

Supplemental File: Articles Included in the Delphi Process

Neurology/Emergency

Chitnis S, Mullane D, Brohan J, et al.: Dexmedetomidine Use in Intensive Care Unit Sedation and Postoperative Recovery in Elderly Patients Post-Cardiac Surgery (DIRECT). *J Cardiothorac Vasc Anesth* 2022; 36:880–892

Heybati K, Zhou F, Ali S, et al.: Outcomes of dexmedetomidine versus propofol sedation in critically ill adults requiring mechanical ventilation: a systematic review and meta-analysis of randomised controlled trials [Internet]. *British Journal of Anaesthesia* 2022; 129:515–526

Lewis K, Alshamsi F, Carayannopoulos KL, et al.: Dexmedetomidine vs other sedatives in critically ill mechanically ventilated adults: a systematic review and meta-analysis of randomized trials. *Intensive Care Med* 2022; 48:811–840

Matchett G, Gasanova I, Riccio CA, et al.: Etomidate versus ketamine for emergency endotracheal intubation: a randomized clinical trial. *Intensive Care Med* 2022; 48:78–91

Wibrow B, Martinez FE, Myers E, et al.: Prophylactic melatonin for delirium in intensive care (Pro-MEDIC): a randomized controlled trial. *Intensive Care Med* 2022; 48:414–425

Yan W, Li C, Song X, et al.: Prophylactic melatonin for delirium in critically ill patients: A systematic review and meta-analysis with trial sequential analysis. *Medicine* 2022; 101:e31411

Zhou Y, Yang J, Wang B, et al.: Sequential use of midazolam and dexmedetomidine for long-term sedation may reduce weaning time in selected critically ill, mechanically ventilated patients: a randomized controlled study. *Crit Care* 2022; 26:122

Cardiovascular

Heliste M, Pettilä V, Berger D, et al.: Beta-blocker treatment in the critically ill: a systematic review and meta-analysis. *Annals of Medicine* 2022; 54:1994–2010

Holmberg MJ, Granfeldt A, Mentzelopoulos SD, et al.: Vasopressin and glucocorticoids for in-hospital cardiac arrest: A systematic review and meta-analysis of individual participant data. *Resuscitation* 2022; 171:48–56

Inspiration-S Investigators. Atorvastatin versus placebo in patients with covid-19 in intensive care: randomized controlled trial. *BMJ* 2022; e068407

Yeo HJ, Lee YS, Kim TH, et al.: Vasopressor Initiation Within 1 Hour of Fluid Loading Is Associated With Increased Mortality in Septic Shock Patients: Analysis of National Registry Data. *Critical Care Medicine* 2022; 50:e351–e360

Gastroenterology/Fluids/Nutrition

Daou M, Dionne JC, Teng JFT, et al.: Prophylactic acid suppressants in patients with primary neurologic injury: A systematic review and meta-analysis of randomized controlled trials. *Journal of Critical Care* 2022; 71:154093

Deliwala SS, Hamid K, Goyal H, et al.: Proton Pump Inhibitors Versus Histamine-2-Receptor Antagonists for Stress Ulcer Prophylaxis in Critically Ill Patients: A Meta-analysis and Trial Sequential Analysis. *Journal of Clinical Gastroenterology* 2022; 56:204–217

Finfer S, Micallef S, Hammond N, et al.: Balanced Multielectrolyte Solution versus Saline in Critically Ill Adults. *N Engl J Med* 2022; 386:815–826

Flordelís Lasierra JL, Montejo González JC, López Delgado JC, et al.: Enteral nutrition in critically ill patients under vasoactive drug therapy: The NUTRIVAD study. *J Parenter Enteral Nutr* 2022; 46:1420–1430

Gonzales JP, Child D, Harrington T, et al.: Assessment and Impact of Intravenous Medication Fluid Administration in Critically Ill Patients With Acute Respiratory Failure. *Ann Pharmacother* 2022; 56:35–43

He N, Yan Y, Su S, et al.: Are Proton Pump Inhibitors More Effective Than Histamine-2-Receptor Antagonists for Stress Ulcer Prophylaxis in Critically Ill Patients? A Systematic Review and Meta-Analysis of Cohort Studies. *Ann Pharmacother* 2022; 56:988–997

Meyhoff TS, Hjortrup PB, Wetterslev J, et al.: Restriction of Intravenous Fluid in ICU Patients with Septic Shock. *N Engl J Med* 2022; 386:2459–2470

Pesonen E, Vlasov H, Suojaranta R, et al.: Effect of 4% Albumin Solution vs Ringer Acetate on Major Adverse Events in Patients Undergoing Cardiac Surgery With Cardiopulmonary Bypass: A Randomized Clinical Trial. *JAMA* 2022; 328:251

Russell DW, Casey JD, Gibbs KW, et al.: Effect of Fluid Bolus Administration on Cardiovascular Collapse Among Critically Ill Patients Undergoing Tracheal Intubation: A Randomized Clinical Trial. *JAMA* 2022; 328:270

Hematology

Abdoellakhan RA, Khorsand N, Ter Avest E, et al.: Fixed Versus Variable Dosing of Prothrombin Complex Concentrate for Bleeding Complications of Vitamin K Antagonists—The PROPER3 Randomized Clinical Trial. *Annals of Emergency Medicine* 2022; 79:20–30

Barrett CD, Moore HB, Moore EE, et al.: Study of Alteplase for Respiratory Failure in SARS-CoV-2 COVID-19. *Chest* 2022; 161:710–727

Bikdelli B, Talasaz AH, Rashidi F, et al.: Intermediate-Dose versus Standard-Dose Prophylactic Anticoagulation in Patients with COVID-19 Admitted to the Intensive Care Unit: 90-Day Results from the INSPIRATION Randomized Trial. *Thromb Haemost* 2022; 122:131–141

Fernando SM, Tran A, Cheng W, et al.: VTE Prophylaxis in Critically Ill Adults. *Chest* 2022; 161:418–428

REMAP-CAP Writing Committee for the REMAP-CAP Investigators, Florescu S, Stanciu D, et al.: Effect of Antiplatelet Therapy on Survival and Organ Support-Free Days in Critically Ill Patients With COVID-19: A Randomized Clinical Trial. *JAMA* 2022; 327:1247

Sadeghipour P, Talasaz AH, Barco S, et al.: Durable functional limitation in patients with coronavirus disease-2019 admitted to intensive care and the effect of intermediate-dose vs standard-dose anticoagulation on functional outcomes. *European Journal of Internal Medicine* 2022; 103:76–83

Infectious diseases/Immunomodulation

Bouglé A, Tuffet S, Federici L, et al.: Comparison of 8 versus 15 days of antibiotic therapy for *Pseudomonas aeruginosa* ventilator-associated pneumonia in adults: a randomized, controlled, open-label trial. *Intensive Care Med* 2022; 48:841–849

Ely EW, Ramanan AV, Kartman CE, et al.: Efficacy and safety of baricitinib plus standard of care for the treatment of critically ill hospitalised adults with COVID-19 on invasive mechanical ventilation or extracorporeal membrane oxygenation: an exploratory, randomised, placebo-controlled trial. *The Lancet Respiratory Medicine* 2022; 10:327–336

Hagel S, Bach F, Brenner T, et al.: Effect of therapeutic drug monitoring-based dose optimization of piperacillin/tazobactam on sepsis-related organ dysfunction in patients with sepsis: a randomized controlled trial. *Intensive Care Med* 2022; 48:311–321

Karakike E, Scicluna BP, Roumpoutsou M, et al.: Effect of intravenous clarithromycin in patients with sepsis, respiratory and multiple organ dysfunction syndrome: a randomized clinical trial. *Crit Care* 2022; 26:183

Mazeraud A, Jamme M, Mancusi RL, et al.: Intravenous immunoglobulins in patients with COVID-19-associated moderate-to-severe acute respiratory distress syndrome (ICAR): multicentre, double-blind, placebo-controlled, phase 3 trial. *The Lancet Respiratory Medicine* 2022; 10:158–166

Miano TA, Hennessy S, Yang W, et al.: Association of vancomycin plus piperacillin–tazobactam with early changes in creatinine versus cystatin C in critically ill adults: a prospective cohort study. *Intensive Care Med* 2022; 48:1144–1155

Endocrine/Metabolic

Bouadma L, Mekontso-Dessap A, Burdet C, et al.: High-Dose Dexamethasone and Oxygen Support Strategies in Intensive Care Unit Patients With Severe COVID-19 Acute Hypoxemic Respiratory Failure: The COVIDICUS Randomized Clinical Trial. *JAMA Intern Med* 2022; 182:906

Fujii T, Salanti G, Belletti A, et al.: Effect of adjunctive vitamin C, glucocorticoids, and vitamin B1 on longer-term mortality in adults with sepsis or septic shock: a systematic review and a component network meta-analysis. *Intensive Care Med* 2022; 48:16–24

Granholm A, Kjær M-BN, Munch MW, et al.: Long-term outcomes of dexamethasone 12 mg versus 6 mg in patients with COVID-19 and severe hypoxaemia. *Intensive Care Med* 2022; 48:580–589

Labro G, Tubach F, Belin L, et al.: Nicotine patches in patients on mechanical ventilation for severe COVID-19: a randomized, double-blind, placebo-controlled, multicentre trial. *Intensive Care Med* 2022; 48:876–887

Lamontagne F, Masse M-H, Menard J, et al.: Intravenous Vitamin C in Adults with Sepsis in the Intensive Care Unit. *N Engl J Med* 2022; 386:2387–2398

Lyu Q-Q, Zheng R-Q, Chen Q-H, et al.: Early administration of hydrocortisone, vitamin C, and thiamine in adult patients with septic shock: a randomized controlled clinical trial. *Crit Care* 2022; 26:295

Meduri GU, Shih M-C, Bridges L, et al.: Low-dose methylprednisolone treatment in critically ill patients with severe community-acquired pneumonia. *Intensive Care Med* 2022; 48:1009–1023

Menger J, Lee Z-Y, Notz Q, et al.: Administration of vitamin D and its metabolites in critically ill adult patients: an updated systematic review with meta-analysis of randomized controlled trials. *Crit Care* 2022; 26:268

Vallentin MF, Granfeldt A, Meilandt C, et al.: Effect of calcium vs. placebo on long-term outcomes in patients with out-of-hospital cardiac arrest. *Resuscitation* 2022; 179:21–24

Wacker DA, Burton SL, Berger JP, et al.: Evaluating Vitamin C in Septic Shock: A Randomized Controlled Trial of Vitamin C Monotherapy. *Critical Care Medicine* 2022; 50:e458–e467

Youssef JG, Lavin P, Schoenfeld DA, et al.: The Use of IV Vasoactive Intestinal Peptide (Aviptadil) in Patients With Critical COVID-19 Respiratory Failure: Results of a 60-Day Randomized Controlled Trial. *Critical Care Medicine* 2022; 50:1545–1554

Zayed Y, Alzghoul BN, Banifadel M, et al.: Vitamin C, Thiamine, and Hydrocortisone in the Treatment of Sepsis: A Meta-Analysis and Trial Sequential Analysis of Randomized Controlled Trials. *J Intensive Care Med* 2022; 37:327–336