1. Do you have experience of TRANSVENOUS LEAD EXTRACTION in pediatric patients?				
	Response Percent	Response Count		
Yes	27.0%	24		
No	73.0%	65		
	answered question	89		
	skipped question	6		





2. Do you have experience of Transvenous Lead Extraction in congenital heart disease patients?

	Response Percent	Response Count
Yes	41.6%	37
No	58.4%	52
	answered question	89
	skipped question	6





4. Number of PATIENTS treated with TLE at your centre in 2011

	Response Response Average Total	Response Count
- PM Patients (SSI/R - DDD/R) (except CRTP):	18.33 1,540	84
- ICD Patients (VR + DR) (except CRTD) :	16.39 1,360	83
- CRT Patients (P and D) :	7.93 634	80
	answered question	84
	skipped question	11





6. Number of Transvenously EXTRACTED LEADS at your centre in 2011 Response Response Percent Count - RA Pacing leads 96.3% 78 - RV Pacing leads 98.8% 80 - Coronary Sinus Pacing leads 92.6% 75 - ICD leads 96.3% 78 - Free floating leads 76.5% 62 answered question 81 skipped question





7. INDICATIONS for TRANSVENOUS LEAD EXTRACTION in your centre:

	Response Average	Response Total	Response Count
- Systemic infection in %	27.48	2,308	84
- Local infection in %	38.79	3,181	82
- Other indications (non infective) in %	31.40	2,606	83
	answere	ed question	88
	skippe	ed question	7





8. Do you try to explant ALL REDUNDANT leads with manual traction before abandonment in absence of infection?

	Response Percent	Response Count
No	21.6%	19
Yes, always	38.6%	34
Yes, but only if implanted for less than 1 year	33.0%	29
Yes, but only if implanted for less than 6 months	6.8%	6
	answered question	88
	skipped question	7





9. Do you routinely perform TEE in cases of SYSTEMIC INFECTION?

		sponse ercent	Response Count
No		3.4%	3
Yes		86.4%	76
Yes, in case of negative TT Echo		5.7%	5
Yes, in case of positive TT Echo		4.5%	4
	answered q	uestion	88
	skipped q	uestion	7





10. WHERE are TLE PROCEDURES most commonly performed in your centre?

- Cathlab with cardiosurgery standby but without a surgeon specifically identified - Hybrid room - Operating theatre with the patient prepared for sternotomy - Cathlab in a hospital without a cardiac surgery answered question			Response Count
standby but without a surgeon specifically identified - Hybrid room - Operating theatre with the patient prepared for sternotomy - Cathlab in a hospital without a cardiac surgery answered question	- Cathlab with surgeon identified	25.0%	22
- Operating theatre with the patient prepared for sternotomy - Cathlab in a hospital without a cardiac surgery 6.8% answered question	standby but without a surgeon	29.5%	26
- Cathlab in a hospital without a cardiac surgery 6.8% answered question	- Hybrid room	13.6%	12
cardiac surgery 6.8% answered question		25.0%	22
		6.8%	6
skipped question		answered question	88
		skipped question	7





11. WHO is most often the F	IRST OPERATOR in TLE in your centre?	
	Response Percent	Response Count
- Cardiologist	86.2%	75
- Cardiothoracic Surgeon	10.3%	9
- Other	3.4%	3
	Other (Explain)	4
	answered question	87
	skipped question	8





12. In your experience, which leads are EASIER to extract?

	YES	Possibly	No	Response Count
A) RA Active Fixation Leads easier than RA Passive fixation leads	77.0% (67)	19.5% (17)	3.4% (3)	87
B) RV Active Fixation Leads easier than RV Passive fixation leads	77.9% (67)	18.6% (16)	3.5% (3)	86
C) RA Leads easier than RV Leads	45.9% (39)	27.1% (23)	27.1% (23)	85
D) RV Leads easier than ICD Leads	59.3% (51)	22.1% (19)	18.6% (16)	86
E) LV Leads easier than other Leads	62.1% (54)	33.3% (29)	4.6% (4)	87
F) Infected Leads easier than Malfuctioning Leads	50.6% (44)	32.2% (28)	17.2% (15)	87
			answered question	87
			skipped question	8





13. In your experience, which Leads are HIGHER RISK to extract?

	Yes	Possibly	No	Response Count
A) RA Passive Fixation higher risk than RA Active Fixation	52.9% (46)	36.8% (32)	10.3% (9)	87
B) RV Passive Fixation higher risk than RV Active Fixation	50.6% (44)	40.2% (35)	9.2% (8)	87
C) RV Leads higher risk than RA Leads	32.2% (28)	20.7% (18)	47.1% (41)	87
D) ICD Leads higher risk than RV Leads	61.6% (53)	23.3% (20)	15.1% (13)	86
E) RV ICD Leads higher risk than LV Leads	68.6% (59)	19.8% (17)	11.6% (10)	86
F) Malfunctioning Leads higher risk than Infected Leads	42.4% (36)	37.6% (32)	20.0% (17)	85
			answered question	87
			skipped question	8





14. Which of the following ICD Lead characteristics do you think may FACILITATE EXTRACTION?

	Yes	Possibly	No	Response Count
- Single shock coil versus dual shock coil	81.6% (71)	12.6% (11)	5.7% (5)	87
- Gore around shock coil	51.7% (45)	42.5% (37)	5.7% (5)	87
- Active fixation as opposed to passive fixation	73.3% (63)	22.1% (19)	4.7% (4)	86
- Smaller diameter as opposed to bigger diameter (Fr)	29.9% (26)	43.7% (38)	26.4% (23)	87
			answered question	87
			skipped question	8





15. In your experience, what is the SUCCESS RATE (radiological) of Transvenous Lead Extraction?

	Response Percent	
Complete (Total) in %	100.0%	i 74
Partial (Less than 4 cms) in %	89.2%	6 66
Failure in %	91.9%	6 68
	answered question	n 74
	skipped question	n 21





16. In your experience, what is the incidence of following MAJOR COMPLICATIONS (Death, Cardiac or vascular avulsion or tears requiring surgical intervention or pericardiocentesis or chest tube, Pulmonary embolism requiring surgical intervention, Respiratory arrest or anesthesia related complications, Stroke, Pacing system related infection of a previously not infected site) in TLE Lead extraction procedure?

	Response Percent	Response Count
- Less than 1%	62.1%	54
- 1 - 2%	26.4%	23
- 2 - 5%	9.2%	8
- > 5%	2.3%	2
	answered question	87
	skipped question	8





17. In your experience, what is the MORTALITY rate of TLE (perioperative)?

	Response Percent	Response Count
- 0	54.0%	47
- Less than 0.5 %	33.3%	29
- 0.5 - 2 %	12.6%	11
->2%	0.0%	0
	answered question	87
	skipped question	8





18. Would you perform TRANSVENOUS LEAD EXTRACTION in endocarditis with VEGETATIONS on the Lead? If your answer is NO skip question 19.

	Response Percent	Response Count
Yes	82.8%	72
No	17.2%	15
	answered question	87
	skipped question	8





19. If Yes on question 18 would you perform a TLE if the VEGETATIONS diameter is at most

	Response Percent	Response Count
2 cm	48.6%	35
3 cm	34.7%	25
4 cm	15.3%	11
5 cm	6.9%	5
	answered question	72
	skipped question	23





20. What's your mean TIME BETWEEN extraction and new implantation of permanent device in a PM DEPENDENT patient?

	Before	No delay (Same procedure)	24 Hours	48 Hours	72 Hours	1 Week	2 Weeks	4 Weeks	Response Count
Systemic Infection	2.4% (2)	4.9% (4)	1.2% (1)	13.4% (11)	20.7% (17)	23.2% (19)	24.4% (20)	9.8% (8)	82
Local Infection	2.4% (2)	20.5% (17)	4.8% (4)	18.1% (15)	24.1% (20)	15.7% (13)	9.6% (8)	4.8% (4)	83
Non infected Leads	3.6% (3)	84.5% (71)	6.0% (5)	2.4% (2)	1.2% (1)	0.0% (0)	1.2% (1)	1.2% (1)	84
							answ	ered question	84
							skip	oped question	11





21. What's your mean TIME BETWEEN extraction and new permanent device implantation in a NON-PM DEPENDENT patient?

	No delay (Same Procedure)	24 Hours	48 Hours	72 Hours	1 Week	2 Weeks	3 Weeks	4 Weeks	Response Count
Systemic Infection	2.4% (2)	0.0% (0)	1.2% (1)	8.4% (7)	9.6% (8)	25.3% (21)	6.0% (5)	47.0% (39)	83
Local Infection	4.8% (4)	2.4% (2)	6.0% (5)	15.7% (13)	22.9% (19)	14.5% (12)	3.6% (3)	30.1% (25)	83
Non infected Leads	70.2% (59)	11.9% (10)	7.1% (6)	2.4% (2)	0.0% (0)	2.4% (2)	0.0% (0)	6.0% (5)	84
							ansv	vered question	84
							ski	pped question	11





22. In case of infection as the indication for TLE, do you implant a permanent new system in the same pocket / on the same side of the chest after complete removal?

	PM Dependent patient	Non PM Dependent patient	Response Count
Never	97.6% (80)	89.0% (73)	82
Sometimes	37.5% (3)	87.5% (7)	8
Always	100.0% (1)	100.0% (1)	1
		answered question	84
		skipped question	11





23. How do you TREAT PM DEPENDENT patients BEFORE REIMPLANTATION when the extraction was indicated by systemic infection?

	Response Percent	Response Count
- Temporary Lead + External PM as a bridge to a new system	60.7%	51
- Epicardial Permanent PM system	13.1%	11
New permanent Transvenous PM system at the time of extraction	1.2%	1
- Permanent Transvenous Lead + implantable PM outside the body as bridge to new system	23.8%	20
- Permanent Transvenous Lead + implantable PM as a bridge to new system	1.2%	1
	answered question	84
	skipped question	11





24. What is the percentage (%) of PM patients NOT REIMPLANTED at your centre? Response Response Percent Count - < or equal 5 %</p> 67.9% 57 - 6 to 15 % 20.2% 17 - 16 to 25 % 8,3% - > 25 % 3,6% answered question 84 skipped question 11





25. What is the percentage (%) of ICD patients NOT REIMPLANTED at your centre?

	Response Percent	Response Count
- 0	38.1%	32
- < or equal to 2 %	41.7%	35
- 3 to 10 %	17.9%	15
- > 10 %	2.4%	2
	answered question	84
	skipped question	11





26. How many of your extracted Leads are FINGER ELECTRODES or SUBCUTANEOUS ICD System ELECTRODES?

	Respons Percent	
Finger Electrodes	97.69	% 82
Subcutaneous ICD Electrodes	97.69	% 82
	answered questio	n 84
	skipped questio	n 11





27. What is the number of patients treated with SURGICAL extraction as first option in 2011?

	Response Average	Response Total	Response Count
Total Number of patients :	1.17	98	84
	answere	d question	84
	skippe	d question	11





28. Percentage of patients with indications for SURGICAL extraction as first option (Sum is 100%)

	Response Percent	Response Count
- Large Vegetations	89.3%	75
- Concomitant cardiac surgery	82.1%	69
- Old Leads	69.0%	58
- Others (Explain)	60.7%	51
	answered question	84
	skipped question	11





EP WIRE SEVENTH SURVEY - Defibrillation Testing at the Time of ICD implantation Results - Question 13





