

All hospitals in this trial will receive the intervention. The intervention is that we will train approximately 10 physicians providing initial trauma care in ATLS in your hospital. Who do you think we should train to maximise the effect?

(Surgical residents? Emergency medicine residents? Casualty medical officers? Someone else??)

The time point when the training will be implemented will be randomised, but there will be a minimum of three months between the start of the data collection and the training. The training will happen during a one month long "transition period". How long notice do you need to plan the participation of the physicians from your hospital?

Are you aware of any plans to train providers in any formalised trauma life support training programme during the next few years?

Are you aware of any plans to implement other interventions or changes that may radically change how you treat trauma patients at your site?

(For example building a trauma centre, building a new emergency department, shifting the CT)

If we would like to visit your hospital to observe trauma care delivery in the emergency department and talk to providers, how can that be arranged?

General

How are the patient medical records organised at your site?

- ☐ Hard-copy
☐ Electronic
☐ Not sure

Do you currently have any competing studies or are you committed to new competing studies?

Do you have access to a computer with high-speed internet access?

- ☐ Yes
☐ No

Do you currently have the necessary study team including research coordinator and co-investigators to conduct this study? Can you please elaborate on the composition and experience of that team?

What are your expectations of this trial?

Do you have any questions or comments regarding this trial?

Are you interested in participating in this trial?

- ☐ Yes
☐ No