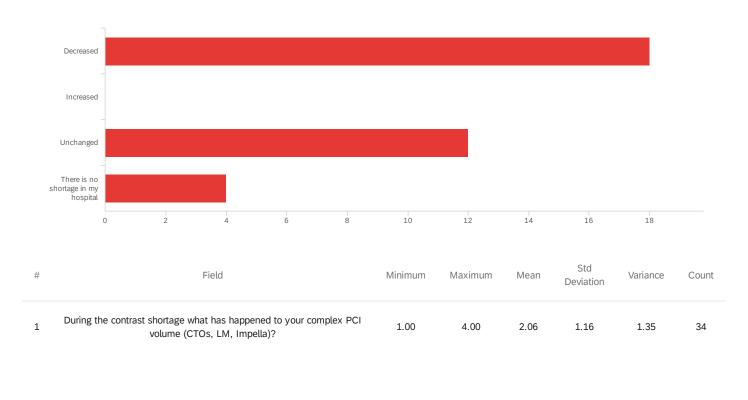
#	Field	Must be done	Can be delayed up to 4 weeks	Can be delayed > 4 weeks	Total
1	Class I/II angina	9.09% 2	31.82% 7	59.09% 13	22
2	Class III/IV angina	61.90% 13	23.81% 5	14.29% 3	21
3	Newly diagnosed systolic heart failure	38.10% 8	23.81% 5	38.10% 8	21
4	Ischemia on non-invasive testing or abnormal coronary CT angiogram with otherwise stable symptoms	19.05% 4	38.10% 8	42.86% 9	21
5	Pre-solid organ transplant (liver)	25.00% 5	30.00% 6	45.00% 9	20
6	Pre-solid organ transplant (kidney)	20.00% 4	30.00% 6	50.00% 10	20
7	Pre-solid organ transplant (lung)	25.00% 5	30.00% 6	45.00% 9	20
8	Pre-non cardiac surgery (other than transplant)	5.00% 1	45.00% 9	50.00% 10	20

#	Field	Minimum	Maximum	Mean	Std Deviation	Variance	Count
1	Class I/II angina	1.00	3.00	2.50	0.66	0.43	22
2	Class III/IV angina	1.00	3.00	1.52	0.73	0.54	21
3	Newly diagnosed systolic heart failure	1.00	3.00	2.00	0.87	0.76	21
4	Ischemia on non-invasive testing or abnormal coronary CT angiogram with otherwise stable symptoms	1.00	3.00	2.24	0.75	0.56	21
5	Pre-solid organ transplant (liver)	1.00	3.00	2.20	0.81	0.66	20
6	Pre-solid organ transplant (kidney)	1.00	3.00	2.30	0.78	0.61	20
7	Pre-solid organ transplant (lung)	1.00	3.00	2.20	0.81	0.66	20
8	Pre-non cardiac surgery (other than transplant)	1.00	3.00	2.45	0.59	0.35	20

#	Field	Must be done	Can be delayed up to 4 weeks	Can be delayed > 4 weeks	Total
1	Class I/II angina	9.09% 2	31.82% 7	59.09% 13	22

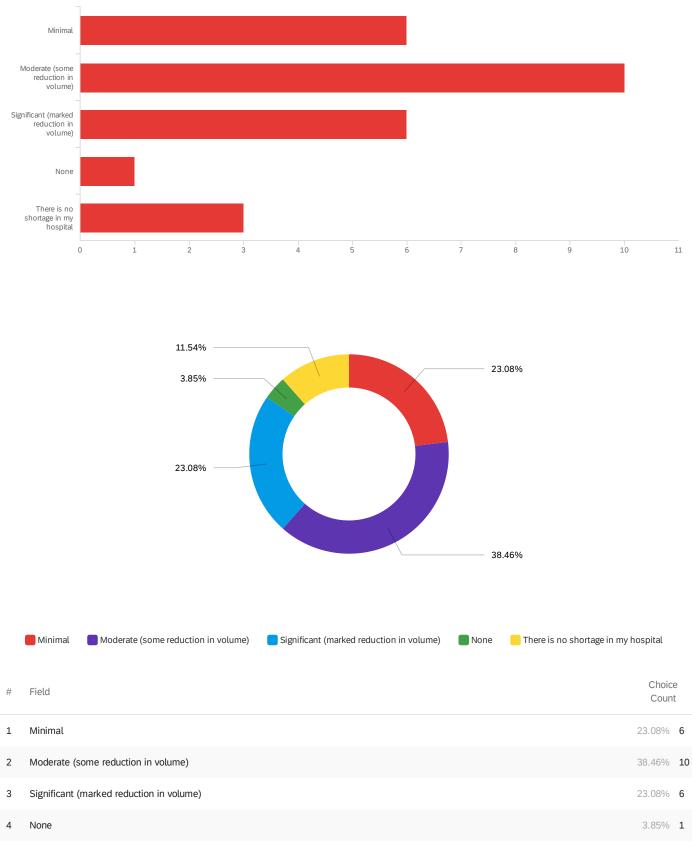
#	Field	Must be done	Can be delayed up to 4 weeks	Can be delayed > 4 weeks	Total
2	Class III/IV angina	61.90% 13	23.81% 5	14.29% 3	21
3	Newly diagnosed systolic heart failure	38.10% 8	23.81% 5	38.10% 8	21
4	Ischemia on non-invasive testing or abnormal coronary CT angiogram with otherwise stable symptoms	19.05% 4	38.10% 8	42.86% 9	21
5	Pre-solid organ transplant (liver)	25.00% 5	30.00% 6	45.00% 9	20
6	Pre-solid organ transplant (kidney)	20.00% 4	30.00% 6	50.00% 10	20
7	Pre-solid organ transplant (lung)	25.00% 5	30.00% 6	45.00% 9	20
8	Pre-non cardiac surgery (other than transplant)	5.00% 1	45.00% 9	50.00% 10	20

Q19 - During the contrast shortage what has happened to your complex PCI volume



(CTOs, LM, Impella)?

#	Field	Choice Coun	
1	Decreased	52.94%	18
2	Increased	0.00%	0
3	Unchanged	35.29%	12
4	There is no shortage in my hospital	11.76%	4
			34



Q20 - The impact on fellow education of the contrast shortage has been:

5 There is no shortage in my hospital

11.54% 3

26

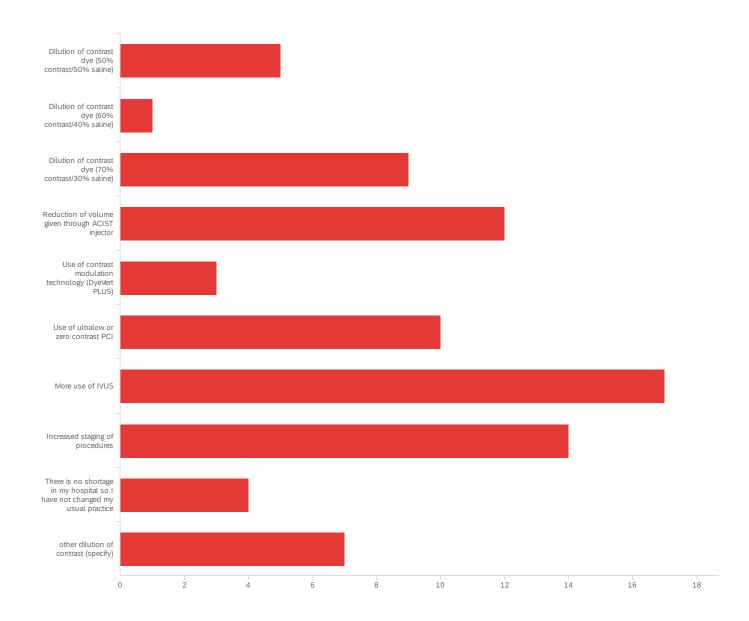


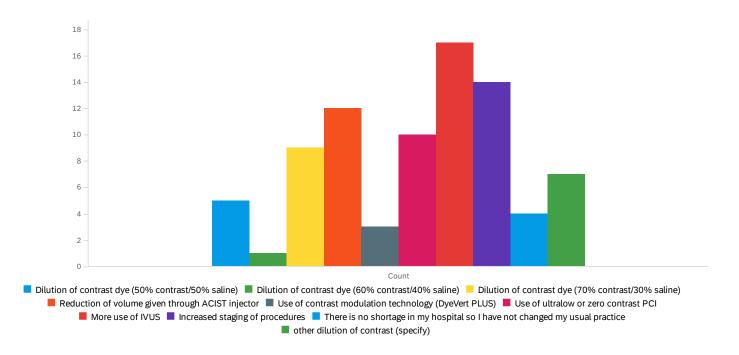


1	Manifold only	40.00%	14
2	ACIST injector	31.43%	11
3	Manifold for some cases and ACIST for some cases	28.57%	10
			35

Q22 - For CORONARY cases which of the following procedural techniques have you

used to reduce contrast use during the shortage? (select all that apply)





Q21_11_TEXT - other dilution of contrast (specify)

other dilution of contrast (specify)

Bunching cases on certain days to be most efficient for Acist use

Breaking up 150cc bottles to 50cc syringes

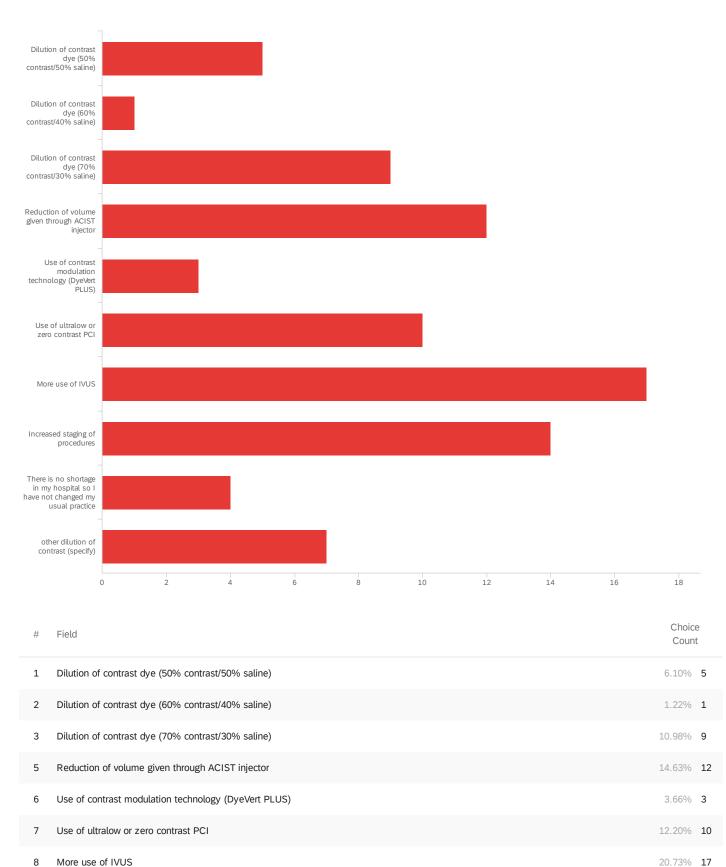
CO2 FOR PERIPHERSL

We have not diluted the contrast. just cautious on the amount of dye used.

Splitting contrast into smaller bottles so less residual waste

no ventriculograms

Decrease waste by getting rid of tubing which requires priming; instead we fill up a 30CC and hook it up directly to manifold



 9
 Increased staging of procedures
 17.07%
 14

 10
 There is no shortage in my hospital so I have not changed my usual practice
 4.88%
 4

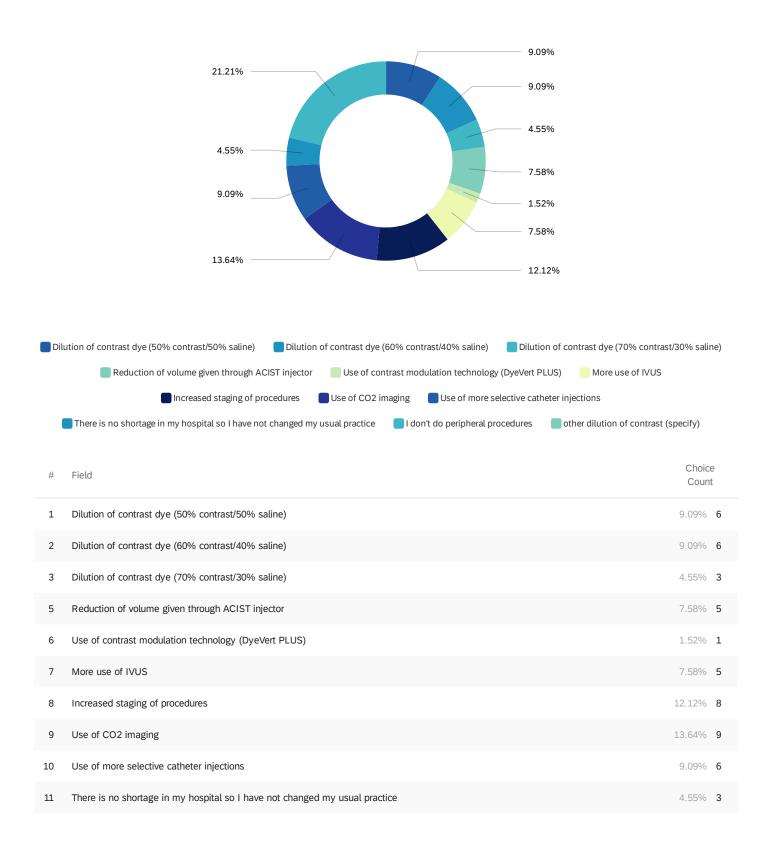
8.54% 7

11 other dilution of contrast (specify)

82

Q23 - For PERIPHERAL cases which of the following procedural techniques have you

used to reduce contrast use during the shortage? (select all that apply)



#	Field	Choice Count
12	I don't do peripheral procedures	21.21% 1 4
13	other dilution of contrast (specify)	0.00% 0
		66

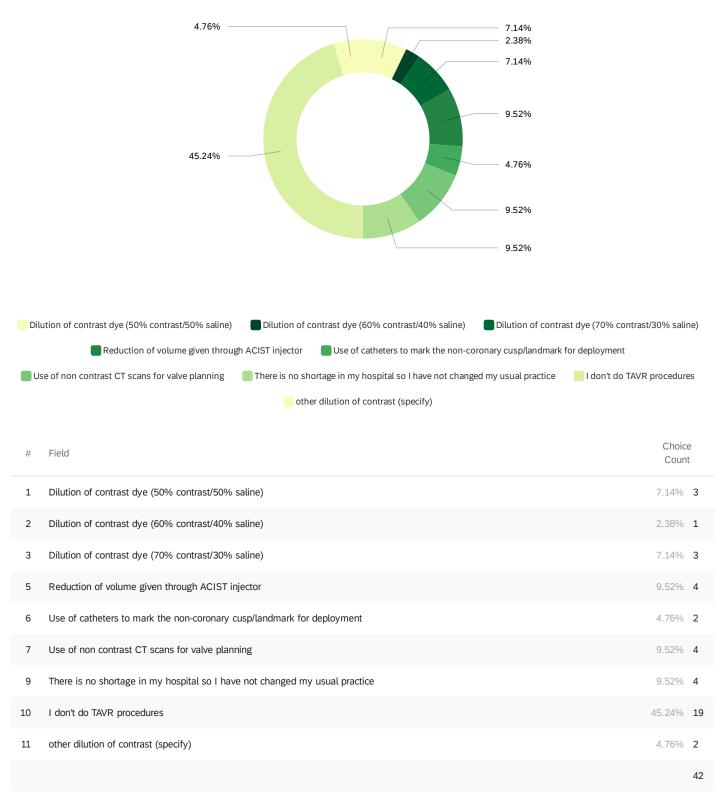
Showing rows 1 - 13 of 13

Q22_13_TEXT - other dilution of contrast (specify)

other dilution of contrast (specify)

Q24 - For TAVR cases which of the following procedural techniques have you used to

reduce contrast use during the shortage? (select all that apply)



Q23_11_TEXT - other dilution of contrast (specify)

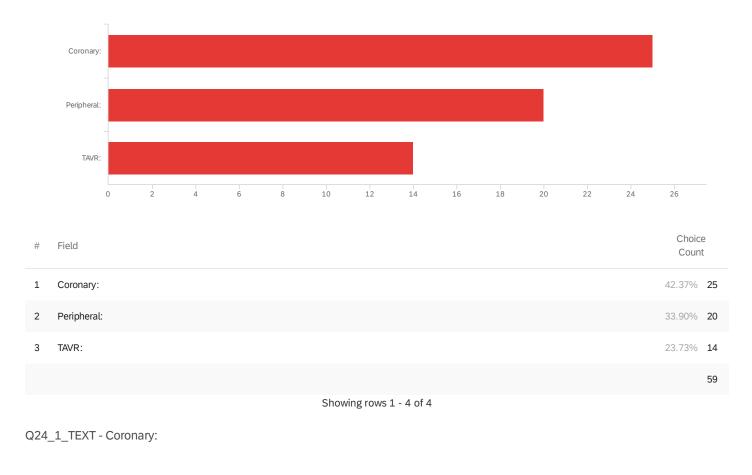
other dilution of contrast (specify)

No change

no change to TAVR

Q25 - What is the optimal contrast dilution (contrast%/saline%) for the following

applications when trying to saving contrast:



Coronary:	
70/20	
70%	
Don't know	
80	
70/30	
100% contrasr	
no dilution	
Na	
30	

Coronary:

70%/30%	
100/0	
50	
50/50	
50/50	
80/20	
80-20	
0	
70/30	
50/50	
25%	
90/10	
80/20	
70/30	
70/30	
20-20	

Q24_2_TEXT - Peripheral:

Peripheral:	
50/50	
50%	
Don't know	
70	
70:30	

Peripheral:

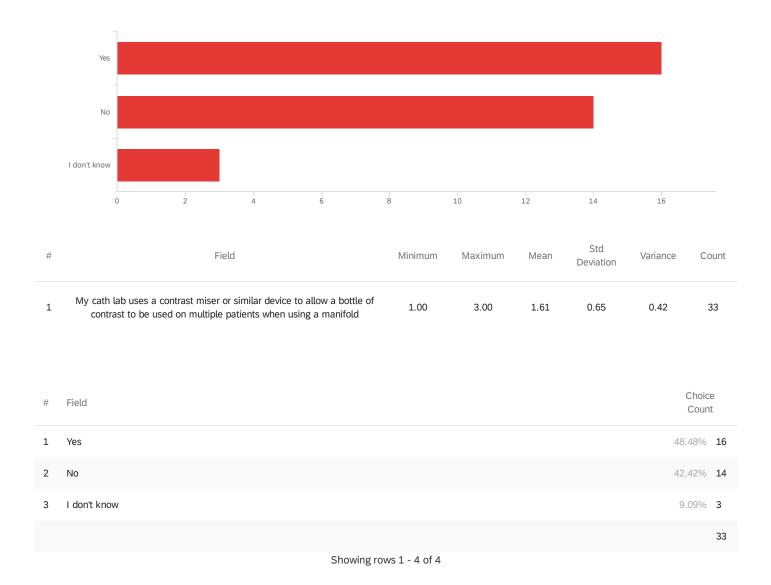
Na	
50	
30%/70%	
50/50	
70	
50/50	
50/50	
70-30	
0	
50/50	
60/40	
40/60	
50/50	
50/50	
10-10	
Q24_3_TEXT - TAVR:	
TAVR:	
80/20	
60%	
Don't know	
50/50	
Don't do	
Na	

TAVR:

80%/20%			
Na			
50/50			
70-30			
0			
50/50			
70/30			
20-20			

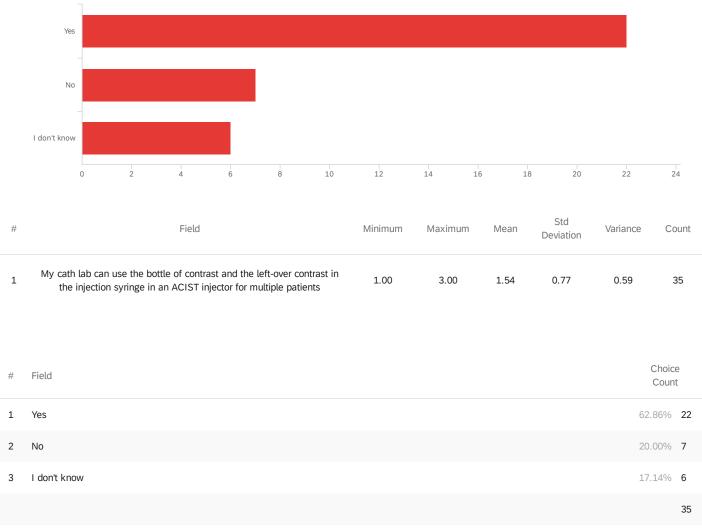
Q26 - My cath lab uses a contrast miser or similar device to allow a bottle of contrast to

be used on multiple patients when using a manifold



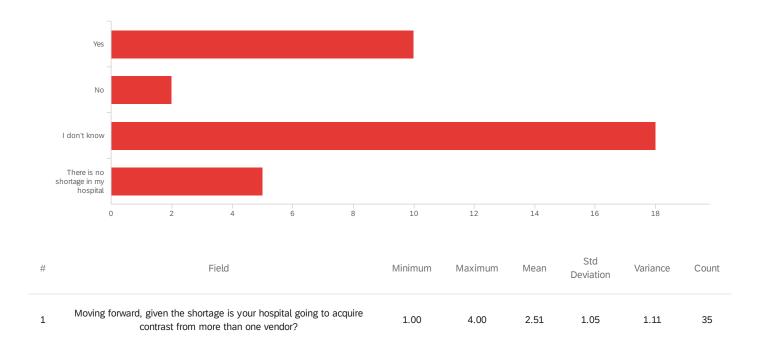
Q27 - My cath lab can use the bottle of contrast and the left-over contrast in the injection

syringe in an ACIST injector for multiple patients



Q28 - Moving forward, given the shortage is your hospital going to acquire contrast from





#	Field	Choice Count
1	Yes	28.57% 10
2	No	5.71% 2
3	I don't know	51.43% 18
4	There is no shortage in my hospital	14.29% 5
		35

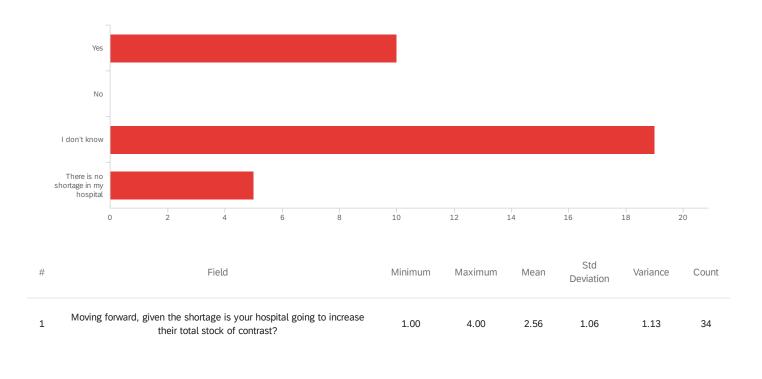
Q29 - Moving forward, do you anticipate having to defer or transfer out urgent/inpatients

(NSTEMI, heart failure, etc) due to the contrast shortage?



Q30 - Moving forward, given the shortage is your hospital going to increase their total





#	Field	Choice Count
1	Yes	29.41% 10
2	No	0.00% 0
3	I don't know	55.88% 19
4	There is no shortage in my hospital	14.71% 5
		34

Showing rows 1 - 5 of 5 $\,$

End of Report