



14 Participants: 5 Vascular Surgery Patients, 9 Caregivers, Sept 2023-March 2024

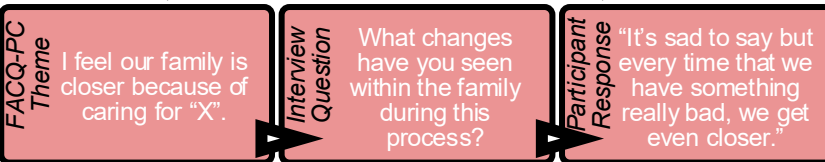
Methods

Quantitative: Patient self- and caregiver proxy-assessment pre- and postoperatively

NIH PROMIS Instruments Collected			
	Patient (Self)	Patient Proxy (Caregiver)	Caregiver
Mobility	X	X	
Cognitive Function	X	X	
Pain	X	X	
Psychosocial Impact	X	X	
Support	X	X	
Self Efficacy	X	X	
Caregiver Strain			X
Family Disruption			X

Qualitative: Patient and caregiver 30-minute interviews (pre- and postoperatively)

Interview Questions Derived from NIH FACQ-PC Framework



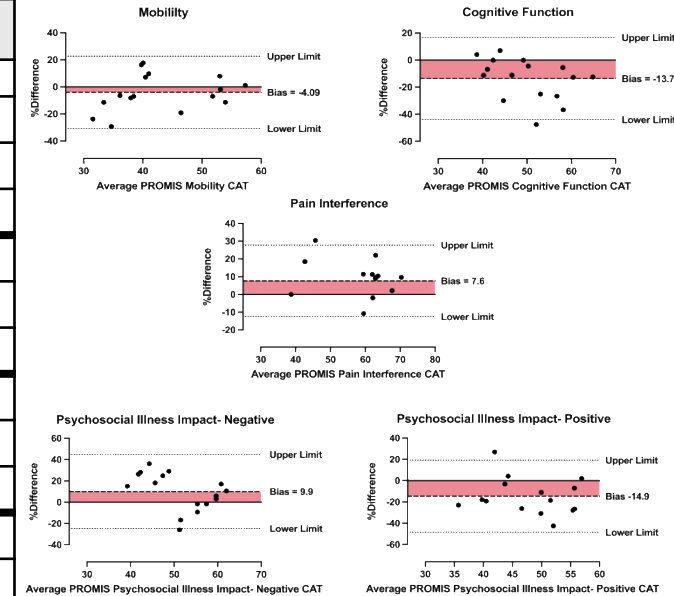
Emergent Themes from Qualitative Interviews



Results

PROMIS Patient Self-Assessment and Caregiver-Proxy Agreement

PROMIS	Time Collected	ICC	p-value
Mobility	Preoperatively	0.88	0.01
	Postoperatively	0.90	< 0.01
	Post-Preoperative Change Score	0.80	0.04
Cognitive Function	Preoperatively	0.842	0.02
	Postoperatively	0.475	0.15
	Post-Preoperative Change Score	0.342	0.29
Pain Interference	Preoperatively	0.915	0.02
	Postoperatively	0.918	<0.01
	Post-Preoperative Change Score	-0.48	0.68
Psychosocial Illness Impact- Negative	Preoperatively	0.765	0.03
	Postoperatively	0.446	0.18
	Post-Preoperative Change Score	0.774	0.04
Psychosocial Illness Impact- Positive	Preoperatively	0.761	0.08
	Postoperatively	0.223	0.32
	Post-Preoperative Change Score	0.367	0.34
Average Preoperative Agreement		0.84	
Average Postoperative Agreement		0.64	
Average Change Score Agreement		0.42	



Conclusions

Caregivers underestimate function compared to patient self-assessment. Preoperative function and observable characteristics like mobility and pain behavior have less bias.

Qualitative responses were mirrored PROMIS.