

Demographics and post-arrest severity

Please complete the survey below.

Thank you!

At your site, please abstract additional data from your enrollments. This data collection is covered under the existing ICECAP IRB approval (protocol at Advarra). Please alternate between your most recent and your earliest enrollments. (As an example if you have 8 enrollments, first abstract the 8th one, then 1, then 7, then 2, then 6, then 3, then 5, then 4.) While we would like participating sites to abstract all of their cases if possible, we do want to ensure you are sampling from near the beginning and near the end of the trial in the event you cannot get to all forms.

Please keep a local record (at your site) of the code given at the end. In the event we have questions about the response - this will allow us to let you re-edit the record.

Please review the CRF completion guidelines at this link.

Email of person completing this form (optional - but can help if issues identified)

Site ID

- Adventist Medical Center, Portland, OR
- Banner University Medical Center - Tucson Campus, Tucson, AZ
- Brigham and Women's Hospital, Boston, MA
- Cedars-Sinai Medical Center, Los Angeles, CA
- Cooper University Hospital, Camden, NJ
- Detroit Receiving Hospital, Detroit, MI
- Duke University Hospital, Durham, NC
- ECU Health Medical Center, Greenville, NC
- Froedtert Hospital, Milwaukee, WI
- Geisinger Medical Center, Danville, PA
- Grady Memorial Hospital, Atlanta, GA
- Guthrie Robert Packer Hospital, Sayre, PA
- Harbor-UCLA Medical Center, Torrance, CA
- Harborview Medical Center, Seattle, WA
- Hennepin County Medical Center, Minneapolis, MN
- Henry Ford Hospital, Detroit, MI
- Hospital of the University of Pennsylvania, Philadelphia, PA
- IU Health Methodist Hospital, Indianapolis, IN
- Johns Hopkins Hospital, Baltimore, MD
- Maine Medical Center, Portland, ME
- Massachusetts General Hospital, Boston, MA
- Memorial Hermann Texas Medical Center, Houston, TX
- MetroHealth Medical Center, Cleveland, OH
- Montefiore Medical Center, Bronx, NY
- Northwestern Memorial Hospital, Chicago, IL
- NYP Columbia University Medical Center, New York, NY
- NYU Langone Medical Center - Tisch Hospital, New York, NY
- OSU East Hospital, Columbus, OH
- OSU Wexner Medical Center, Columbus, OH
- Parkland Memorial Hospital, Dallas, TX
- Penn Presbyterian Medical Center, Philadelphia, PA
- Providence Regional Medical Center Everett, Everett, WA
- Ronald Reagan UCLA Medical Center, Los Angeles, CA
- San Francisco General Hospital, San Francisco, CA
- Sinai-Grace Hospital, Detroit, MI
- South Shore University Hospital, Bay Shore, NY
- Stanford University Medical Center, Stanford, CA
- Stony Brook University Hospital, Stony Brook, NY
- Strong Memorial Hospital, Rochester, NY
- SUNY Upstate Medical University, Syracuse, NY
- Temple University Hospital, Philadelphia, PA
- The Queen's Medical Center, Honolulu, HI
- UC Davis Medical Center, Sacramento, CA
- UCSD Medical Center - Hillcrest Hospital, San Diego, CA
- UF Health Shands Hospital, Gainesville, FL
- UH Cleveland Medical Center, Cleveland, OH
- University of Chicago Medical Center, Chicago, IL
- University of Cincinnati Medical Center, Cincinnati, OH
- University of Illinois Hospital, Chicago, IL
- University of Kansas Hospital, Kansas City, KS
- University of Kentucky Hospital, Lexington, KY
- University of Michigan University Hospital, Ann Arbor, MI
- University of Nebraska Medical Center, Omaha, NE
- University of New Mexico Hospital, Albuquerque, NM
- University of Utah Healthcare, Salt Lake City, UT
- UPMC Harrisburg, Harrisburg, PA
- UPMC Presbyterian Hospital, Pittsburgh, PA
- VCU Medical Center, Richmond, VA
- Wake Forest Baptist Medical Center, Winston-Salem, NC
- William Beaumont Hospital, Royal Oak, MI
- Yale New Haven Hospital, New Haven, CT

ICECAP Patient ID

Witnessed arrest?

- Yes
 No or unknown

For witnessed arrest, duration of CPR

- < 20 minutes
 ≥ 20 minutes
 unknown

Best Glasgow Coma Motor Score within 6 hours of ED arrival

- 1
 ≥ 2
 not documented within 6 hours

Full Outline of Unresponsiveness Brainstem Score (best within 6 hours of hospital arrival):

- absent pupil, corneal, and cough reflexes
 pupil and corneal reflexes absent
 pupil or corneal reflexes absent
 one pupil fixed and dilated
 pupil and corneal reflexes present
 not documented within 6 hours

Pittsburgh Cardiac Arrest Category (PCAC) Score within 6 hours of hospital arrival:

- follows commands
 unresponsive (FOUR 4-11) and ≤ 0.1 mcg/kg/min of norepinephrine or equivalent dose and PEEP 5 or less
 unresponsive (FOUR 4-11) and > 0.1 mcg/kg/min of norepinephrine or equivalent dose or PEEP > 5
 coma with brainstem areflexia: FOUR score < 4
 unable to calculate

SOFA Respiratory - worst within 6 hours of ED arrival

<https://www.mdcalc.com/calc/4062/horowitz-index-lung-function-p-f-ratio>

<https://www.mdcalc.com/calc/10570/spo2-fio2-ratio>

- PaO₂/FiO₂ > 400 or SpO₂/FiO₂ > 302
 PaO₂/FiO₂ 300-400 or SpO₂/FiO₂ 221-302
 PaO₂/FiO₂ 200-300 or SpO₂/FiO₂ 142-221
 PaO₂/FiO₂ < 200 or SpO₂/FiO₂ < 142

SOFA Cardiac (Worst value within 6 hours of hospital arrival): (doses are in mcg/kg/min)

- MAP ≥ 70 without vasopressor support
 MAP < 70 without vasopressor support
 Dopamine ≤ 5
 Dopamine > 5, Norepinephrine/Epinephrine ≤ 0.1, Phenylephrine ≤ 0.8
 Dopamine > 15, Norepinephrine/Epinephrine > 0.1, Phenylephrine > 0.8

First lactate following ROSC (mmol/L)

Date and time of first lactate following ROSC

Source of lactate

- arterial
 venous

First pH after ROSC

Date and time of first pH after ROSC

Source of pH

- arterial
- venous

Temperature Control Metrics

Please complete the survey below.

Thank you!

First temperature recorded following ED arrival

Date and time of first recorded temperature

Type of temperature recording for first recorded temperature

- Central (bladder, esophageal, rectal, intravascular)
 Non-central (axillary, oral, tympanic, temporal)

Date and time a temperature of 33C (± 0.5) was first achieved

Location where definitive temperature control device was initiated:

- Emergency department
 Catheterization lab
 Intensive care unit
 Unable to determine

Use of continuous sedation within 6 hours of ED arrival

- yes
 no
 unable to determine

Select all continuous infusions used for analgesedation within 6 hours of ED arrival

- Propofol
 Midazolam
 Fentanyl
 Dexmedetomidine
 Ketamine
 Other benzodiazepine infusion
 Other opiate infusion
 Unable to determine

Use of pharmacologic paralysis for temperature control induction (within 6 hours of ED arrival)

- yes
 no
 unable to determine

Select which neuromuscular blocking agent (NMB) was used for paralysis:

- Rocuronium
 Vecuronium
 Cisatracurium
 Pancuronium
 none of these

Cumulative dose of NMB agent in mg over 6 hours from ED arrival (skip if unable to determine)

Patient weight closest to admission (kg) (skip if unable to determine)

Patient height in cm (skip if unable to determine)

Drug overdose etiology

Please complete the survey below.

Thank you!

Was this patient classified as an overdose or poisoning from drugs of abuse (cocaine, fentanyl, benzodiazepine, etc.)?

- yes
 no

Was Narcan administered?

- Yes
 No

Where was Narcan administered?

- pre-hospital
 emergency department

Date and time of urine collection

From the first urine drug screen, select all that were positive:

- Amphetamines
 Barbiturates
 Benzodiazepines
 Cocaine
 Fentanyl
 Methadone
 Oxycodone
 PCP
 Tetrahydrocannabinol
 Nothing
 Other, not listed above

Select any of the below medications that were given prior to collection of urine sample:

- Benzodiazepine
 Fentanyl
 Propofol
 Dexmedetomidine
 None

Does your hospital have an addiction medicine consult team? (At this time of this enrollment)

- yes
 no

Was addiction medicine consulted during the hospitalization?

- yes
 no

Was suboxone or methadone initiated during the hospitalization

- yes
 no

Which medication was started?

- Suboxone
 Methadone

If the patient was discharged alive, was the patient discharged with any of these medications?

- Narcan
 Suboxone
 Methadone
 None

If patient was discharged alive, were they discharged to a substance use program?

- Yes
 No or N/A

What type of substance use program?

- Inpatient
 Outpatient