

1 WHIST - Changes to the original REC approved protocol

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3 All protocol versions can be found at

4 <https://www.journalslibrary.nihr.ac.uk/programmes/hta/1419914#/>.

5 See table for the summary of changes implemented with each protocol version.

6 **Table Protocol versions and summary of changes from the previous version**

Version and date	Summary of changes
V2 - 08 Feb 2016	<ul style="list-style-type: none">• None. This was the first version approved by IRAS and given to recruiting centres.
V3 – 13 Oct 2016	<ul style="list-style-type: none">• The collection of copies of routinely taken x-rays was no longer required.• The TARN Injury Severity Score classification range was changed to include all major trauma injuries as it had been noted that participants can have a major trauma or be TARN eligible with an ISS score below 9, therefore we participants were then stratified to an ISS score of ≤ 15 (rather than 9-15) or ≥ 16.
V4 – 21 Feb 2017	<ul style="list-style-type: none">• A clarification on the consent process via professional nominated consultee agreement was provided.• Changes in the process of handling personal data were made. Confidential data must be sent either by a secure email or by recorded delivery.• A nested study within WHIST was proposed with the aim to investigate the possible underlying molecular mechanisms used by NPWT if wound healing improvement and a reduced surgical site infection incidence was demonstrated.
V5 – 27 Jun 2017	<ul style="list-style-type: none">• Minor wording to the eligibility criteria was amended:<ol style="list-style-type: none">1) Participants had to present to the “trial hospital” within 72 hours and this was changed to had to present “to hospital”

within 72 hours as some participants were referred to the trial hospital from other Trauma Centres within 72 hours but were unable to be transferred for primary surgery until a bed became available.

- 2) Participants had to have “a major trauma as defined by eligibility for the UK Trauma Audit Research Network (TARN) database”. This was reworded to “have a major trauma injury and/or TARN eligible injury; as defined.....” as some specific high energy injuries, e.g. pilon and tibial plateau fractures, are always at risk but may not be included in TARN.
- A secondary objective was added. This was to quantify the long-term (five year) chronic neuropathic pain using the Douleur Neuropathique 4 Questionnaire (DN4).