Additional File 1

Association between the timing of ICU admission and mortality in patients with hospitalonset sepsis: a nationwide prospective cohort study

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Figure S1. Distribution of the Propensity Score Before (left) and After (right) Matching

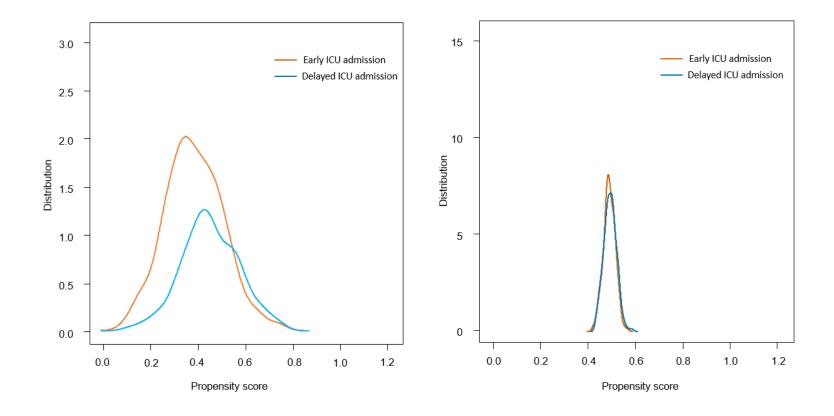


Figure S2. Time to ICU admission and In-hospital Mortality

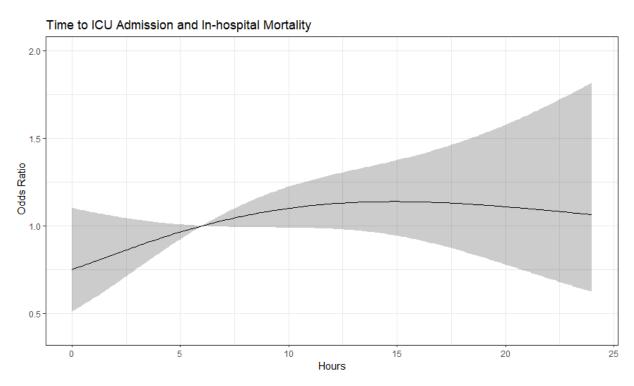


Figure S2. Restricted cubic spline plot of the association between the time to ICU admission and in-hospital mortality The plot was adjusted for age and initial sequential organ failure assessment (SOFA) scores. The shaded areas represent the 95% confidence intervals (CI).

Figure S3. Rapid Response System by Operating Hours

Rapid Response System by Operating Hours

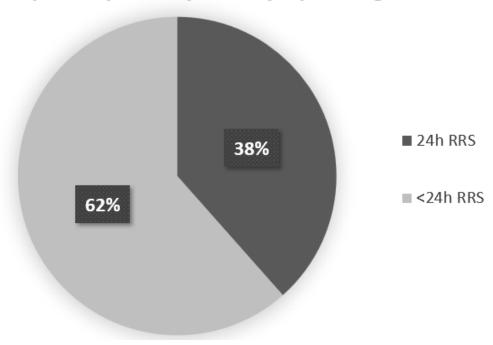


Figure S4. Initial Antibiotic Therapy at Each Hospital

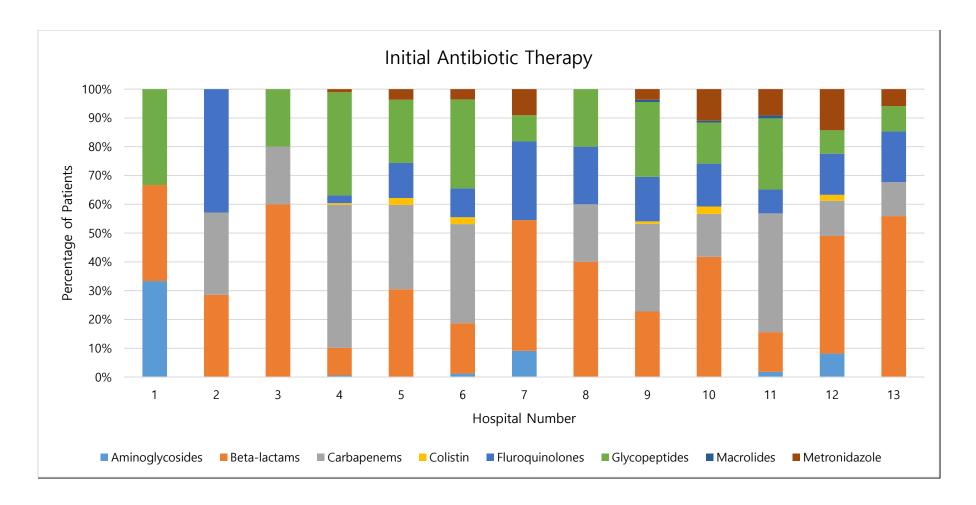


Figure S5. Source of Infection at Each Hospital

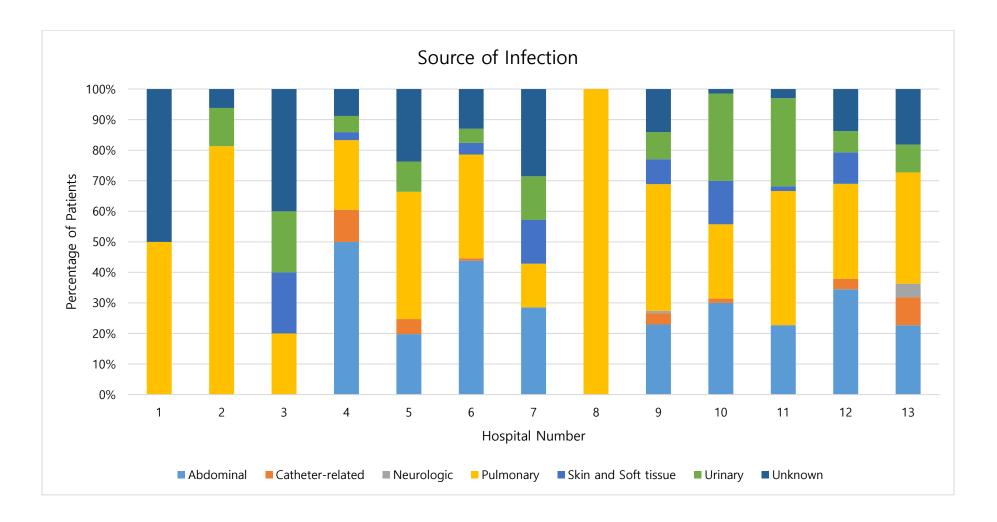


Table S1. Activation Criteria of Rapid Response System at Participating Hospitals

Center	Activation criteria
Korea University Anam Hospital	A. Screening criteria
Troise Still Story / trial it 1 loopital	- MEWS ≥ 2
	- Systolic blood pressure: <90 mmHg
	- Heart rate: <50, >140/min
	- Respiratory rate: <10, >30/min
Seoul National University Bundang Hospital	- Body temperature: <36°C, >39°C
Geodi National Oniversity Bundang Hospital	- SpO ₂ : <90%
	- ABG: pH <7.25, PaCO ₂ >50 mmHg, PaO ₂ <55 mmHg
	- Lactate >4 mmol/L
	- Total CO ₂ <15 mmol/L
	A. Calling criteria
	- Airway: compromised, stridor
	- Respiratory: respiratory rate ≥30, SpO ₂ <85% for 5 min, pH <7.3 and PaCO ₂ >50 mmHg, use of
	accessory respiratory muscles
Company Madical Contar	- Cardiovascular: systolic blood pressure <85 mmHg, heart rate >130, acute chest pain, symptomatic
Samsung Medical Center	arrhythmia
	- Neurologic: altered mental status of sudden onset, unexplained agitation, seizure
	- Others: subjective assessment of physician or nurse
	B. Screening criteria
	- MEWS ≥7
	A. Calling criteria
	- Respiratory: respiratory rate ≤ 8 or ≥28, SpO ₂ ≤ 90% for 5 minutes, sudden onset dyspnea
	- Cardiovascular: heart rate ≤ 40 or ≥130, systolic blood pressure ≤ 80 or ≥200, systolic blood
	pressure 80–90 mmHg with symptoms, chest pain unresponsive to sublingual nitroglycerin
	- Neurologic: sudden onset of altered consciousness, sudden paralysis, new onset seizure,
	prolonged agitation (≥10 minutes) not fully explained by medical conditions
Seoul National University Hospital	- Others: color change of peripheral extremities, subjective assessment of physician or nurse
	B. Screening criteria
	- Heart rate: <41, >129/min
	- Respiratory rate: <9, >27/min
	- Systolic blood pressure: <81, >199 mmHg
	- SpO ₂ : <90%
A 14 15 1 O 1	A. Calling criteria
Asan Medical Center	- Airway: compromised, stridor

	- Respiratory: respiratory rate <6 or >30/min, SpO₂ <90% on high flow FiO2 ≥40% or O₂ ≥6 L/min
	 Cardiovascular: heart rate <40 or >140/min, systolic blood pressure <90 mmHg
	- Neurologic: sudden change in mental status, seizure
	- Others: subjective assessment of attending physician or nurse
	B. Screening criteria
	- Systolic blood pressure <86 mmHg
	- Sudden change in mental status or unexplained agitation
	- Hypoxemia with oxygen requirement of >9 L/min or FiO ₂ > 35%
	- Respiratory rate >27 or <8/min
	- Heart rate >140 or <40
	- Unexplained severe metabolic acidosis: pH <7.3, lactate >2 mmol/L, total CO ₂ <12 mmol/L
	- PaCO ₂ > 50 mmHg or PaO ₂ ≤ 55 mmHg
	- Subjective assessment of attending physician or nurse
	A. Calling criteria
	- Airway: compromised, stridor, wheezing
	- Respiratory: respiratory rate ≤6 or ≥30/min, SpO ₂ <90% on O ₂ ≥6 L/min or high flow FiO2 ≥40%
	- Cardiovascular: heart rate < 40 or ≥140/min, systolic blood pressure < 90 mmHg
	- Neurologic: sudden change in mental status, seizure
	- Others: subjective assessment of attending physician or nurse
JIsan University Hospital	B. Screening criteria
, ,	- Airway: compromised, stridor, wheezing
	- Breathing: respiratory rate ≤6 or ≥30/min, SpO ₂ <90% on O ₂ ≥6 L/min or high flow FiO2 ≥40%
	- Cardiovascular: heart rate < 40 or ≥140/min, systolic blood pressure ≤ 85 mmHg
	- Neurologic: sudden change in mental status, seizure
	- Others: pH ≤7.33, HCO ₃ ≤15 mmol/L, lactate ≥2 mmol/L, potassium ≥6 mmol/L, total CO ₂ ≤15
	mmol/L, glucose ≤50 mg/dL, patients recently discharged from the ICU
	- Systolic blood pressure <80 mmHg, heart rate <40 or >140/min, respiratory rate ≤10 or ≥ 30/min.
Chonnam National University Hospital	SpO ₂ ≤85%
	- ABG: pH <7.3, pCO ₂ >50 mmHg, pO ₂ <60 mmHg
, '	- Sudden change in mental status
	- Symptomatic arrhythmia
In anhalis Nictional I Iniversity I Incested	A. Screening criteria
Jeonbuk National University Hospital	- NEWS ≥ 5

	A. Oalling of the factor
	A. Calling criteria
	- Airway: obstruction, stridor
	- Respiratory: respiratory rate <8 or >30/min, pH <7.3 and PaCO ₂ > 60 mmHg, SpO ₂ <90% on facial
	mask or high flow nasal cannula
Chungnam National University Hospital	- Cardiovascular: heart rate <40 or >140/min, systolic blood pressure <90 mmHg, lactate >2 mmol/L
	- Neurologic: sudden change in mental status, unexplained agitation, seizure
	- Subjective assessment of attending physician or nurse
	B. Screening criteria
	- based on NEWS
	A. Calling criteria
	- Airway: obstruction, stridor
	- Respiratory: respiratory rate <8 or >30/min, pH <7.3 and PaCO ₂ > 60 mmHg, SpO ₂ <90% on facial
	mask or high flow nasal cannula
Chungnam National University Sejong Hospital	- Cardiovascular: heart rate <40 or >140/min, systolic blood pressure <90 mmHg, lactate >2 mmol/L
Changham National Chivolotty Cojong Noophar	- Neurologic: sudden change in mental status, unexplained agitation, seizure
	- Subjective assessment of attending physician or nurse
	B. Screening criteria
	- based on NEWS
	A. Calling criteria
	- Airway: airway obstruction sign, stridor
	- Respiratory: respiratory rate <8 or >30/min, pH <7.3 and PaCO ₂ >60 mmHg, SpO ₂ <90% on facial
	mask or high flow nasal cannula
	- Cardiovascular: heart rate <40 or >140/min, systolic blood pressure <90 mmHg, lactate >2 mmol/L
Hannana Hairranit Orni Hannital	- Neurologic: sudden change in mental status, unexplained agitation, seizure
Hanyang University Guri Hospital	- Subjective assessment of attending physician or nurse
	B. Screening criteria
	- MEWS ≥4
	- Systolic blood pressure ≤80 or ≥200 mmHg, heart rate ≤40 or ≥130/min, respiratory rate <9 or
	≥30/min, SpO ₂ ≤90%
	- ABG: pH ≤7.3, pCO ₂ ≥50 mmHg, pO ₂ ≤60 mmHg, HCO ₃ ≤14 mmEq/L, lactate ≥4.0 mmol/L
	- Chemistry: potassium ≥6.0 mmol/L, total CO ₂ ≤14 mmol/L
	A. Calling criteria
	- Respiratory: respiratory rate <8 or ≥30/min, pH <7.3 and PaCO ₂ >60 mmHg, SpO ₂ <90% on facial
	mask
Daegu Catholic University Hospital	- Cardiovascular: heart rate <40 or ≥140/min, systolic blood pressure <80 mmHg
Daoga Gathone Offiversity Hospital	- Neurologic: sudden mental change, unexplained agitation for ≥10 minutes
	- Subjective assessment of attending physician or nurse
	B. Screening criteria
	- NEWS ≥ 5

Yeungnam University Medical Center	A. Screening criteria - NEWS ≥5 - Respiratory rate <10 or ≥30/min - Heart rate <40 or ≥140/min - Systolic blood pressure ≤80 mmHg - SpO ₂ ≤90%	
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ABG, Arterial blood gas analysis; FiO₂, fraction of inspired oxygen; MEWS, modified early warning score; NEWS, national early warning score; PaCO₂, partial pressure of carbon dioxide in arterial blood; PaO₂, partial pressure of oxygen in arterial blood; pCO₂, partial pressure of carbon dioxide; pO₂, partial pressure of oxygen; SpO₂, oxygen saturation

Table S2. In-hospital Mortality According to the Timing of ICU admission

Group	No. of deaths / Total no. of patients (%)	<i>P</i> -value	Unadjusted OR (95% CI)	Adjusted OR (95% CI) ^a
Unmatched cohort				
Early admission	181/470 (38.5)	0.44	4.44 (0.04.4.54)	4.20 (0.00 4.07)
Delayed admission	119/286 (41.6)	0.44	1.14 (0.84–1.54)	1.36 (0.99–1.87)
Propensity-score-matched cohort				
Early admission	83/239 (34.7)		1.35 (0.93–1.96)	
Delayed admission	100/239 (41.8)	0.13		1.38 (0.94–2.03)

OR, odds ratio; CI, confidence interval

^a In the unmatched cohort, odds ratios were adjusted for age and initial sequential organ failure assessment (SOFA) scores and center variables. In the propensity scorematched cohort, the odds ratios were adjusted for age, SOFA scores, center variables and propensity scores.

Table S3. Secondary Outcomes According to the Timing of ICU Admission

Outcome	Early admission (N = 470)	Delayed admission (N = 286)	<i>P</i> -value
Median hospital length of stay (IQR), days			
In-hospital survivors	27 (16–46)	26 (15–48)	0.93
In-hospital non-survivors	10 (2–29)	12 (4–24)	0.21
Median ICU length of stay (IQR), days			
ICU survivors	5 (3–11)	4 (2–9)	0.35
ICU non-survivors	4 (2–14)	5 (2–12)	0.30
Discharge, n/total (%) ^a			0.23
At home	211/289 (73.0)	113/167 (67.7)	
Transfer at another hospital	78/289 (27.0)	54/167 (32.3)	

ICU, intensive care unit; IQR, interquartile range

a Analysis was performed only in patients who survived until discharge

Table S4. Sepsis Bundle Compliance According to the Timing of ICU Admission

	Unmato	hed cohort		Propensity Sco	re-Matched Cohort	
Variable	Early admission	Delayed admission	•	Early admission	Delayed admission	•
	(N = 470)	(N = 286)	<i>P</i> -value	(N = 239)	(N = 239)	<i>P</i> -value
1-Hour Bundle Compliance						
Lactate measurement	273 (58.1)	134 (46.9)	0.003	142 (59.4)	121 (50.6)	0.066
Blood cultures	285 (60.6)	170 (59.4)	0.760	137 (57.3)	147 (61.5)	0.402
Administration of antibiotics ^a	172/368 (46.7)	104/248 (41.9)	0.248	85/185 (45.9)	85/208 (40.9)	0.359
Crystalloid infusion ^b	205/283 (72.4)	111/138 (80.4)	0.093	99/135 (73.3)	99/126 (78.6)	0.385
Vasopressor use ^c	167/279 (59.9)	64/134 (47.8)	0.026	78/135 (57.8)	62/122 (50.8)	0.316
3-Hour Bundle Compliance						
Lactate measurement	344 (73.2)	169 (59.1)	<0.001	179 (74.9)	153 (64.0)	0.013
Blood cultures	359 (76.4)	202 (70.6)	0.087	176 (73.6)	175 (73.2)	1.000
Administration of antibiotics ^a	260/368 (70.7)	160/248 (64.5)	0.113	130/185 (70.3)	135/208 (64.9)	0.282
Crystalloid infusion ^b	208/283 (73.5)	112/138 (81.2)	0.090	101/135 (74.8)	100/126 (79.4)	0.462
Vasopressor use ^c	219/279 (78.5)	85/134 (63.4)	0.002	102/135 (75.6)	78/122 (63.9)	0.056

^a Initiation of antibiotic therapy on patients who were not previously on antibiotics ^b Patients with either hypotension (mean blood pressure < 65 mmHg) or lactate ≥ 4 mmol/L ^c Patients with hypotension despite fluid resuscitation

Table S5. Time to ICU Admission by Rapid Response System Operating Hours

Outcome	24-Hour RRS (N = 446)	Part-time RRS ^a (N = 310)	<i>P</i> -value
Time to ICU Admission (IQR), hours	3.8 (1.6–9.5)	3.4 (1.1–10.4)	0.22
Timing of ICU Admission, n (%)			
Early Admission	274 (61.4%)	196 (63.2%)	0.67
Delayed Admission	172 (38.6%)	114 (36.8%)	

RRS, rapid response system; ICU, intensive care unit; IQR, interquartile range ^a RRS that operated <24 hours

Table S6. Initial Antibiotic Therapy and Source of Infection According to the Timing of ICU Admission

Variable	Early admission (N = 470)	Delayed admission (N = 286)	<i>P</i> -value
Initial Antibiotic Therapy			
Aminoglycoside	12 (2.6)	3 (1)	0.19
Beta-lactam	201 (42.8)	124 (43.4)	0.88
Carbapenem	280 (59.6)	175 (61.2)	0.70
Colistin	12 (2.6)	10 (3.5)	0.51
Fluroquinolone	106 (22.6)	59 (20.6)	0.59
Glycopeptide	240 (51.1)	126 (44.1)	0.07
Macrolide	1 (0.2)	3 (1)	0.16
Metronidazole	44 (9.4)	25 (8.7)	0.80
Source of Infection			
Abdominal	174 (37)	92 (32.2)	0.18
Catheter-related	14 (3)	12 (4.2)	0.41
Neurologic	0 (0)	2 (0.7)	0.14
Pulmonary	169 (36)	104 (36.4)	0.94
Skin and soft tissue	27 (5.7)	13 (4.5)	0.51
Urinary	50 (10.6)	32 (11.2)	0.81
Systemic infections with unknown focus	48 (10.2)	44 (15.4)	0.04

ICU, intensive care unit