Supplementary Online Content

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This supplementary material has been provided by the authors to give readers additional information about their work.

The University of Michigan Sedation Scale for Children		
UMSS ^a	Clinical Features	
0	Awake and alert	
1	Minimally sedated; tired/sleepy, appropriate response	
	to verbal conversation and/or sound	
2	Moderately sedated; somnolent/sleeping, easily	
	aroused with light tactile stimulation or a simple verbal	
	command	
3	Deeply sedated; deep sleep, arousable only with	
	significant physical stimulation	
4	Unarousable	
^a UMSS = Univer	sity of Michigan Sedation Scale	

eTable 1. University of Michigan Sec	lation Scale
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eTable 2. Highest Achieved UMSS Score

Highest Achieved UMSS Score					
		Highest UMSS			
Treatment	Number of Patients	0	1	2	
Ketamine	44	23 (52%)	17 (39%)	4 (9%)	
Fentanyl	42	32 (76%)	9 (21%)	1 (2%)	

Vital Signs			
Measures/Time	Ketamine (n=44)	Fentanyl (n=42)	
HR, mean (SD), bpm			
ТО	90.8 (15.2)	88.6 (14.8)	
T15	90.1 (12.8)	84.4 (14.1)	
T30	90.5 (12.8)	85.6 (13.5)	
T60	85.1 (12.4)	82.9 (12.9)	
RR, mean (SD), breaths/min			
ТО	22.1 (6.6)	23.0 (7.4)	
T15	23.1 (11.9)	22.3 (5.8)	
T30	23.3 (8.7)	19.9 (5.7)	
T60	21.8 (8.1)	19.7 (5.7)	
SBP, mean (SD), mm Hg			
ТО	126.5 (19.1)	128.9 (19.6)	
T15	127.3 (18.0)	127.9 (19.3)	
T30	126.3 (15.0)	123.4 (15.6)	
T60	122.3 (14.9)	122.0 (15.1)	
DBP, mean (SD), mm Hg			
ТО	78.9 (13.6)	73.5 (12.9)	
T15	76.1 (10.7)	73.4 (12.7)	
T30	76.3 (10.3)	73.6 (11.2)	
T60	70.8 (9.2)	70.6 (10.4)	
O ² sat, mean (SD), %			
ТО	99.8 (0.6)	99.6 (0.6)	
T15	99.6 (0.7)	99.2 (0.9)	
T30	99.5 (0.7)	99.4 (0.9)	
T60	99.3 (0.9)	99.3 (0.9)	
ETCO2, mean (SD), mm Hg			
ТО	36.6 (6.4)	38.0 (4.4)	
T15	36.6 (5.2)	38.3 (4.2)	
T30	38.6 (5.6)	40.4 (6.8)	
T60	38.7 (4.2)	38.9 (5.4)	

eTable 3. Vital Signs

eTable 4. Rescue Analgesia

Rescue Analgesia			
Rescue Analgesic	Ketamine (n=44)	Fentanyl (n=42)	
Ibuprofen	1	3	
Fentanyl	1	3	
Morphine	7	3	
Ketamine	1	0	
Toradol	1	0	
Total (n, %)	11, 25%	9, 21%	

eFigure 1. Weight-Based Dose Administration Reference

A Randomized Controlled Trial of Intranasal Sub-dissociative Dosing of Ketamine Compared to Intranasal

Fentanyl for Treatment of Pain Associated with Acute Extremity Injures in Children (PRIME - Pain Reduction with Intranasal Medications for Extremity injuries)

(PRIME - Pain Reduction with Intranasal Medications for Extremity

1) Determine corresponding volume to be administered (see table below)

2) MD orders PRIME study medication using Epic order set

- "ED-PRIME, Intranasal Ketamine/Fentanyl Study for Orthopedic Evaluation"
- Order volume to be administered that corresponds with dosing sheet in the envelope

**DO NOT ADMINISTER OR WASTE MEDICATION UNTIL CONSENT OBTAINED

3) RN attaches atomizer to syringe, primes the atomizer with drug solution and discards the rest of the study drug down the sink with a witness.

If a full 2 mL is to be administered, prime the atomizer with 0.1 mL drug solution (overfill of 0.1 mL is provided in the study drug syringe)

4) CRC documents syringe number and volume to be administered

- 5) RN administers medication
 - Administer intranasally via mucosal atomizer.
 - For doses greater than 0.5 mL, give 0.5 mL per nostril at a time up to 4 times. (Please DO NOT deviate from this administration protocol this is what was approved for the study.)

6) RN "wastes" appropriate amount in Pyxis (see table below)

7) RN documents administration in EPIC on MAR

Weight (kg)	Fentanyl OR Ketamine	Volume of Waste to Document in Pyxis
25 – 29	0.8 mL	1.2 mL
29.1 – 32	0.9 mL	1.1 mL
32.1 – 36	1 mL	1 mL
36.1 – 39	1.1 mL	0.9 mL
39.1 – 42	1.2 mL	0.8 mL
42.1 – 46	1.3 mL	0.7 mL
46.1 – 49	1.4 mL	0.6 mL
49.1 – 52	1.5 mL	0.5 mL
52.1 – 55	1.6 mL	0.4 mL
55.1 – 59	1.7 mL	0.3 mL
59.1 – 62	1.8 mL	0.2 mL
62.1 – 65	1.9 mL	0.1 mL
≥65.1	2 mL	N/A

Please circle the volume given on the table PRIME Study ID #

eFigure 2. Visual Analog Scale

Visual Analog Scale

