

One-year follow up

Telephone questionnaire

Question 1: After the surgery on ... did you have another operation?	
	If yes: When? Where? Kind of Surgery?
	No

Question 2: After the surgery on ... were you admitted to intensive care unit?	
	If yes: When? Where? Why? How long?
	No

Question 3: After the surgery on ... were you admitted to hospital?	
	If yes: When? Where? Why? How long?
	No

Question 4: Have you been dialysed within the last year?	
	If yes: When? Where? How often?
	No

Question 5: Have you had a heart attack within the last year?	
	If yes: When? Where? Therapy?
	No

Question 6: Have you had a stroke within the last year?	
	If yes: When? Where? Therapy? Neurologic deficit?
	No

If patient died within the last year:	
Date of death:	
Cause of death:	
If death within a hospital: name of the hospital:	