

Triage

Care of the Critically Ill and Injured During Pandemics and Disasters: CHEST Consensus Statement

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e-Appendix 1.

Question #	PICO Question	Date Range Searched	Search Terms	Limits	Notes	Reviewers
1	P – Hospitals experiencing an overwhelming disaster with shortfalls in critical care resources despite all efforts to surge I – Clinician who is trained and dedicated as a triage officer conducting critical care triage C – usual bedside clinician involved in day-to-day care O – efficient allocation of critical care resources data: old literature, not directly critical care	1946 to October Week 3 2012	A) (disaster or mass casualty or pandemic) AND triage AND (critical care or critically ill, or intensive care) [N=207] B)(disaster or mass casualty or pandemic) AND triage AND (critical care or critically ill, or intensive care) AND hospital [N=115] C) (disaster or mass casualty or pandemic) AND triage AND (critical care or critically ill, or intensive care) AND studies* [N=57]	A)English B) English C) English	i) search for "triage officer" only revealed 14 articles none of which looked promising	1. 2.
2	P – Hospitals experiencing an overwhelming disaster with shortfalls in critical care resources despite all efforts to surge I – Triage team C – Individual triage officer O – efficient allocation of critical care resources data:some literature in trauma field & military	1946 to October Week 3 2012	same as PICO #1	same as PICO #1	i) search for "triage team" only revealed 12 articles none of which looked promising	1. 2.
3	P – Hospitals experiencing an overwhelming disaster with shortfalls in critical care resources despite all efforts to surge I – Senior experienced clinician as triage officer C – Junior clinician as triage officer O – efficient allocation of critical care resources data: some literature in trauma field & military	1946 to October Week 3 2012	same as PICO #1	same as PICO #1		1. 2.
4	P – patients requiring critical care in hospitals experiencing an overwhelming disaster with shortfalls in critical care resources despite all efforts to surge I – triage using of a decision support proforma (objective score plus clinical judgment) C – triage based upon clinician assessment only O – improved incremental survival in patients receiving resources, efficient resource allocation, additional process measures, minimize moral distress among care providers data: data but not specifically in this context	1946 to October Week 3 2012	A) (disaster or mass casualty or pandemic) AND (critical care or critically ill, or intensive care) AND (clinical protocol or practice guideline or score) [N=156] B) (disaster or mass casualty or pandemic) AND (critical care or critically ill, or intensive care) AND (clinical protocol or practice guideline or score) AND triage [N=43] C) (disaster or mass casualty or pandemic) AND (critical care or critically ill, or intensive care) AND (clinical protocol or practice guideline or score) AND studies* [N=82]	A) English B) English C) English		1. 2.
5	P – patients requiring critical care in hospitals experiencing an overwhelming disaster with shortfalls in critical care resources despite all efforts to surge I – triage based upon objective scoring system C – triage based upon clinician judgment alone O – improved incremental survival in patients receiving resources, efficient resource allocation, additional process measures, minimize moral distress among care providers data: data but not specifically in this context	1946 to October Week 3 2012	same as PICO #4	same as PICO #4		1. 2.
6	P – Hospitals experiencing an overwhelming disaster with shortfalls in critical care resources despite all efforts to surge I – triage C – first come first serve O – improved incremental survival in patients receiving resources, efficient resource allocation, additional process measures, minimize moral distress among care providers data: none	1946 to October Week 3 2012	same as PICO #4	same as PICO #4		1. 2.

7	<p>P – Health Care Systems experiencing an overwhelming disaster with shortfalls in critical care resources despite all efforts to surge</p> <p>I – Provision of appropriate oversight and due diligence to conducting triage</p> <p>C – Failure to provide oversight and due diligence</p> <p>O – Compliance with the proscribed process</p> <p>data: none</p>	1946 to October Week 3 2012	<p>A) (disaster or mass casualty or pandemic) AND (critical care or critically ill, or intensive care) AND (health care system or delivery of health care) AND (accountability or social responsibility or oversight or government regulation) AND triage [N=40]</p> <p>B) above AND studies* [N=2]</p>	<p>A) English</p> <p>B) English</p>		<p>1.</p> <p>2.</p>
8	<p>P – Health Care Systems experiencing an overwhelming disaster with shortfalls in critical care resources despite all efforts to surge</p> <p>I – Provision of process for appeals based upon deviation from the approved process, or clinician request but for an exception to the process</p> <p>C – No appeals process</p> <p>O – Compliance with the proscribed process</p> <p>data: none</p>	1946 to October Week 3 2012	<p>A) (disaster or mass casualty or pandemic) AND (critical care or critically ill, or intensive care) AND (health care system or delivery of health care) AND triage [N=55]</p> <p>B) (disaster or mass casualty or pandemic) AND (critical care or critically ill, or intensive care) AND (health care system or delivery of health care) AND triage AND appeal [N=0]</p> <p>C) (disaster or mass casualty or pandemic) AND (critical care or critically ill, or intensive care) AND triage AND appeal [N=0]</p>	english	note; when just searched triage & appeal only 3 findings none related to disasters	<p>1.</p> <p>2.</p>
9	<p>P – Health Care Systems experiencing an overwhelming disaster with shortfalls in critical care resources despite all efforts to surge</p> <p>I – Central process to up-date triage protocol/system as further information becomes available during and event is built into the process</p> <p>C – No system to modify the original triage process.</p> <p>O – Effective allocation of resources</p> <p>data: none</p>	1946 to October Week 3 2012	<p>A) (disaster or mass casualty or pandemic) AND (critical care or critically ill, or intensive care) AND (health care system or delivery of health care) AND triage [N=55]</p> <p>B) (disaster or mass casualty or pandemic) AND (critical care or critically ill, or intensive care) AND (health care system or delivery of health care) AND triage AND (quality improvement or quality assurance) [N=6]</p>	english	note: 9A = 8A	<p>1.</p> <p>2.</p>
10	<p>P – Health Care Systems experiencing an overwhelming disaster with shortfalls in critical care resources despite all efforts to surge</p> <p>I – presence of a formal legal and systematic structure for triage prior disaster</p> <p>C – no pre-defined laws or structure prior to the disaster</p> <p>O – effective implementation of triage</p> <p>data: none</p>	1946 to October Week 3 2012	<p>A) (disaster or mass casualty or pandemic) AND (critical care or critically ill, or intensive care) AND triage AND (Jurisprudence or legislation) [N=3]</p>			<p>1.</p> <p>2.</p>
11	<p>P:- Health Care Systems experiencing an overwhelming disaster with shortfalls in critical care resources despite all efforts to surge</p> <p>I – resources allocated to critical care services</p> <p>C – resources allocated to palliative care</p> <p>O – quality/humane patient care</p> <p>data: none</p>	1946 to October Week 3 2012	<p>A) (disaster or mass casualty or pandemic) AND (critical care or critically ill, or intensive care) AND palliative care AND studies* [N=1]</p>	none	Note: the one study found was related to treatment options for colon cancer, included because 'disasters' explodes to include 'emergencis'	<p>1.</p> <p>2.</p>
12	<p>P – Health Care Systems experiencing an overwhelming disaster with shortfalls in critical care resources despite all efforts to surge</p> <p>I – resources allocated to critical care services</p> <p>C – resources allocated to non-critical care services</p> <p>O – hospital survival and LOS, effective resource use, provider and public acceptance</p> <p>data: none</p>	1946 to October Week 3 2012	<p>A) (disaster or mass casualty or pandemic) AND (critical care or critically ill, or intensive care) AND studies* [N=514]</p>	english	Note: there doesn't seem to be a MeSH term to capture non-critical care (eg acute care, ward care, etc) so we are left with a pretty broad lit search. Most will likely be weeded out just by going through the titles.	<p>1.</p> <p>2.</p>

13	P – Health Care Systems experiencing an overwhelming disaster with shortfalls in critical care resources despite all efforts to surge I – leveraging technology such as baseline ultra-sound, SpO2, mobile phone/internet, telemedicine, etc in triage where appropriate and available C – clinical assessment O – improved incremental survival in patients receiving resources, efficient resource allocation	1946 to October Week 3 2012	A) (disaster or mass casualty or pandemic) AND (critical care or critically ill, or intensive care) AND (technology or biomedical technology or remote sensing technology or wireless technology or telemedicine) AND triage [N=1]	none		1. 2.
14	Need for public engagement input in some manner	1946 to October Week 3 2012	A) (disaster or mass casualty or pandemic) AND (critical care or critically ill, or intensive care) AND triage AND (Public Opinion/ or exp Consumer Participation/ or exp Policy Making/ or public engagement.mp. or exp Social Values) [N=3]	none		1. 2.
15	Exclusion criteria	1946 to October Week 3 2012	A) (disaster or mass casualty or pandemic) AND triage AND (critical care or critically ill, or intensive care) AND studies* [N=57] B) (disaster or mass casualty or pandemic) AND triage AND (critical care or critically ill, or intensive care) AND (exp Patient Selection/ or exclusion criteria.mp.) [N=6]	A) english B) none		1. 2.
16	Inclusion criteria	1946 to October Week 3 2012	A) (disaster or mass casualty or pandemic) AND triage AND (critical care or critically ill, or intensive care) AND studies* [N=57] B) B) (disaster or mass casualty or pandemic) AND triage AND (critical care or critically ill, or intensive care) AND (exp Patient Selection/ or inclusion criteria.mp.) [N=6]	A) english B) none	Note: 16A = 15A	1. 2.
17	Time Trials	1946 to October Week 3 2012	(disaster or mass casualty or pandemic) AND triage AND (critical care or critically ill, or intensive care) AND ('time trial' or 'trial of care' or 'therapeutic trial') [N=0]			1. 2.

*studies = exp Intervention Studies/ or exp Validation Studies/ or exp Cross-Sectional Studies/ or exp Cross-Over Studies/ or exp Longitudinal Studies/ or exp Organizational Case Studies/ or exp Prospective Studies/ or exp Follow-Up Studies/ or exp Cohort Studies/ or exp Epidemiologic Studies/ or exp Case-Control Studies/ or exp Multicenter Studies as Topic/ or exp Retrospective Studies/ or exp Evaluation Studies/