

# HOBIT Trial – Chamber and Subject Log (Rev. 7)

Date: \_\_\_\_\_

Institution: \_\_\_\_\_ Subject ID: \_\_\_\_\_ HOBIT Study Arm: \_\_\_\_\_

Treatment No. \_\_\_\_\_ of 10

Circle Type of Chamber: Multiplace / Monoplace

## HYPERBARIC VENT SETTINGS - BEFORE starting HBO treatment and while still on baseline FiO2

VT: \_\_\_\_\_ RR: \_\_\_\_\_ MV: \_\_\_\_\_ PEEP: \_\_\_\_\_ PIP: \_\_\_\_\_ Baseline FiO2: \_\_\_\_\_

**ABG** sampled on the above HBO ventilator settings: PH \_\_\_\_\_ PCO2 \_\_\_\_\_ PO2 \_\_\_\_\_ PF ratio \_\_\_\_\_

**Symbols:** **PIP** (Ventilator - Peak inspiratory pressure) **ICP** (Intracranial Pressure) **Brain O2** (Oxygen level of brain tissue in mmHg) **MAP** (Mean arterial pressure) **MV** (minute ventilation = Actual VT x RR) **Asterisk \*** (indicates "If available")

**NOTE:** Please record the actual real-time MV (i.e., exhaled VT x RR) at time of recording; during HBO.

## ↓ Record Hyperbaric Treatment Times Here ↓

Start Pressure	Time	Reach Pressure	Time	Leave Pressure	Time	End Pressure	Time	Total Treatment Time
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## ↓ Record Data Every 15 Minutes ↓

Clock Time	Brain O2*	MAP	ICP	CPP	Ventilator PIP	MV (real-time)	Comments

**ENDING TIME OF 100% FiO2:** After HBO: \_\_\_\_\_ (if applicable) After NBH: \_\_\_\_\_ (if applicable)

- ☐ ICP > 22 Comments: \_\_\_\_\_ ☐ EVD ☐ Other (specify): \_\_\_\_\_
- ☐ CPP < 60 Comments: \_\_\_\_\_
- ☐ MAP < 70 Comments: \_\_\_\_\_
- ☐ MAP > 125 Comments: \_\_\_\_\_

COMMENTS: \_\_\_\_\_

Completed by: \_\_\_\_\_ Title: \_\_\_\_\_

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Updated 12/4/2020

### Form Instructions:

1. NEWEST REVISION: Please only use the latest Revision of this form from the HOBIT Website Toolbox.
2. UPLOADING FORM: Only use this HOBIT form for recording the HOBIT treatment data and only upload this form to WebDCU. See exception in item # 3. Please upload as PDF.
3. ADDITIONAL COMMENTS: If additional space is needed for comments, please use a separate page and upload this to WebDCU along with the Chamber and Subject Log.
4. PERSON RECORDING: If possible have only one individual complete this form.
5. REAL-TIME DATA: It is important to accurately record treatment “dive” times and all required subject data in the actual clock time.
6. RECORDING PERIOD OF 100% FiO<sub>2</sub>: Please record when the 100% FiO<sub>2</sub> is switched back to the subject’s baseline FiO<sub>2</sub> in the lower gray box of the Chamber and Subject Log. This will either be **after the HBO treatment** or **after the 3-hour period of NBH**.
7. THE LOWER GRAY BOX: This gray box now includes check boxes for **ICP, CPP and MAP** parameters. These boxes should be checked when the indicated parameter is out of range. A space for comments is provided. Please record a brief comment as needed of the situation or the action taken.
8. SIGNING FORM: The person filling out the Chamber and Subject Log should record their name and title at the bottom of the form.