

STOP-COVID: Study of the Treatment and Outcomes in critically ill Patients with COVID-19

Codebook ▾

Data Dictionary Codebook

08/18/2020 3:31 pm

[^ Collapse all instruments](#)

#	Variable / Field Name	Field Label <i>Field Note</i>	Field Attributes (Field Type, Validation, Choices, Calculations, etc.)				
Instrument: Confirmation of eligibility (confirmation_of_eligibility) ^ Collapse							
1	study_id	Study ID	text				
2	instructions	Section Header: <i>The questions in this instrument will confirm whether the patient is eligible</i> Once all questions have been answered in an instrument, change the status from "incomplete" to "complete". Supplemental instructions, FAQ, and tips can be downloaded here. Please read this document carefully before you begin entering data. Note, the FAQ section of this document will be updated every 1-2 days.	descriptive				
3	lab_converter	Lab value converter can be downloaded here (to convert the units for CRP, D-Dimer, and lactate, if needed)	descriptive				
4	adult	Adult aged 18 or older?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No
1	Yes						
0	No						
5	not_adult Show the field ONLY if: [adult] = '0'	STOP, THIS PATIENT IS NOT ELIGIBLE	descriptive				
6	covid_confirm Show the field ONLY if: [adult] = '1'	Laboratory-confirmed diagnosis of COVID-19?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No
1	Yes						
0	No						
7	not_covid Show the field ONLY if: [covid_confirm] = '0'	STOP, THIS PATIENT IS NOT ELIGIBLE	descriptive				
8	date_covidtest Show the field ONLY if: [covid_confirm] = '1'	Date the positive COVID-19 test was obtained-Refers to the date the patient was tested, not the date the result came back-If multiple tests were sent, provide the date of the initial positive test, even if it was obtained at an outside facility-Ok to use an estimate if exact date unavailable	text (date_mdy), Required				
9	hosp_icu_covid Show the field ONLY if: [covid_confirm] = '1'	Hospitalized in the ICU for illness related to COVID-19? Do not include patients admitted to the ICU for reasons unrelated to COVID-19 who later tested positive on "routine surveillance" only and never showed signs or symptoms consistent with COVID-19. Patients in non-ICU rooms that have been "converted" into ICU rooms for surge capacity are eligible under any of the following conditions: a) being treated by an ICU team b) receiving invasive mechanical ventilation or ECMO c) receiving continuous renal replacement therapy (e.g., CVVH) d) receiving vasopressors/inotropes or mechanical cardiac support (e.g., LVAD) in a room where this would traditionally not be permitted	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No
1	Yes						
0	No						
10	not_hosp Show the field ONLY if: [hosp_icu_covid] = '0'	STOP, THIS PATIENT IS NOT ELIGIBLE	descriptive				

11	eligible_yes Show the field ONLY if: [hosp_icu_covid] = '1'	THIS PATIENT IS ELIGIBLE, PROCEED WITH DATA ENTRY	descriptive						
12	notes_eligibility	Additional Notes (if any)	notes						
13	confirmation_of_eligibility_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete
0	Incomplete								
1	Unverified								
2	Complete								

Instrument: **Institutional Data** (institutional_data)

[^ Collapse](#)

14	data_enterer	Enter your name The name of the person entering data, not the name of the patient	text, Required						
15	enterer_email	Enter your email address	text, Required						
16	hospital_type	Was the patient admitted to the main hospital within your medical center, or to a satellite/affiliate of the main hospital? If admitted to one hospital and then transferred to another, please review the answer to Question 7 in the FAQ section of the REDCap instructions document	radio, Required <table border="1"> <tr><td>1</td><td>Main Hospital</td></tr> <tr><td>2</td><td>Satellite/affiliate</td></tr> </table>	1	Main Hospital	2	Satellite/affiliate		
1	Main Hospital								
2	Satellite/affiliate								
17	main_name Show the field ONLY if: [hospital_type] = '1'	Enter name of the main hospital	text, Required						
18	affiliate_name Show the field ONLY if: [hospital_type] = '2'	Enter name of satellite/affiliate	text, Required						
19	number_beds	How many regular adult ICU beds does this hospital have? Do not include surge capacity beds-If the patient was admitted to a satellite/affiliate hospital, only enter the #ICU beds at that specific site	text (integer, Min: 1, Max: 500), Required						
20	state	Indicate the state (2-letter abbreviation) in which the hospital is located	text (alpha_only), Required						
21	notes_institute	Additional Notes (if any)	notes						
22	institutional_data_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete
0	Incomplete								
1	Unverified								
2	Complete								

Instrument: **Demographics, Symptoms, Comorbidities, Home Medications** (demographics_symptoms_comorbidities_home_medication)

[^ Collapse](#)

23	age	Age (in years)	text (number, Min: 18, Max: 115), Required						
24	male	Gender	radio, Required <table border="1"> <tr><td>1</td><td>Male</td></tr> <tr><td>2</td><td>Female</td></tr> </table>	1	Male	2	Female		
1	Male								
2	Female								
25	ethnicity	Ethnicity	radio, Required <table border="1"> <tr><td>0</td><td>Hispanic or Latino</td></tr> <tr><td>1</td><td>Not Hispanic or Latino</td></tr> <tr><td>2</td><td>Unknown / Not Reported</td></tr> </table>	0	Hispanic or Latino	1	Not Hispanic or Latino	2	Unknown / Not Reported
0	Hispanic or Latino								
1	Not Hispanic or Latino								
2	Unknown / Not Reported								

26	race	RaceDo not select, "Unknown / Not Reported" unless this information is truly unavailable	radio, Required <table border="1"> <tr><td>1</td><td>White</td></tr> <tr><td>2</td><td>Black or African American</td></tr> <tr><td>3</td><td>Asian</td></tr> <tr><td>4</td><td>American Indian/Alaska Native</td></tr> <tr><td>5</td><td>Native Hawaiian or Other Pacific Islander</td></tr> <tr><td>6</td><td>More Than One Race</td></tr> <tr><td>7</td><td>Unknown / Not Reported</td></tr> </table>	1	White	2	Black or African American	3	Asian	4	American Indian/Alaska Native	5	Native Hawaiian or Other Pacific Islander	6	More Than One Race	7	Unknown / Not Reported
1	White																
2	Black or African American																
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4	American Indian/Alaska Native																
5	Native Hawaiian or Other Pacific Islander																
6	More Than One Race																
7	Unknown / Not Reported																
27	pregnant Show the field ONLY if: [male] = '2'	Pregnant at the time of ICU admission?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No										
1	Yes																
0	No																
28	weeks_preg Show the field ONLY if: [pregnant] = '1'	How many weeks pregnant on ICU admission? <i>Round up or down to the nearest integer value</i>	text (integer, Min: 0, Max: 42), Required														
29	due_date Show the field ONLY if: [pregnant] = '1'	Enter the patient's estimated date of confinementAlso known as the patient's "due" date	text (date_mdy), Required														
30	delivery Show the field ONLY if: [pregnant] = '1'	Delivery during the critical illness hospitalization?If termination of pregnancy, select "yes"	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No										
1	Yes																
0	No																
31	mode_delivery Show the field ONLY if: [delivery] = '1'	Mode of delivery	radio, Required <table border="1"> <tr><td>1</td><td>Vaginal</td></tr> <tr><td>2</td><td>Cesarean (c-section)</td></tr> <tr><td>3</td><td>Vacuum-assisted</td></tr> <tr><td>4</td><td>Forceps-assisted</td></tr> <tr><td>5</td><td>Termination of pregnancy</td></tr> </table>	1	Vaginal	2	Cesarean (c-section)	3	Vacuum-assisted	4	Forceps-assisted	5	Termination of pregnancy				
1	Vaginal																
2	Cesarean (c-section)																
3	Vacuum-assisted																
4	Forceps-assisted																
5	Termination of pregnancy																
32	fetus_alive Show the field ONLY if: [mode_delivery] = '1' or [mode_delivery] = '2' or [mode_delivery] = '3' or [mode_delivery] = '4'	Fetus alive at delivery?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No										
1	Yes																
0	No																
33	date_delivery Show the field ONLY if: [delivery] = '1'	Date of delivery	text (date_mdy), Required														
34	indication_delivery Show the field ONLY if: [delivery] = '1'	Indication for delivery	radio, Required <table border="1"> <tr><td>1</td><td>Spontaneous labor</td></tr> <tr><td>2</td><td>Spontaneous rupture of membranes</td></tr> <tr><td>3</td><td>Nonreassuring fetal status (e.g., changes in fetal heart rate tracing)</td></tr> <tr><td>4</td><td>Preeclampsia or gestational hypertension</td></tr> <tr><td>5</td><td>Fetal growth restriction</td></tr> <tr><td>6</td><td>Stillbirth</td></tr> <tr><td>7</td><td>Other indication</td></tr> </table>	1	Spontaneous labor	2	Spontaneous rupture of membranes	3	Nonreassuring fetal status (e.g., changes in fetal heart rate tracing)	4	Preeclampsia or gestational hypertension	5	Fetal growth restriction	6	Stillbirth	7	Other indication
1	Spontaneous labor																
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4	Preeclampsia or gestational hypertension																
5	Fetal growth restriction																
6	Stillbirth																
7	Other indication																
35	other_delivery Show the field ONLY if: [indication_delivery] = '7'	Enter the other indication for delivery	text, Required														

36	<p>indication_c_section</p> <p>Show the field ONLY if: [mode_delivery] = '2'</p>	<p>Indication for cesarean (c-section) delivery</p>	<p>radio, Required</p> <table border="1"> <tr><td>1</td><td>Failure to progress in labor</td></tr> <tr><td>2</td><td>Nonreassuring fetal heart rate tracing</td></tr> <tr><td>3</td><td>Breech presentation</td></tr> <tr><td>4</td><td>Prior cesarean delivery or uterine surgery</td></tr> <tr><td>5</td><td>Placenta previa</td></tr> <tr><td>6</td><td>Elective in the setting of critical illness</td></tr> <tr><td>7</td><td>Other</td></tr> </table>	1	Failure to progress in labor	2	Nonreassuring fetal heart rate tracing	3	Breech presentation	4	Prior cesarean delivery or uterine surgery	5	Placenta previa	6	Elective in the setting of critical illness	7	Other																															
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5	Placenta previa																																															
6	Elective in the setting of critical illness																																															
7	Other																																															
37	<p>fetus_outcome</p> <p>Show the field ONLY if: [pregnant] = '1'</p>	<p>Enter the outcome of the fetus by the end of the hospitalization (e.g., "both the mother and fetus survived the hospitalization", or "fetus terminated at week XXX due to XXX", etc.)</p>	<p>notes, Required</p>																																													
38	<p>source_admit</p>	<p>Source of admission to the ICU</p>	<p>radio, Required</p> <table border="1"> <tr><td>1</td><td>Emergency department</td></tr> <tr><td>2</td><td>Hospital ward</td></tr> <tr><td>3</td><td>Transfer from another hospital</td></tr> <tr><td>4</td><td>Other</td></tr> </table>	1	Emergency department	2	Hospital ward	3	Transfer from another hospital	4	Other																																					
1	Emergency department																																															
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3	Transfer from another hospital																																															
4	Other																																															
39	<p>infection_setting</p>	<p>Suspected setting in which COVID-19 infection occurred*Healthcare worker is defined as a doctor, nurse, technician, or other medical professional who provides direct care to patients (do not include ancillary staff such as clerks, pharmacists, or kitchen/cleaning staff)</p>	<p>radio, Required</p> <table border="1"> <tr><td>1</td><td>Community-acquired</td></tr> <tr><td>2</td><td>Nosocomial</td></tr> <tr><td>3</td><td>Occupational (healthcare worker)*</td></tr> <tr><td>4</td><td>Unknown</td></tr> </table>	1	Community-acquired	2	Nosocomial	3	Occupational (healthcare worker)*	4	Unknown																																					
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3	Occupational (healthcare worker)*																																															
4	Unknown																																															
40	<p>type_healthcare_worker</p> <p>Show the field ONLY if: [infection_setting] = '3'</p>	<p>Type of healthcare worker</p>	<p>radio, Required</p> <table border="1"> <tr><td>1</td><td>Doctor</td></tr> <tr><td>2</td><td>Nurse</td></tr> <tr><td>3</td><td>Other</td></tr> </table>	1	Doctor	2	Nurse	3	Other																																							
1	Doctor																																															
2	Nurse																																															
3	Other																																															
41	<p>date_symptoms</p>	<p>Date symptoms first began?Ok to use an estimate if exact date is unavailable</p>	<p>text (date_mdy), Required</p>																																													
42	<p>symptoms</p>	<p>Symptom(s) that began prior to ICU admission (select all that apply)Include symptoms that began at home as well as those that began in the hospital prior to ICU admission</p>	<p>checkbox, Required</p> <table border="1"> <tr><td>1</td><td>symptoms__1</td><td>Cough</td></tr> <tr><td>2</td><td>symptoms__2</td><td>Sputum production</td></tr> <tr><td>3</td><td>symptoms__3</td><td>Hemoptysis</td></tr> <tr><td>4</td><td>symptoms__4</td><td>Sore throat</td></tr> <tr><td>5</td><td>symptoms__5</td><td>Nasal congestion</td></tr> <tr><td>6</td><td>symptoms__6</td><td>Headache</td></tr> <tr><td>7</td><td>symptoms__7</td><td>Fever</td></tr> <tr><td>8</td><td>symptoms__8</td><td>Chills</td></tr> <tr><td>9</td><td>symptoms__9</td><td>Shortness of breath</td></tr> <tr><td>10</td><td>symptoms__10</td><td>Nausea or vomiting</td></tr> <tr><td>11</td><td>symptoms__11</td><td>Diarrhea</td></tr> <tr><td>12</td><td>symptoms__12</td><td>Myalgia or arthralgia</td></tr> <tr><td>13</td><td>symptoms__13</td><td>Confusion or altered mental status</td></tr> <tr><td>14</td><td>symptoms__14</td><td>Fatigue or malaise</td></tr> <tr><td>15</td><td>symptoms__15</td><td>None of the above</td></tr> </table> <p>Field Annotation: @NONEOFTHEABOVE=15</p>	1	symptoms__1	Cough	2	symptoms__2	Sputum production	3	symptoms__3	Hemoptysis	4	symptoms__4	Sore throat	5	symptoms__5	Nasal congestion	6	symptoms__6	Headache	7	symptoms__7	Fever	8	symptoms__8	Chills	9	symptoms__9	Shortness of breath	10	symptoms__10	Nausea or vomiting	11	symptoms__11	Diarrhea	12	symptoms__12	Myalgia or arthralgia	13	symptoms__13	Confusion or altered mental status	14	symptoms__14	Fatigue or malaise	15	symptoms__15	None of the above
1	symptoms__1	Cough																																														
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14	symptoms__14	Fatigue or malaise																																														
15	symptoms__15	None of the above																																														
43	<p>other_symptoms</p>	<p>Other symptom(s) that began prior to ICU admission? Examples include chest pain/tightness, dizziness, and anosmia (lack of smell)</p>	<p>notes</p>																																													

44	comorbidity_cv_pulm	Cardiovascular and pulmonary comorbidities prior to ICU admission*CAD includes any history of angina, myocardial infarction, or coronary artery bypass graft surgery**CHF includes both HFrEF and HFpEF	checkbox, Required <table border="1" data-bbox="1044 111 1523 552"> <tr> <td>1</td> <td>comorbidity_cv_pulm__1</td> <td>Diabetes mellitus</td> </tr> <tr> <td>2</td> <td>comorbidity_cv_pulm__2</td> <td>Hypertension</td> </tr> <tr> <td>3</td> <td>comorbidity_cv_pulm__3</td> <td>Coronary artery disease (CAD)*</td> </tr> <tr> <td>4</td> <td>comorbidity_cv_pulm__4</td> <td>Congestive heart failure (CHF)**</td> </tr> <tr> <td>5</td> <td>comorbidity_cv_pulm__5</td> <td>Atrial fibrillation/flutter</td> </tr> <tr> <td>6</td> <td>comorbidity_cv_pulm__6</td> <td>COPD</td> </tr> <tr> <td>7</td> <td>comorbidity_cv_pulm__7</td> <td>Asthma</td> </tr> <tr> <td>8</td> <td>comorbidity_cv_pulm__8</td> <td>Other lung disease</td> </tr> <tr> <td>9</td> <td>comorbidity_cv_pulm__9</td> <td>None of the above</td> </tr> </table> Field Annotation: @NONEOFTHEABOVE=9	1	comorbidity_cv_pulm__1	Diabetes mellitus	2	comorbidity_cv_pulm__2	Hypertension	3	comorbidity_cv_pulm__3	Coronary artery disease (CAD)*	4	comorbidity_cv_pulm__4	Congestive heart failure (CHF)**	5	comorbidity_cv_pulm__5	Atrial fibrillation/flutter	6	comorbidity_cv_pulm__6	COPD	7	comorbidity_cv_pulm__7	Asthma	8	comorbidity_cv_pulm__8	Other lung disease	9	comorbidity_cv_pulm__9	None of the above
1	comorbidity_cv_pulm__1	Diabetes mellitus																												
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8	comorbidity_cv_pulm__8	Other lung disease																												
9	comorbidity_cv_pulm__9	None of the above																												
45	iddm_or_niddm Show the field ONLY if: [comorbidity_cv_pulm(1)] = '1'	Was the diabetes insulin-dependent or non-insulin-dependent?	radio, Required <table border="1" data-bbox="1044 644 1295 724"> <tr> <td>1</td> <td>Insulin-dependent</td> </tr> <tr> <td>2</td> <td>Non-insulin-dependent</td> </tr> </table>	1	Insulin-dependent	2	Non-insulin-dependent																							
1	Insulin-dependent																													
2	Non-insulin-dependent																													
46	other_lung_disease Show the field ONLY if: [comorbidity_cv_pulm(8)] = '1'	Enter the other lung disease	text, Required																											
47	smoker	Tobacco smoking statusDo not include vaping or smoking of non-tobacco products	radio, Required <table border="1" data-bbox="1044 873 1230 1035"> <tr> <td>1</td> <td>Non-smoker</td> </tr> <tr> <td>2</td> <td>Former smoker</td> </tr> <tr> <td>3</td> <td>Current smoker</td> </tr> <tr> <td>4</td> <td>Unknown</td> </tr> </table>	1	Non-smoker	2	Former smoker	3	Current smoker	4	Unknown																			
1	Non-smoker																													
2	Former smoker																													
3	Current smoker																													
4	Unknown																													
48	packyears Show the field ONLY if: [smoker] = '2' or [smoker] = '3'	How many pack-years of smoking history?If not available enter, "N/A"	text, Required																											
49	alcohol	History of alcohol abuse	radio, Required <table border="1" data-bbox="1044 1211 1174 1329"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>2</td> <td>No</td> </tr> <tr> <td>3</td> <td>Unknown</td> </tr> </table>	1	Yes	2	No	3	Unknown																					
1	Yes																													
2	No																													
3	Unknown																													
50	homeless	Currently homeless	radio, Required <table border="1" data-bbox="1044 1373 1174 1491"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>2</td> <td>No</td> </tr> <tr> <td>3</td> <td>Unknown</td> </tr> </table>	1	Yes	2	No	3	Unknown																					
1	Yes																													
2	No																													
3	Unknown																													

51	comorbidity_other	Additional comorbidities prior to ICU admission*Chronic Kidney Disease (CKD) is defined as a baseline eGFR< 60 on at least two consecutive values at least 12 weeks apart prior to hospital admission. If not available, defined as per medical history**Chronic liver disease includes cirrhosis, alcohol-related liver disease, nonalcoholic fatty liver disease, autoimmune hepatitis, hepatitis B or hepatitis C, primary biliary cirrhosis, and others***Active malignancy is defined as any malignancy (other than non-melanoma skin cancer) that was treated in the prior year	checkbox, Required <table border="1" data-bbox="1044 111 1523 552"> <tr><td>1</td><td>comorbidity_other__1</td><td>CKD*</td></tr> <tr><td>2</td><td>comorbidity_other__2</td><td>ESRD on hemodialysis or peritoneal dialysis</td></tr> <tr><td>3</td><td>comorbidity_other__3</td><td>Chronic liver disease**</td></tr> <tr><td>4</td><td>comorbidity_other__4</td><td>HIV/AIDS</td></tr> <tr><td>5</td><td>comorbidity_other__5</td><td>Active malignancy***</td></tr> <tr><td>6</td><td>comorbidity_other__6</td><td>Solid organ transplant</td></tr> <tr><td>7</td><td>comorbidity_other__7</td><td>Bone marrow transplant</td></tr> <tr><td>8</td><td>comorbidity_other__8</td><td>Other immunodeficiency</td></tr> <tr><td>9</td><td>comorbidity_other__9</td><td>None of the above</td></tr> </table> <p>Field Annotation: @NONEOFTHEABOVE=9</p>	1	comorbidity_other__1	CKD*	2	comorbidity_other__2	ESRD on hemodialysis or peritoneal dialysis	3	comorbidity_other__3	Chronic liver disease**	4	comorbidity_other__4	HIV/AIDS	5	comorbidity_other__5	Active malignancy***	6	comorbidity_other__6	Solid organ transplant	7	comorbidity_other__7	Bone marrow transplant	8	comorbidity_other__8	Other immunodeficiency	9	comorbidity_other__9	None of the above
1	comorbidity_other__1	CKD*																												
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7	comorbidity_other__7	Bone marrow transplant																												
8	comorbidity_other__8	Other immunodeficiency																												
9	comorbidity_other__9	None of the above																												
52	dialysis_modality_prior Show the field ONLY if: [comorbidity_other(2)] = '1'	Dialysis modality prior to hospital admission	radio, Required <table border="1" data-bbox="1044 644 1292 762"> <tr><td>1</td><td>In-center hemodialysis</td></tr> <tr><td>2</td><td>Home hemodialysis</td></tr> <tr><td>3</td><td>Peritoneal dialysis</td></tr> </table>	1	In-center hemodialysis	2	Home hemodialysis	3	Peritoneal dialysis																					
1	In-center hemodialysis																													
2	Home hemodialysis																													
3	Peritoneal dialysis																													
53	type_access Show the field ONLY if: [dialysis_modality_prior] = '1' or [dialysis_modality_prior] = '2'	Type of vascular access used prior to hospital admission	radio, Required <table border="1" data-bbox="1044 806 1325 924"> <tr><td>1</td><td>Catheter</td></tr> <tr><td>2</td><td>Arteriovenous fistula (AVF)</td></tr> <tr><td>3</td><td>Arteriovenous graft (AVG)</td></tr> </table>	1	Catheter	2	Arteriovenous fistula (AVF)	3	Arteriovenous graft (AVG)																					
1	Catheter																													
2	Arteriovenous fistula (AVF)																													
3	Arteriovenous graft (AVG)																													
54	duration_dialysis Show the field ONLY if: [comorbidity_other(2)] = '1'	How long had the patient been receiving maintenance dialysis therapy prior to ICU admission?	radio, Required <table border="1" data-bbox="1044 968 1325 1205"> <tr><td>1</td><td>< 6 months</td></tr> <tr><td>2</td><td>Between 6 and 12 months</td></tr> <tr><td>3</td><td>Between 1 and 2.9 years</td></tr> <tr><td>4</td><td>Between 3 and 4.9 years</td></tr> <tr><td>5</td><td>5 or more years</td></tr> <tr><td>6</td><td>Unknown</td></tr> </table>	1	< 6 months	2	Between 6 and 12 months	3	Between 1 and 2.9 years	4	Between 3 and 4.9 years	5	5 or more years	6	Unknown															
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4	Between 3 and 4.9 years																													
5	5 or more years																													
6	Unknown																													
55	hx_failed_txplant Show the field ONLY if: [comorbidity_other(2)] = '1'	Does the patient have a history of a failed kidney transplant?	radio, Required <table border="1" data-bbox="1044 1247 1174 1365"> <tr><td>1</td><td>Yes</td></tr> <tr><td>2</td><td>No</td></tr> <tr><td>3</td><td>Unknown</td></tr> </table>	1	Yes	2	No	3	Unknown																					
1	Yes																													
2	No																													
3	Unknown																													
56	type_liver_disease Show the field ONLY if: [comorbidity_other(3)] = '1'	Type of chronic liver disease	checkbox, Required <table border="1" data-bbox="1044 1409 1523 1717"> <tr><td>1</td><td>type_liver_disease__1</td><td>Alcohol-related</td></tr> <tr><td>2</td><td>type_liver_disease__2</td><td>Non-alcoholic fatty liver disease/NASH</td></tr> <tr><td>3</td><td>type_liver_disease__3</td><td>Hepatitis B virus</td></tr> <tr><td>4</td><td>type_liver_disease__4</td><td>Hepatitis C virus</td></tr> <tr><td>5</td><td>type_liver_disease__5</td><td>Autoimmune hepatitis</td></tr> <tr><td>6</td><td>type_liver_disease__6</td><td>Primary biliary cirrhosis</td></tr> <tr><td>7</td><td>type_liver_disease__7</td><td>Other</td></tr> </table>	1	type_liver_disease__1	Alcohol-related	2	type_liver_disease__2	Non-alcoholic fatty liver disease/NASH	3	type_liver_disease__3	Hepatitis B virus	4	type_liver_disease__4	Hepatitis C virus	5	type_liver_disease__5	Autoimmune hepatitis	6	type_liver_disease__6	Primary biliary cirrhosis	7	type_liver_disease__7	Other						
1	type_liver_disease__1	Alcohol-related																												
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6	type_liver_disease__6	Primary biliary cirrhosis																												
7	type_liver_disease__7	Other																												
57	other_liver Show the field ONLY if: [type_liver_disease(7)] = '1'	Enter other chronic liver disease	text, Required																											

58	cancer_type Show the field ONLY if: [comorbidity_other(5)] = '1'	Type of malignancy	checkbox, Required <table border="1"> <tr><td>1</td><td>cancer_type__1</td><td>Lung cancer</td></tr> <tr><td>2</td><td>cancer_type__2</td><td>Breast cancer</td></tr> <tr><td>3</td><td>cancer_type__3</td><td>Colorectal cancer</td></tr> <tr><td>4</td><td>cancer_type__4</td><td>Prostate cancer</td></tr> <tr><td>5</td><td>cancer_type__5</td><td>Gastric cancer</td></tr> <tr><td>6</td><td>cancer_type__6</td><td>Pancreatic cancer</td></tr> <tr><td>7</td><td>cancer_type__7</td><td>Melanoma</td></tr> <tr><td>8</td><td>cancer_type__8</td><td>Ovarian cancer</td></tr> <tr><td>9</td><td>cancer_type__9</td><td>Brain cancer</td></tr> <tr><td>10</td><td>cancer_type__10</td><td>Other cancer</td></tr> </table>	1	cancer_type__1	Lung cancer	2	cancer_type__2	Breast cancer	3	cancer_type__3	Colorectal cancer	4	cancer_type__4	Prostate cancer	5	cancer_type__5	Gastric cancer	6	cancer_type__6	Pancreatic cancer	7	cancer_type__7	Melanoma	8	cancer_type__8	Ovarian cancer	9	cancer_type__9	Brain cancer	10	cancer_type__10	Other cancer
1	cancer_type__1	Lung cancer																															
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8	cancer_type__8	Ovarian cancer																															
9	cancer_type__9	Brain cancer																															
10	cancer_type__10	Other cancer																															
59	other_cancer Show the field ONLY if: [cancer_type(10)] = '1'	Enter the other malignancy	text, Required																														
60	solid_txplant_type Show the field ONLY if: [comorbidity_other(6)] = '1'	Type of solid organ transplant	checkbox, Required <table border="1"> <tr><td>1</td><td>solid_txplant_type__1</td><td>Kidney</td></tr> <tr><td>2</td><td>solid_txplant_type__2</td><td>Liver</td></tr> <tr><td>3</td><td>solid_txplant_type__3</td><td>Heart</td></tr> <tr><td>4</td><td>solid_txplant_type__4</td><td>Lung</td></tr> <tr><td>5</td><td>solid_txplant_type__5</td><td>Other</td></tr> </table>	1	solid_txplant_type__1	Kidney	2	solid_txplant_type__2	Liver	3	solid_txplant_type__3	Heart	4	solid_txplant_type__4	Lung	5	solid_txplant_type__5	Other															
1	solid_txplant_type__1	Kidney																															
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3	solid_txplant_type__3	Heart																															
4	solid_txplant_type__4	Lung																															
5	solid_txplant_type__5	Other																															
61	other_solid_txplant Show the field ONLY if: [solid_txplant_type(5)] = '1'	Enter the other solid organ transplant type	text, Required																														
62	other_immunodef Show the field ONLY if: [comorbidity_other(8)] = '1'	Enter the other immunodeficiency	text, Required																														
63	bl_cr_avail	At least one baseline serum creatinine value available? Defined as a value between 365 to 7 days PRIOR to hospitalization	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No																										
1	Yes																																
0	No																																
64	baseline_cr Show the field ONLY if: [bl_cr_avail] = '1'	Baseline serum creatinine (mg/dl) Defined as the LOWEST value within 365 to 7 days prior to hospital admission	text (number, Min: 0.1, Max: 11), Required																														
65	cr_hosp_adm	Serum creatinine (mg/dl) on HOSPITAL admission	text, Required																														
66	home_meds_anti_htn	Anti-hypertensive meds prior to hospital admission (select all that apply) ACE-Is include lisinopril, fosinopril, captopril, and others ARBs include losartan, valsartan, irbesartan, and others MRAs include spironolactone and eplerenone	checkbox, Required <table border="1"> <tr><td>1</td><td>home_meds_anti_htn__1</td><td>ACE-I</td></tr> <tr><td>2</td><td>home_meds_anti_htn__2</td><td>ARB</td></tr> <tr><td>3</td><td>home_meds_anti_htn__3</td><td>Mineralocorticoid receptor antagonist (MRA)</td></tr> <tr><td>4</td><td>home_meds_anti_htn__4</td><td>Beta-blocker</td></tr> <tr><td>5</td><td>home_meds_anti_htn__5</td><td>Other anti-hypertensive</td></tr> <tr><td>6</td><td>home_meds_anti_htn__6</td><td>None of the above</td></tr> </table> Field Annotation: @NONEOFTHEABOVE=6	1	home_meds_anti_htn__1	ACE-I	2	home_meds_anti_htn__2	ARB	3	home_meds_anti_htn__3	Mineralocorticoid receptor antagonist (MRA)	4	home_meds_anti_htn__4	Beta-blocker	5	home_meds_anti_htn__5	Other anti-hypertensive	6	home_meds_anti_htn__6	None of the above												
1	home_meds_anti_htn__1	ACE-I																															
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5	home_meds_anti_htn__5	Other anti-hypertensive																															
6	home_meds_anti_htn__6	None of the above																															
67	other_anti_htn Show the field ONLY if: [home_meds_anti_htn(5)] = '1'	Enter the other anti-hypertensive(s) If entering more than one, separate with commas	text, Required																														

68	home_meds_other	Other meds prior to hospital admission (select all that apply).Note: only refers to home meds (don't include meds started at an outside hospital)Statins include atorvastatin, pravastatin, rosuvastatin, and others NSAIDs include ibuprofen (Advil, Motrin), naproxen (Aleve), and others For vitamins C and D, do not include if the only source was a multivitamin*Include these meds if any were taken within 1 week prior to hospital admission	checkbox, Required <table border="1" data-bbox="1042 111 1503 474"> <tr><td>1</td><td>home_meds_other__1</td><td>Statin</td></tr> <tr><td>2</td><td>home_meds_other__2</td><td>NSAID</td></tr> <tr><td>3</td><td>home_meds_other__3</td><td>Aspirin</td></tr> <tr><td>4</td><td>home_meds_other__4</td><td>Vitamin C</td></tr> <tr><td>5</td><td>home_meds_other__5</td><td>Vitamin D</td></tr> <tr><td>6</td><td>home_meds_other__6</td><td>Chloroquine*</td></tr> <tr><td>7</td><td>home_meds_other__7</td><td>Hydroxychloroquine*</td></tr> <tr><td>8</td><td>home_meds_other__8</td><td>Azithromycin*</td></tr> <tr><td>9</td><td>home_meds_other__9</td><td>None of the above</td></tr> </table> <p>Field Annotation: @NONEOFTHEABOVE=9</p>	1	home_meds_other__1	Statin	2	home_meds_other__2	NSAID	3	home_meds_other__3	Aspirin	4	home_meds_other__4	Vitamin C	5	home_meds_other__5	Vitamin D	6	home_meds_other__6	Chloroquine*	7	home_meds_other__7	Hydroxychloroquine*	8	home_meds_other__8	Azithromycin*	9	home_meds_other__9	None of the above
1	home_meds_other__1	Statin																												
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8	home_meds_other__8	Azithromycin*																												
9	home_meds_other__9	None of the above																												
69	home_meds_anticoag	Therapeutic anticoagulants prior to admissionDo not include anti-platelet agents such as aspirin or clopidogrel (Plavix) as "other anticoagulant"	checkbox, Required <table border="1" data-bbox="1042 569 1523 888"> <tr><td>1</td><td>home_meds_anticoag__1</td><td>Warfarin (Coumadin)</td></tr> <tr><td>2</td><td>home_meds_anticoag__2</td><td>Lovenox (Enoxaparin)</td></tr> <tr><td>3</td><td>home_meds_anticoag__3</td><td>Apixaban (Eliquis)</td></tr> <tr><td>4</td><td>home_meds_anticoag__4</td><td>Rivaroxaban (Xarelto)</td></tr> <tr><td>5</td><td>home_meds_anticoag__5</td><td>Other anticoagulant</td></tr> <tr><td>6</td><td>home_meds_anticoag__6</td><td>None of the above</td></tr> </table> <p>Field Annotation: @NONEOFTHEABOVE=6</p>	1	home_meds_anticoag__1	Warfarin (Coumadin)	2	home_meds_anticoag__2	Lovenox (Enoxaparin)	3	home_meds_anticoag__3	Apixaban (Eliquis)	4	home_meds_anticoag__4	Rivaroxaban (Xarelto)	5	home_meds_anticoag__5	Other anticoagulant	6	home_meds_anticoag__6	None of the above									
1	home_meds_anticoag__1	Warfarin (Coumadin)																												
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5	home_meds_anticoag__5	Other anticoagulant																												
6	home_meds_anticoag__6	None of the above																												
70	immunosupp_med	Select if the patient received any of the following immunosuppressive medications in the 30 days prior to ICU admission *Do not include immunotherapy, such as immune checkpoint inhibitors (e.g., nivolumab)**CNIs include tacrolimus and cyclosporine; do not include CNIs applied topically (i.e., as an ointment)	checkbox, Required <table border="1" data-bbox="1042 982 1523 1463"> <tr><td>1</td><td>immunosupp_med__1</td><td>Chemotherapy*</td></tr> <tr><td>2</td><td>immunosupp_med__2</td><td>Corticosteroids >10mg prednisone/day (or equivalent)</td></tr> <tr><td>3</td><td>immunosupp_med__3</td><td>Calcineurin inhibitor (CNI)**</td></tr> <tr><td>4</td><td>immunosupp_med__4</td><td>Mycophenolate mofetile (Cellcept)</td></tr> <tr><td>5</td><td>immunosupp_med__5</td><td>Azathioprine (Imuran)</td></tr> <tr><td>6</td><td>immunosupp_med__6</td><td>Rituximab</td></tr> <tr><td>7</td><td>immunosupp_med__7</td><td>Other major immunosuppressive therapy</td></tr> <tr><td>8</td><td>immunosupp_med__8</td><td>None of the above</td></tr> </table> <p>Field Annotation: @NONEOFTHEABOVE=8</p>	1	immunosupp_med__1	Chemotherapy*	2	immunosupp_med__2	Corticosteroids >10mg prednisone/day (or equivalent)	3	immunosupp_med__3	Calcineurin inhibitor (CNI)**	4	immunosupp_med__4	Mycophenolate mofetile (Cellcept)	5	immunosupp_med__5	Azathioprine (Imuran)	6	immunosupp_med__6	Rituximab	7	immunosupp_med__7	Other major immunosuppressive therapy	8	immunosupp_med__8	None of the above			
1	immunosupp_med__1	Chemotherapy*																												
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7	immunosupp_med__7	Other major immunosuppressive therapy																												
8	immunosupp_med__8	None of the above																												
71	other_immunemed Show the field ONLY if: [immunosupp_med(7)] = '1'	Enter the other major immunosuppressive medication(s) the patient was taking	text, Required																											
72	notes_demo	Additional Notes (if any)Please do not use this space to enter additional medications or comorbidities	notes																											
73	demographics_symptoms_co_morbidities_home_medicatio_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1" data-bbox="1042 1732 1187 1850"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete																					
0	Incomplete																													
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2	Complete																													

Instrument: **Vital Signs And Severity-of-Illness On ICU Day 1** (vital_signs_and_severityofillness_on_icu_day_1)

[^ Collapse](#)

74	vs_instructions	Unless otherwise specified, the timing of the data below refers to ICU Day1, defined as the 24h period from midnight PRIOR to ICU admission to midnight AFTER ICU admission. For example, if a patient is admitted to an ICU at 10pm, 22 of the 24 hours for ICU Day1 would actually be from prior to ICU arrival (e.g., from the ED or hospital ward). See timeline in the "REDCap instructions" PDF for additional details.	descriptive										
75	weight	Weight on ICU Day1 (or closest value prior)-Can enter in either kg or lbs-If none available, enter, "N/A"	text, Required										
76	weight_unit	Units for weightBe sure to select the correct unit	radio <table border="1"> <tr> <td>1</td> <td>Kilograms</td> </tr> <tr> <td>2</td> <td>Pounds</td> </tr> </table>	1	Kilograms	2	Pounds						
1	Kilograms												
2	Pounds												
77	height	Height-Can enter in either cm or inches-If not available, enter, "N/A"	text, Required										
78	height_unit	Units for heightBe sure to select the correct unit	radio <table border="1"> <tr> <td>1</td> <td>Centimeters</td> </tr> <tr> <td>2</td> <td>Inches</td> </tr> </table>	1	Centimeters	2	Inches						
1	Centimeters												
2	Inches												
79	admit_date	Date of hospital admissionIf hospitalized elsewhere and then transferred to your hospital, enter the date of the initial hospitalization (e.g., if initially at "Hospital A" and then transferred to "Hospital B", enter the date admitted to Hospital A)	text (date_mdy), Required										
80	icu_date	Date of ICU admission-If admitted to an outside/satellite/affiliate ICU and then transferred to an ICU at your hospital, enter the date admitted to the ICU at your hospital-If the patient had multiple ICU admissions at your hospital during their overall admission for COVID-19, enter the date of the initial ICU admission at your hospital	text (date_mdy), Required										
81	covid_icu	Admitted to a COVID-specific ICU?Defined as an ICU where all patients have suspected or confirmed COVID-19	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No						
1	Yes												
0	No												
82	icu_type Show the field ONLY if: [covid_icu] = '0'	Type of ICUA non-ICU bed qualifies as a having been "converted" to an ICU bed for surge capacity if any of the following are present: a) being treated by an ICU team b) receiving invasive mechanical ventilation or ECMO c) receiving continuous renal replacement therapy (e.g., CVVH)d) receiving vasopressors/inotropes or mechanical cardiac support (e.g., LVAD) in a room where this would traditionally not be permitted	radio, Required <table border="1"> <tr> <td>1</td> <td>Medical ICU</td> </tr> <tr> <td>2</td> <td>Cardiac ICU</td> </tr> <tr> <td>3</td> <td>Surgical/Trauma/Burn ICU</td> </tr> <tr> <td>4</td> <td>Neuro ICU</td> </tr> <tr> <td>5</td> <td>Non-ICU bed converted into an ICU bed for surge capacity</td> </tr> </table>	1	Medical ICU	2	Cardiac ICU	3	Surgical/Trauma/Burn ICU	4	Neuro ICU	5	Non-ICU bed converted into an ICU bed for surge capacity
1	Medical ICU												
2	Cardiac ICU												
3	Surgical/Trauma/Burn ICU												
4	Neuro ICU												
5	Non-ICU bed converted into an ICU bed for surge capacity												
83	highest_temp	Highest temperature on ICU Day1Can enter in either F or C	text (number, Min: 1, Max: 110), Required										
84	units_temp	Units for temperature	radio, Required <table border="1"> <tr> <td>1</td> <td>Fahrenheit</td> </tr> <tr> <td>2</td> <td>Celsius</td> </tr> </table>	1	Fahrenheit	2	Celsius						
1	Fahrenheit												
2	Celsius												
85	lowest_sbp	Lowest systolic blood pressure on ICU Day1Irrespective of whether on pressors or not	text (number, Min: 0, Max: 200), Required										
86	highest_hr	Highest heart rate on ICU Day1	text (number, Min: 20, Max: 200), Required										
87	highest_resp	Highest respiratory rate on ICU Day1Irrespective of whether on ventilator not	text (number, Min: 12, Max: 90), Required										
88	vent_type	What type of mechanical ventilation/oxygen delivery did the patient require on ICU Day1?-Invasive mechanical ventilation refers to mechanical ventilation delivered via endotracheal or tracheal tube-If more than one, select the highest level of support-If nasal cannula or regular facemask only, select "none of the above"	radio, Required <table border="1"> <tr> <td>1</td> <td>Invasive mechanical ventilation</td> </tr> <tr> <td>2</td> <td>BiPaP or CPAP</td> </tr> <tr> <td>3</td> <td>High-flow nasal cannula or non-rebreather mask</td> </tr> <tr> <td>4</td> <td>None of the above</td> </tr> </table>	1	Invasive mechanical ventilation	2	BiPaP or CPAP	3	High-flow nasal cannula or non-rebreather mask	4	None of the above		
1	Invasive mechanical ventilation												
2	BiPaP or CPAP												
3	High-flow nasal cannula or non-rebreather mask												
4	None of the above												

89	infection_type	Did the patient have any confirmed or suspected infection(s) on ICU Day1 other than COVID-19? *Only select bacterial pneumonia if the patient had positive cultures (e.g., sputum or blood), a positive urine antigen for pneumococcus or legionella, or a new infiltrate on chest imaging (CXR or CT) suspected to be separate from COVID-related pneumonia**Examples of viral respiratory infections include influenza, parainfluenza, and RSV***Only if confirmed by blood cultures and/or cardiac imaging	checkbox, Required <table border="1"> <tr> <td>1</td> <td>infection_type__1</td> <td>Bacterial Pneumonia*</td> </tr> <tr> <td>2</td> <td>infection_type__2</td> <td>Viral respiratory infection**</td> </tr> <tr> <td>3</td> <td>infection_type__3</td> <td>Urosepsis</td> </tr> <tr> <td>4</td> <td>infection_type__4</td> <td>Biliary sepsis</td> </tr> <tr> <td>5</td> <td>infection_type__5</td> <td>Cellulitis</td> </tr> <tr> <td>6</td> <td>infection_type__6</td> <td>Bacteremia or endocarditis***</td> </tr> <tr> <td>7</td> <td>infection_type__7</td> <td>Other</td> </tr> <tr> <td>8</td> <td>infection_type__8</td> <td>None of the above</td> </tr> </table> Field Annotation: @NONEOFTHEABOVE=8	1	infection_type__1	Bacterial Pneumonia*	2	infection_type__2	Viral respiratory infection**	3	infection_type__3	Urosepsis	4	infection_type__4	Biliary sepsis	5	infection_type__5	Cellulitis	6	infection_type__6	Bacteremia or endocarditis***	7	infection_type__7	Other	8	infection_type__8	None of the above
1	infection_type__1	Bacterial Pneumonia*																									
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7	infection_type__7	Other																									
8	infection_type__8	None of the above																									
90	viral_resp_infect Show the field ONLY if: [infection_type(2)] = '1'	Enter the viral respiratory infection	text, Required																								
91	other_infection_d1 Show the field ONLY if: [infection_type(7)] = '1'	Enter the other infection	text, Required																								
92	antibiotic	Enter the number of antibiotics the patient was treated with on ICU Day1-Do not include antivirals, antifungals, or antimalarials (e.g., chloroquine or hydroxychloroquine).- Commonly used antibiotics include vancomycin, piperacillin-tazobactim (Zosyn), azithromycin, cephalosporins, quinolones, etc.	radio, Required <table border="1"> <tr> <td>0</td> <td>0</td> </tr> <tr> <td>1</td> <td>1</td> </tr> <tr> <td>2</td> <td>2</td> </tr> <tr> <td>3</td> <td>3</td> </tr> <tr> <td>4</td> <td>4</td> </tr> <tr> <td>5</td> <td>5 or more</td> </tr> </table>	0	0	1	1	2	2	3	3	4	4	5	5 or more												
0	0																										
1	1																										
2	2																										
3	3																										
4	4																										
5	5 or more																										
93	tamiflu	Was the patient treated with oseltamivir (Tamiflu) on ICU Day1?Includes patients who were started on Tamiflu PRIOR to ICU Day1, as long as they continued to receive it on ICU Day1	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No																				
1	Yes																										
0	No																										
94	procalcitonin	Enter procalcitonin level (ng/ml) if checked within 24h before or 24h after admission to the ICU-If more than one available, enter the value closest to ICU admission-If none available, enter "N/A"-If < assay, enter 0-If > assay, enter the upper limit of the assay and do not include the ">" symbol	text, Required																								
95	cpk_day1	Enter CPK level (U/L) if checked within 24h before or 24h after admission to the ICU-If more than one available, enter the value closest to ICU admission-If none available, enter "N/A"-If < assay, enter 0-If > assay, enter the upper limit of the assay	text, Required																								
96	sodium_day1	Enter sodium level (mEq/L) if checked within 24h before or 24h after admission to the ICU-If more than one available, enter the value closest to ICU admission-If none available, enter "N/A"	text, Required																								
97	ams	Altered mental status on ICU Day1?For patients who are intubated/sedated, use the most recent exam prior to intubation/sedation	radio, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>2</td> <td>No</td> </tr> <tr> <td>3</td> <td>Data not available</td> </tr> </table>	1	Yes	2	No	3	Data not available																		
1	Yes																										
2	No																										
3	Data not available																										
98	notes_day1	Additional notes (if any)	notes																								
99	vital_signs_and_severityofillness_on_icu_day_1_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr> <td>0</td> <td>Incomplete</td> </tr> <tr> <td>1</td> <td>Unverified</td> </tr> <tr> <td>2</td> <td>Complete</td> </tr> </table>	0	Incomplete	1	Unverified	2	Complete																		
0	Incomplete																										
1	Unverified																										
2	Complete																										

Instrument: Longitudinal Data On Labs And Physiologic Parameters in the First 14 Days following ICU Admission (longitudinal_data_on_labs_and_physiologic_paramete)																								
100	instruct	The questions below refer to the first 14 days following ICU admission. Even if the patient was in the ICU for less than 14 days and was transferred to the hospital floor, continue to enter data for the full 14 days or until discharged from the hospital or death (whichever occurs first). We highly recommend waiting to fill out this instrument (and future instruments) until the first of death, hospital discharge, at least 14 days of survival data is available. Each ICU Day is a discrete 24h period, from midnight to midnight. ICU Day1 refers to the 24h period from the midnight PRIOR to ICU admission to the midnight AFTER ICU admission. For example, if a patient was admitted to an ICU at 10pm, 22 of the 24 hours for ICU Day1 would actually be from prior to arrival in the ICU. See timeline in the "REDCap instructions" PDF for additional details. If more than one lab value is available on any given day, use the first one. If there is no value available that day, leave the field blank (i.e., do NOT write, "N/A" here)-If a lab is below assay (e.g., Troponin< 6), enter 0-If a lab is above assay (e.g., IL-6>3,000), enter the upper limit of the assay (e.g., "3,000")-Do not include any units or "%" in these fields; only enter numbers-If both an arterial and venous lactate are available on the same day, enter the arterial value, otherwise enter the venous value Please pay close attention to the units, particularly for CRP, D-dimer, and troponin, and convert to the units we are using if needed. For example, if your lab reports troponin in ng/ml, multiply the values by 1,000 to convert to ng/L	descriptive																					
101	labs	Labs	descriptive																					
102	physiologic_parameters	Physiologic parameters	descriptive																					
103	labs_2	Labs 2	descriptive																					
104	physiologic_parameters_2	Physiologic parameters 2	descriptive																					
105	mechsupport_dates	Mechanical support dates	descriptive																					
106	mech_vent	Invasive Mechanical Ventilation*	checkbox <table border="1"> <tr><td>1</td><td>mech_vent__1</td><td>ICU Day1</td></tr> <tr><td>2</td><td>mech_vent__2</td><td>Day2</td></tr> <tr><td>3</td><td>mech_vent__3</td><td>Day3</td></tr> <tr><td>4</td><td>mech_vent__4</td><td>Day4</td></tr> <tr><td>5</td><td>mech_vent__5</td><td>Day5</td></tr> <tr><td>6</td><td>mech_vent__6</td><td>Day6</td></tr> <tr><td>7</td><td>mech_vent__7</td><td>Day7</td></tr> </table>	1	mech_vent__1	ICU Day1	2	mech_vent__2	Day2	3	mech_vent__3	Day3	4	mech_vent__4	Day4	5	mech_vent__5	Day5	6	mech_vent__6	Day6	7	mech_vent__7	Day7
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6	mech_vent__6	Day6																						
7	mech_vent__7	Day7																						
107	ecmo	ECMO	checkbox <table border="1"> <tr><td>1</td><td>ecmo__1</td><td>ICU Day1</td></tr> <tr><td>2</td><td>ecmo__2</td><td>Day2</td></tr> <tr><td>3</td><td>ecmo__3</td><td>Day3</td></tr> <tr><td>4</td><td>ecmo__4</td><td>Day4</td></tr> <tr><td>5</td><td>ecmo__5</td><td>Day5</td></tr> <tr><td>6</td><td>ecmo__6</td><td>Day6</td></tr> <tr><td>7</td><td>ecmo__7</td><td>Day7</td></tr> </table>	1	ecmo__1	ICU Day1	2	ecmo__2	Day2	3	ecmo__3	Day3	4	ecmo__4	Day4	5	ecmo__5	Day5	6	ecmo__6	Day6	7	ecmo__7	Day7
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6	ecmo__6	Day6																						
7	ecmo__7	Day7																						

^ Collapse

108	rrt	Renal Replacement Therapy (RRT)**	checkbox <table border="1"> <tr><td>1</td><td>rrt__1</td><td>ICU Day1</td></tr> <tr><td>2</td><td>rrt__2</td><td>Day2</td></tr> <tr><td>3</td><td>rrt__3</td><td>Day3</td></tr> <tr><td>4</td><td>rrt__4</td><td>Day4</td></tr> <tr><td>5</td><td>rrt__5</td><td>Day5</td></tr> <tr><td>6</td><td>rrt__6</td><td>Day6</td></tr> <tr><td>7</td><td>rrt__7</td><td>Day7</td></tr> </table>	1	rrt__1	ICU Day1	2	rrt__2	Day2	3	rrt__3	Day3	4	rrt__4	Day4	5	rrt__5	Day5	6	rrt__6	Day6	7	rrt__7	Day7
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109	mech_card	Mechanical Cardiac Support***	checkbox <table border="1"> <tr><td>1</td><td>mech_card__1</td><td>ICU Day1</td></tr> <tr><td>2</td><td>mech_card__2</td><td>Day2</td></tr> <tr><td>3</td><td>mech_card__3</td><td>Day3</td></tr> <tr><td>4</td><td>mech_card__4</td><td>Day4</td></tr> <tr><td>5</td><td>mech_card__5</td><td>Day5</td></tr> <tr><td>6</td><td>mech_card__6</td><td>Day6</td></tr> <tr><td>7</td><td>mech_card__7</td><td>Day7</td></tr> </table>	1	mech_card__1	ICU Day1	2	mech_card__2	Day2	3	mech_card__3	Day3	4	mech_card__4	Day4	5	mech_card__5	Day5	6	mech_card__6	Day6	7	mech_card__7	Day7
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6	mech_card__6	Day6																						
7	mech_card__7	Day7																						
110	mech_support_desc	Check the box if the patient received any of the associated therapies on that day*If a patient received any invasive mechanical ventilation that day, check the box, even if they were extubated that day.**For patients who received RRT intermittently (e.g., every other day), continue to check the box as long as they are RRT-dependent, even if they didn't actually receive RRT on that specific day***Includes Impella, Intra-aortic balloon pump (IABP), LVAD, RVAD	descriptive																					
111	mechsupport_dates_2	Mechanical support dates 2	descriptive																					
112	mech_vent2	Invasive Mechanical Ventilation*	checkbox <table border="1"> <tr><td>1</td><td>mech_vent2__1</td><td>Day8</td></tr> <tr><td>2</td><td>mech_vent2__2</td><td>Day9</td></tr> <tr><td>3</td><td>mech_vent2__3</td><td>Day10</td></tr> <tr><td>4</td><td>mech_vent2__4</td><td>Day11</td></tr> <tr><td>5</td><td>mech_vent2__5</td><td>Day12</td></tr> <tr><td>6</td><td>mech_vent2__6</td><td>Day13</td></tr> <tr><td>7</td><td>mech_vent2__7</td><td>Day14</td></tr> </table>	1	mech_vent2__1	Day8	2	mech_vent2__2	Day9	3	mech_vent2__3	Day10	4	mech_vent2__4	Day11	5	mech_vent2__5	Day12	6	mech_vent2__6	Day13	7	mech_vent2__7	Day14
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113	ecmo_2	ECMO	checkbox <table border="1"> <tr><td>1</td><td>ecmo_2__1</td><td>Day8</td></tr> <tr><td>2</td><td>ecmo_2__2</td><td>Day9</td></tr> <tr><td>3</td><td>ecmo_2__3</td><td>Day10</td></tr> <tr><td>4</td><td>ecmo_2__4</td><td>Day11</td></tr> <tr><td>5</td><td>ecmo_2__5</td><td>Day12</td></tr> <tr><td>6</td><td>ecmo_2__6</td><td>Day13</td></tr> <tr><td>7</td><td>ecmo_2__7</td><td>Day14</td></tr> </table>	1	ecmo_2__1	Day8	2	ecmo_2__2	Day9	3	ecmo_2__3	Day10	4	ecmo_2__4	Day11	5	ecmo_2__5	Day12	6	ecmo_2__6	Day13	7	ecmo_2__7	Day14
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114	rrt_2	Renal Replacement Therapy (RRT)**	checkbox <table border="1"> <tr><td>1</td><td>rrt_2__1</td><td>Day8</td></tr> <tr><td>2</td><td>rrt_2__2</td><td>Day9</td></tr> <tr><td>3</td><td>rrt_2__3</td><td>Day10</td></tr> <tr><td>4</td><td>rrt_2__4</td><td>Day11</td></tr> <tr><td>5</td><td>rrt_2__5</td><td>Day12</td></tr> <tr><td>6</td><td>rrt_2__6</td><td>Day13</td></tr> <tr><td>7</td><td>rrt_2__7</td><td>Day14</td></tr> </table>	1	rrt_2__1	Day8	2	rrt_2__2	Day9	3	rrt_2__3	Day10	4	rrt_2__4	Day11	5	rrt_2__5	Day12	6	rrt_2__6	Day13	7	rrt_2__7	Day14
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115	mech_card2	Mechanical Cardiac Support***	checkbox <table border="1"> <tr><td>1</td><td>mech_card2__1</td><td>Day8</td></tr> <tr><td>2</td><td>mech_card2__2</td><td>Day9</td></tr> <tr><td>3</td><td>mech_card2__3</td><td>Day10</td></tr> <tr><td>4</td><td>mech_card2__4</td><td>Day11</td></tr> <tr><td>5</td><td>mech_card2__5</td><td>Day12</td></tr> <tr><td>6</td><td>mech_card2__6</td><td>Day13</td></tr> <tr><td>7</td><td>mech_card2__7</td><td>Day14</td></tr> </table>	1	mech_card2__1	Day8	2	mech_card2__2	Day9	3	mech_card2__3	Day10	4	mech_card2__4	Day11	5	mech_card2__5	Day12	6	mech_card2__6	Day13	7	mech_card2__7	Day14
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6	mech_card2__6	Day13																						
7	mech_card2__7	Day14																						
116	type_ecmo Show the field ONLY if: [ecmo(1)] = '1' or [ecmo(2)] = '1' or [ecmo(3)] = '1' or [ecmo(4)] = '1' or [ecmo(5)] = '1' or [ecmo(6)] = '1' or [ecmo(7)] = '1' or [ecmo_2(1)] = '1' or [ecmo_2(2)] = '1' or [ecmo_2(3)] = '1' or [ecmo_2(4)] = '1' or [ecmo_2(5)] = '1' or [ecmo_2(6)] = '1' or [ecmo_2(7)] = '1'	Type of ECMO	radio, Required <table border="1"> <tr><td>1</td><td>Veno-venous (V-V)</td></tr> <tr><td>2</td><td>Veno-arterial (V-A)</td></tr> <tr><td>3</td><td>Veno-arterial-venous (V-A-V)</td></tr> </table>	1	Veno-venous (V-V)	2	Veno-arterial (V-A)	3	Veno-arterial-venous (V-A-V)															
1	Veno-venous (V-V)																							
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117	ecmo_decannulated Show the field ONLY if: [ecmo(1)] = '1' or [ecmo(2)] = '1' or [ecmo(3)] = '1' or [ecmo(4)] = '1' or [ecmo(5)] = '1' or [ecmo(6)] = '1' or [ecmo(7)] = '1' or [ecmo_2(1)] = '1' or [ecmo_2(2)] = '1' or [ecmo_2(3)] = '1' or [ecmo_2(4)] = '1' or [ecmo_2(5)] = '1' or [ecmo_2(6)] = '1' or [ecmo_2(7)] = '1'	Was the ECMO successfully decannulated (removed) during the first 14 days following ICU admission?If the ECMO was decannulated for palliative purposes, select "no"	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No																	
1	Yes																							
0	No																							
118	date_ecmo_decan Show the field ONLY if: [ecmo_decannulated] = '1'	Date ECMO was decannulated	text (date_mdy), Required																					
119	type_rrt Show the field ONLY if: [rrt(1)] = '1' or [rrt(2)] = '1' or [rrt(3)] = '1' or [rrt(4)] = '1' or [rrt(5)] = '1' or [rrt(6)] = '1' or [rrt(7)] = '1' or [rrt_2(1)] = '1' or [rrt_2(2)] = '1' or [rrt_2(3)] = '1' or [rrt_2(4)] = '1' or [rrt_2(5)] = '1' or [rrt_2(6)] = '1' or [rrt_2(7)] = '1'	Initial mode of RRT	radio, Required <table border="1"> <tr><td>1</td><td>Continuous (CRRT) - 24h/day</td></tr> <tr><td>2</td><td>Continuous (CRRT) - 12h/day or less</td></tr> <tr><td>3</td><td>Intermittent hemodialysis</td></tr> <tr><td>4</td><td>Peritoneal dialysis</td></tr> <tr><td>5</td><td>Other</td></tr> </table>	1	Continuous (CRRT) - 24h/day	2	Continuous (CRRT) - 12h/day or less	3	Intermittent hemodialysis	4	Peritoneal dialysis	5	Other											
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120	type_mech_card_support Show the field ONLY if: [mech_card(1)] = '1' or [mech_card(2)] = '1' or [mech_card(3)] = '1' or [mech_card(4)] = '1' or [mech_card(5)] = '1' or [mech_card(6)] = '1' or [mech_card(7)] = '1' or [mech_card2(1)] = '1' or [mech_card2(2)] = '1' or [mech_card2(3)] = '1' or [mech_card2(4)] = '1' or [mech_card2(5)] = '1' or [mech_card2(6)] = '1' or [mech_card2(7)] = '1'	Type of mechanical cardiac support (select all that apply)	checkbox, Required <table border="1"> <tr><td>1</td><td>type_mech_card_support__1</td><td>Impella</td></tr> <tr><td>2</td><td>type_mech_card_support__2</td><td>Intra-aortic balloon pump (IABP)</td></tr> <tr><td>3</td><td>type_mech_card_support__3</td><td>LVAD</td></tr> <tr><td>4</td><td>type_mech_card_support__4</td><td>RVAD</td></tr> <tr><td>5</td><td>type_mech_card_support__5</td><td>Other</td></tr> </table>	1	type_mech_card_support__1	Impella	2	type_mech_card_support__2	Intra-aortic balloon pump (IABP)	3	type_mech_card_support__3	LVAD	4	type_mech_card_support__4	RVAD	5	type_mech_card_support__5	Other						
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121	other_mech_card_support Show the field ONLY if: [type_mech_card_support(5)] = '1'	Enter other mechanical cardiac support	text, Required																					
122	mech_date_d1	Mech support dates 1	text (date_mdy)																					

123	mech_date_d2	Mech support dates 2	text (date_mdy)
124	mech_date_d3	Mech support dates 3	text (date_mdy)
125	mech_date_d4	Mech support dates 4	text (date_mdy)
126	mech_date_d5	Mech support dates 5	text (date_mdy)
127	mech_date_d6	Mech support dates 6	text (date_mdy)
128	mech_date_d7	Mech support dates 7	text (date_mdy)
129	mech_date_d8	Mech support dates 8	text (date_mdy)
130	mech_date_d9	Mech support dates 9	text (date_mdy)
131	mech_date_d10	Mech support dates 10	text (date_mdy)
132	mech_date_d11	Mech support dates 11	text (date_mdy)
133	mech_date_d12	Mech support dates 12	text (date_mdy)
134	mech_date_d13	Mech support dates 13	text (date_mdy)
135	mech_date_d14	Mech support dates 14	text (date_mdy)
136	labs_date_d1	Labs Date Day 1	text (date_mdy)
137	labs_date_d2	Labs Date Day 2	text (date_mdy)
138	labs_date_d3	Labs Date Day 3	text (date_mdy)
139	labs_date_d4	Labs Date Day 4	text (date_mdy)
140	labs_date_d5	Labs Date Day 5	text (date_mdy)
141	labs_date_d6	Labs Date Day 6	text (date_mdy)
142	labs_date_d7	Labs Date Day 7	text (date_mdy)
143	labs_date_d8	Labs Date Day 8	text (date_mdy)
144	labs_date_d9	Labs Date Day 9	text (date_mdy)
145	labs_date_d10	Labs Date Day 10	text (date_mdy)
146	labs_date_d11	Labs Date Day 11	text (date_mdy)
147	labs_date_d12	Labs Date Day 12	text (date_mdy)
148	labs_date_d13	Labs Date Day 13	text (date_mdy)
149	labs_date_d14	Labs Date Day 14	text (date_mdy)
150	whitecell_d1	White cell count day 1	text (number, Min: 0, Max: 200)
151	whitecell_d2	White cell count day 2	text (number, Min: 0, Max: 200)
152	whitecell_d3	White cell count day 3	text (number, Min: 0, Max: 200)
153	whitecell_d4	White cell count day 4	text (number, Min: 0, Max: 200)
154	whitecell_d5	White cell count day 5	text (number, Min: 0, Max: 200)
155	whitecell_d6	White cell count day 6	text (number, Min: 0, Max: 200)
156	whitecell_d7	White cell count day 7	text (number, Min: 0, Max: 200)
157	whitecell_d8	White cell count day 8	text (number, Min: 0, Max: 200)
158	whitecell_d9	White cell count day 9	text (number, Min: 0, Max: 200)
159	whitecell_d10	White cell count day 10	text (number, Min: 0, Max: 200)
160	whitecell_d11	White cell count day 11	text (number, Min: 0, Max: 200)
161	whitecell_d12	White cell count day 12	text (number, Min: 0, Max: 200)
162	whitecell_d13	White cell count day 13	text (number, Min: 0, Max: 200)
163	whitecell_d14	White cell count day 14	text (number, Min: 0, Max: 200)
164	lymphocyte_d1	Lymphocyte percentage day 1	text (number, Min: 0, Max: 100)
165	lymphocyte_d2	Lymphocyte percentage day 2	text (number, Min: 0, Max: 100)
166	lymphocyte_d3	Lymphocyte percentage day 3	text (number, Min: 0, Max: 100)
167	lymphocyte_d4	Lymphocyte percentage day 4	text (number, Min: 0, Max: 100)
168	lymphocyte_d5	Lymphocyte percentage day 5	text (number, Min: 0, Max: 100)
169	lymphocyte_d6	Lymphocyte percentage day 6	text (number, Min: 0, Max: 100)
170	lymphocyte_d7	Lymphocyte percentage day 7	text (number, Min: 0, Max: 100)

171	lymphocyte_d8	Lymphocyte percentage day 8	text (number, Min: 0, Max: 100)
172	lymphocyte_d9	Lymphocyte percentage day 9	text (number, Min: 0, Max: 100)
173	lymphocyte_d10	Lymphocyte percentage day 10	text (number, Min: 0, Max: 100)
174	lymphocyte_d11	Lymphocyte percentage day 11	text (number, Min: 0, Max: 100)
175	lymphocyte_d12	Lymphocyte percentage day 12	text (number, Min: 0, Max: 100)
176	lymphocyte_d13	Lymphocyte percentage day 13	text (number, Min: 0, Max: 100)
177	lymphocyte_d14	Lymphocyte percentage day 14	text (number, Min: 0, Max: 100)
178	hemoglobin_d1	Hemoglobin Day 1	text (number, Min: 3, Max: 20)
179	hemoglobin_d2	Hemoglobin Day 2	text (number, Min: 3, Max: 20)
180	hemoglobin_d3	Hemoglobin Day 3	text (number, Min: 3, Max: 20)
181	hemoglobin_d4	Hemoglobin Day 4	text (number, Min: 3, Max: 20)
182	hemoglobin_d5	Hemoglobin Day 5	text (number, Min: 3, Max: 20)
183	hemoglobin_d6	Hemoglobin Day 6	text (number, Min: 3, Max: 20)
184	hemoglobin_d7	Hemoglobin Day 7	text (number, Min: 3, Max: 20)
185	hemoglobin_d8	Hemoglobin Day 8	text (number, Min: 3, Max: 20)
186	hemoglobin_d9	Hemoglobin Day 9	text (number, Min: 3, Max: 20)
187	hemoglobin_d10	Hemoglobin Day 10	text (number, Min: 3, Max: 20)
188	hemoglobin_d11	Hemoglobin Day 11	text (number, Min: 3, Max: 20)
189	hemoglobin_d12	Hemoglobin Day 12	text (number, Min: 3, Max: 20)
190	hemoglobin_d13	Hemoglobin Day 13	text (number, Min: 3, Max: 20)
191	hemoglobin_d14	Hemoglobin Day 14	text (number, Min: 3, Max: 20)
192	platelet_d1	Platelet count day 1	text (integer, Min: 0, Max: 1000000)
193	platelet_d2	Platelet count day 2	text (integer, Min: 0, Max: 1000000)
194	platelet_d3	Platelet count day 3	text (integer, Min: 0, Max: 1000000)
195	platelet_d4	Platelet count day 4	text (integer, Min: 0, Max: 1000000)
196	platelet_d5	Platelet count day 5	text (integer, Min: 0, Max: 1000000)
197	platelet_d6	Platelet count day 6	text (integer, Min: 0, Max: 1000000)
198	platelet_d7	Platelet count day 7	text (integer, Min: 0, Max: 1000000)
199	platelet_d8	Platelet count day 8	text (integer, Min: 0, Max: 1000000)
200	platelet_d9	Platelet count day 9	text (integer, Min: 0, Max: 1000000)
201	platelet_d10	Platelet count day 10	text (integer, Min: 0, Max: 1000000)
202	platelet_d11	Platelet count day 11	text (integer, Min: 0, Max: 1000000)
203	platelet_d12	Platelet count day 12	text (integer, Min: 0, Max: 1000000)
204	platelet_d13	Platelet count day 13	text (integer, Min: 0, Max: 1000000)
205	platelet_d14	Platelet count day 14	text (integer, Min: 0, Max: 1000000)
206	creatinine_d1	Creatinine Day 1	text (number, Min: 0.1, Max: 8)
207	creatinine_d2	Creatinine day 2	text (number, Min: 0.1, Max: 8)
208	creatinine_d3	Creatinine day 3	text (number, Min: 0.1, Max: 8)
209	creatinine_d4	Creatinine day 4	text (number, Min: 0.1, Max: 8)
210	creatinine_d5	Creatinine day 5	text (number, Min: 0.1, Max: 8)
211	creatinine_d6	Creatinine day 6	text (number, Min: 0.1, Max: 8)
212	creatinine_d7	Creatinine day 7	text (number, Min: 0.1, Max: 8)
213	creatinine_d8	Creatinine day 8	text (number, Min: 0.1, Max: 8)
214	creatinine_d9	Creatinine day 9	text (number, Min: 0.1, Max: 9)
215	creatinine_d10	Creatinine day 10	text (number, Min: 0.1, Max: 10)
216	creatinine_d11	Creatinine day 11	text (number, Min: 0.1, Max: 8)
217	creatinine_d12	Creatinine day 12	text (number, Min: 0.1, Max: 8)
218	creatinine_d13	Creatinine day 13	text (number, Min: 0.1, Max: 8)

219	creatinine_d14	Creatinine day 14	text (number, Min: 0.1, Max: 8)
220	albumin_d1	Albumin day 1	text (number, Min: 1.5, Max: 6)
221	albumin_d2	Albumin day 2	text (number, Min: 1.5, Max: 6)
222	albumin_d3	Albumin day 3	text (number, Min: 1.5, Max: 6)
223	albumin_d4	Albumin day 4	text (number, Min: 1.5, Max: 6)
224	albumin_d5	Albumin day 5	text (number, Min: 1.5, Max: 6)
225	albumin_d6	Albumin day 6	text (number, Min: 1.5, Max: 6)
226	albumin_d7	Albumin day 7	text (number, Min: 1.5, Max: 6)
227	albumin_d8	Albumin day 8	text (number, Min: 1.5, Max: 6)
228	albumin_d9	Albumin day 9	text (number, Min: 1.5, Max: 6)
229	albumin_d10	Albumin day 10	text (number, Min: 1.5, Max: 6)
230	albumin_d11	Albumin day 11	text (number, Min: 1.5, Max: 6)
231	albumin_d12	Albumin day 12	text (number, Min: 1.5, Max: 6)
232	albumin_d13	Albumin day 13	text (number, Min: 1.5, Max: 6)
233	albumin_d14	Albumin day 14	text (number, Min: 1.5, Max: 6)
234	ast_d1	AST day 1	text (integer, Min: 0, Max: 20000)
235	ast_d2	AST day 2	text (integer, Min: 0, Max: 20000)
236	ast_d3	AST day 3	text (integer, Min: 0, Max: 20000)
237	ast_d4	AST day 4	text (integer, Min: 0, Max: 20000)
238	ast_d5	AST day 5	text (integer, Min: 0, Max: 20000)
239	ast_d6	AST day 6	text (integer, Min: 0, Max: 20000)
240	ast_d7	AST day 7	text (integer, Min: 0, Max: 20000)
241	ast_d8	AST day 8	text (integer, Min: 0, Max: 20000)
242	ast_d9	AST day 9	text (integer, Min: 0, Max: 20000)
243	ast_d10	AST day 10	text (integer, Min: 0, Max: 20000)
244	ast_d11	AST day 11	text (integer, Min: 0, Max: 20000)
245	ast_d12	AST day 12	text (integer, Min: 0, Max: 20000)
246	ast_d13	AST day 13	text (integer, Min: 0, Max: 20000)
247	ast_d14	AST day 14	text (integer, Min: 0, Max: 20000)
248	alt_d1	ALT day 1	text (integer, Min: 0, Max: 20000)
249	alt_d2	ALT day 2	text (integer, Min: 0, Max: 20000)
250	alt_d3	ALT day 3	text (integer, Min: 0, Max: 20000)
251	alt_d4	ALT day 4	text (integer, Min: 0, Max: 20000)
252	alt_d5	ALT day 5	text (integer, Min: 0, Max: 20000)
253	alt_d6	ALT day 6	text (integer, Min: 0, Max: 20000)
254	alt_d7	ALT day 7	text (integer, Min: 0, Max: 20000)
255	alt_d8	ALT day 8	text (integer, Min: 0, Max: 20000)
256	alt_d9	ALT day 9	text (integer, Min: 0, Max: 20000)
257	alt_d10	ALT day 10	text (integer, Min: 0, Max: 20000)
258	alt_d11	ALT day 11	text (integer, Min: 0, Max: 20000)
259	alt_d12	ALT day 12	text (integer, Min: 0, Max: 20000)
260	alt_d13	ALT day 13	text (integer, Min: 0, Max: 20000)
261	alt_d14	ALT day 14	text (integer, Min: 0, Max: 20000)
262	bilirubin_d1	Total bilirubin day 1	text (number, Min: 0.1, Max: 30)
263	bilirubin_d2	Total bilirubin day 2	text (number, Min: 0.1, Max: 30)
264	bilirubin_d3	Total bilirubin day 3	text (number, Min: 0.1, Max: 30)
265	bilirubin_d4	Total bilirubin day 4	text (number, Min: 0.1, Max: 30)
266	bilirubin_d5	Total bilirubin day 5	text (number, Min: 0.1, Max: 30)

267	bilirubin_d6	Total bilirubin day 6	text (number, Min: 0.1, Max: 30)
268	bilirubin_d7	Total bilirubin day 7	text (number, Min: 0.1, Max: 30)
269	bilirubin_d8	Total bilirubin day 8	text (number, Min: 0.1, Max: 30)
270	bilirubin_d9	Total bilirubin day 9	text (number, Min: 0.1, Max: 30)
271	bilirubin_d10	Total bilirubin day 10	text (number, Min: 0.1, Max: 30)
272	bilirubin_d11	Total bilirubin day 11	text (number, Min: 0.1, Max: 30)
273	bilirubin_d12	Total bilirubin day 12	text (number, Min: 0.1, Max: 30)
274	bilirubin_d13	Total bilirubin day 13	text (number, Min: 0.1, Max: 30)
275	bilirubin_d14	Total bilirubin day 14	text (number, Min: 0.1, Max: 30)
276	lactate_d1	Lactate day 1	text (number, Min: 0.1, Max: 30)
277	lactate_d2	Lactate day 2	text (number, Min: 0.1, Max: 30)
278	lactate_d3	Lactate day 3	text (number, Min: 0.1, Max: 30)
279	lactate_d4	Lactate day 4	text (number, Min: 0.1, Max: 30)
280	lactate_d5	Lactate day 5	text (number, Min: 0.1, Max: 30)
281	lactate_d6	Lactate day 6	text (number, Min: 0.1, Max: 30)
282	lactate_d7	Lactate day 7	text (number, Min: 0.1, Max: 30)
283	lactate_d8	Lactate day 8	text (number, Min: 0.1, Max: 30)
284	lactate_d9	Lactate day 9	text (number, Min: 0.1, Max: 30)
285	lactate_d10	Lactate day 10	text (number, Min: 0.1, Max: 30)
286	lactate_d11	Lactate day 11	text (number, Min: 0.1, Max: 30)
287	lactate_d12	Lactate day 12	text (number, Min: 0.1, Max: 30)
288	lactate_d13	Lactate day 13	text (number, Min: 0.1, Max: 30)
289	lactate_d14	Lactate day 14	text (number, Min: 0.1, Max: 30)
290	crp_d1	CRP day 1	text (number, Min: 0, Max: 1000)
291	crp_d2	CRP day 2	text (number, Min: 0, Max: 10000)
292	crp_d3	CRP day 3	text (number, Min: 0, Max: 1000)
293	crp_d4	CRP day 4	text (number, Min: 0, Max: 1000)
294	crp_d5	CRP day 5	text (number, Min: 0, Max: 1000)
295	crp_d6	CRP day 6	text (number, Min: 0, Max: 1000)
296	crp_d7	CRP day 7	text (number, Min: 0, Max: 1000)
297	crp_d8	CRP day 8	text (number, Min: 0, Max: 1000)
298	crp_d9	CRP day 9	text (number, Min: 0, Max: 1000)
299	crp_d10	CRP day 10	text (number, Min: 0, Max: 1000)
300	crp_d11	CRP day 11	text (number, Min: 0, Max: 1000)
301	crp_d12	CRP day 12	text (number, Min: 0, Max: 1000)
302	crp_d13	CRP day 13	text (number, Min: 0, Max: 1000)
303	crp_d14	CRP day 14	text (number, Min: 0, Max: 1000)
304	il_6_d1	IL-6 day 1	text (number, Min: 0, Max: 10000)
305	il_6_d2	IL-6 day 2	text (number, Min: 0, Max: 10000)
306	il_6_d3	IL-6 day 3	text (number, Min: 0, Max: 10000)
307	il_6_d4	IL-6 day 4	text (number, Min: 0, Max: 10000)
308	il_6_d5	IL-6 day 5	text (number, Min: 0, Max: 10000)
309	il_6_d6	IL-6 day 6	text (number, Min: 0, Max: 10000)
310	il_6_d7	IL-6 day 7	text (number, Min: 0, Max: 10000)
311	il_6_d8	IL-6 day 8	text (number, Min: 0, Max: 10000)
312	il_6_d9	IL-6 day 9	text (number, Min: 0, Max: 10000)
313	il_6_d10	IL-6 day 10	text (number, Min: 0, Max: 10000)
314	il_6_d11	IL-6 day 11	text (number, Min: 0, Max: 10000)

315	il_6_d12	IL-6 day 12	text (number, Min: 0, Max: 10000)
316	il_6_d13	IL-6 day 13	text (number, Min: 0, Max: 10000)
317	il_6_d14	IL-6 day 14	text (number, Min: 0, Max: 10000)
318	arterial_ph_d1	Arterial pH day 1	text (number, Min: 6.8, Max: 7.6)
319	arterial_ph_d2	Arterial pH day 2	text (number, Min: 6.8, Max: 7.6)
320	arterial_ph_d3	Arterial pH day 3	text (number, Min: 6.8, Max: 7.6)
321	arterial_ph_d4	Arterial pH day 4	text (number, Min: 6.8, Max: 7.6)
322	arterial_ph_d5	Arterial pH day 5	text (number, Min: 6.8, Max: 7.6)
323	arterial_ph_d6	Arterial pH day 6	text (number, Min: 6.8, Max: 7.6)
324	arterial_ph_d7	Arterial pH day 7	text (number, Min: 6.8, Max: 7.6)
325	arterial_ph_d8	Arterial pH day 8	text (number, Min: 6.8, Max: 7.6)
326	arterial_ph_d9	Arterial pH day 9	text (number, Min: 6.8, Max: 7.6)
327	arterial_ph_d10	Arterial pH day 10	text (number, Min: 6.8, Max: 7.6)
328	arterial_ph_d11	Arterial pH day 11	text (number, Min: 6.8, Max: 7.6)
329	arterial_ph_d12	Arterial pH day 12	text (number, Min: 6.8, Max: 7.6)
330	arterial_ph_d13	Arterial pH day 13	text (number, Min: 6.8, Max: 7.6)
331	arterial_ph_d14	Arterial pH day 14	text (number, Min: 6.8, Max: 7.6)
332	fibrinogen_d1	Fibrinogen day 1	text (integer, Min: 0, Max: 10000)
333	fibrinogen_d2	Fibrinogen day 2	text (integer, Min: 0, Max: 10000)
334	fibrinogen_d3	Fibrinogen day 3	text (integer, Min: 0, Max: 10000)
335	fibrinogen_d4	Fibrinogen day 4	text (number, Min: 0, Max: 10000)
336	fibrinogen_d5	Fibrinogen day 5	text (integer, Min: 0, Max: 10000)
337	fibrinogen_d6	Fibrinogen day 6	text (integer, Min: 0, Max: 10000)
338	fibrinogen_d7	Fibrinogen day 7	text (integer, Min: 0, Max: 10000)
339	fibrinogen_d8	Fibrinogen day 8	text (integer, Min: 0, Max: 10000)
340	fibrinogen_d9	Fibrinogen day 9	text (integer, Min: 0, Max: 10000)
341	fibrinogen_d10	Fibrinogen day 10	text (integer, Min: 0, Max: 10000)
342	fibrinogen_d11	Fibrinogen day 11	text (integer, Min: 0, Max: 10000)
343	fibrinogen_d12	Fibrinogen day 12	text (integer, Min: 0, Max: 10000)
344	fibrinogen_d13	Fibrinogen day 13	text (integer, Min: 0, Max: 10000)
345	fibrinogen_d14	Fibrinogen day 14	text (integer, Min: 0, Max: 10000)
346	d_dimer_d1	D dimer day 1	text (number, Min: 0, Max: 20000)
347	d_dimer_d2	D dimer day 2	text (number, Min: 0, Max: 20000)
348	d_dimer_d3	D dimer day 3	text (number, Min: 0, Max: 20000)
349	d_dimer_d4	D dimer day 4	text (number, Min: 0, Max: 20000)
350	d_dimer_d5	D dimer day 5	text (number, Min: 0, Max: 20000)
351	d_dimer_d6	D dimer day 6	text (number, Min: 0, Max: 20000)
352	d_dimer_d7	D dimer day 7	text (number, Min: 0, Max: 20000)
353	d_dimer_d8	D dimer day 8	text (number, Min: 0, Max: 20000)
354	d_dimer_d9	D dimer day 9	text (number, Min: 0, Max: 20000)
355	d_dimer_d10	D dimer day 10	text (number, Min: 0, Max: 20000)
356	d_dimer_d11	D dimer day 11	text (number, Min: 0, Max: 20000)
357	d_dimer_d12	D dimer day 12	text (number, Min: 0, Max: 20000)
358	d_dimer_d13	D dimer day 13	text (number, Min: 0, Max: 20000)
359	d_dimer_d14	D dimer day 14	text (number, Min: 0, Max: 20000)
360	ferritin_d1	Ferritin Day 1	text (number, Min: 0, Max: 500000)
361	ferritin_d2	Ferritin Day 2	text (number, Min: 0, Max: 500000)
362	ferritin_d3	Ferritin Day 3	text (number, Min: 0, Max: 500000)

363	ferritin_d4	Ferritin Day 4	text (number, Min: 0, Max: 500000)
364	ferritin_d5	Ferritin Day 5	text (number, Min: 0, Max: 500000)
365	ferritin_d6	Ferritin Day 6	text (number, Min: 0, Max: 500000)
366	ferritin_d7	Ferritin Day 7	text (number, Min: 0, Max: 500000)
367	ferritin_d8	Ferritin Day 8	text (number, Min: 0, Max: 500000)
368	ferritin_d9	Ferritin Day 9	text (number, Min: 0, Max: 500000)
369	ferritin_d10	Ferritin Day 10	text (number, Min: 0, Max: 500000)
370	ferritin_d11	Ferritin Day 11	text (number, Min: 0, Max: 500000)
371	ferritin_d12	Ferritin Day 12	text (number, Min: 0, Max: 500000)
372	ferritin_d13	Ferritin Day 13	text (number, Min: 0, Max: 500000)
373	ferritin_d14	Ferritin Day 14	text (number, Min: 0, Max: 500000)
374	trop_t_d1	Troponin T day 1	text (number, Min: 0, Max: 30000)
375	trop_t_d2	Troponin T day 2	text (number, Min: 0, Max: 30000)
376	trop_t_d3	Troponin T day 3	text (number, Min: 0, Max: 30000)
377	trop_t_d4	Troponin T day 4	text (number, Min: 0, Max: 30000)
378	trop_t_d5	Troponin T day 5	text (number, Min: 0, Max: 30000)
379	trop_t_d6	Troponin T day 6	text (number, Min: 0, Max: 30000)
380	trop_t_d7	Troponin T day 7	text (number, Min: 0, Max: 30000)
381	trop_t_d8	Troponin T day 8	text (number, Min: 0, Max: 30000)
382	trop_t_d9	Troponin T day 9	text (number, Min: 0, Max: 30000)
383	trop_t_d10	Troponin T day 10	text (number, Min: 0, Max: 30000)
384	trop_t_d11	Troponin T day 11	text (number, Min: 0, Max: 30000)
385	trop_t_d12	Troponin T day 12	text (number, Min: 0, Max: 30000)
386	trop_t_d13	Troponin T day 13	text (number, Min: 0, Max: 30000)
387	trop_t_d14	Troponin T day 14	text (number, Min: 0, Max: 30000)
388	trop_i_d1	Troponin I day 1	text (number, Min: 0, Max: 30000)
389	trop_i_d2	Troponin I day 2	text (number, Min: 0, Max: 30000)
390	trop_i_d3	Troponin I day 3	text (number, Min: 0, Max: 30000)
391	trop_i_d4	Troponin I day 4	text (number, Min: 0, Max: 30000)
392	trop_i_d5	Troponin I day 5	text (number, Min: 0, Max: 30000)
393	trop_i_d6	Troponin I day 6	text (number, Min: 0, Max: 30000)
394	trop_i_d7	Troponin I day 7	text (number, Min: 0, Max: 30000)
395	trop_i_d8	Troponin I day 8	text (number, Min: 0, Max: 30000)
396	trop_i_d9	Troponin I day 9	text (number, Min: 0, Max: 30000)
397	trop_i_d10	Troponin I day 10	text (number, Min: 0, Max: 30000)
398	trop_i_d11	Troponin I day 11	text (number, Min: 0, Max: 30000)
399	trop_i_d12	Troponin I day 12	text (number, Min: 0, Max: 30000)
400	trop_i_d13	Troponin I day 13	text (number, Min: 0, Max: 30000)
401	trop_i_d14	Troponin I day 14	text (number, Min: 0, Max: 30000)
402	pao2_d1	PaO2 day 1*	text (number, Min: 30, Max: 500)
403	pao2_d2	PaO2 day 2*	text (number, Min: 30, Max: 500)
404	pao2_d3	PaO2 day 3*	text (number, Min: 30, Max: 500)
405	pao2_d4	PaO2 day 4*	text (number, Min: 30, Max: 500)
406	pao2_d5	PaO2 day 5*	text (number, Min: 30, Max: 500)
407	pao2_d6	PaO2 day 6*	text (number, Min: 30, Max: 500)
408	pao2_d7	PaO2 day 7*	text (number, Min: 30, Max: 500)
409	pao2_d8	PaO2 day 8*	text (number, Min: 30, Max: 500)
410	pao2_d9	PaO2 day 9*	text (number, Min: 30, Max: 500)

411	pao2_d10	PaO2 day 10*	text (number, Min: 30, Max: 500)
412	pao2_d11	PaO2 day 11*	text (number, Min: 30, Max: 500)
413	pao2_d12	PaO2 day 12*	text (number, Min: 30, Max: 500)
414	pao2_d13	PaO2 day 13*	text (number, Min: 30, Max: 500)
415	pao2_d14	PaO2 day 14*	text (number, Min: 30, Max: 500)
416	fio2_d1	FiO2 day 1	text (number, Min: 0, Max: 100)
417	fio2_d2	FiO2 day 2	text (number, Min: 0, Max: 100)
418	fio2_d3	FiO2 day 3	text (number, Min: 0, Max: 100)
419	fio2_d4	FiO2 day 4	text (number, Min: 0, Max: 100)
420	fio2_d5	FiO2 day 5	text (number, Min: 0, Max: 100)
421	fio2_d6	FiO2 day 6	text (number, Min: 0, Max: 100)
422	fio2_d7	FiO2 day 7	text (number, Min: 0, Max: 100)
423	fio2_d8	FiO2 day 8	text (number, Min: 0, Max: 100)
424	fio2_d9	FiO2 day 9	text (number, Min: 0, Max: 100)
425	fio2_d10	FiO2 day 10	text (number, Min: 0, Max: 100)
426	fio2_d11	FiO2 day 11	text (number, Min: 0, Max: 100)
427	fio2_d12	FiO2 day 12	text (number, Min: 0, Max: 100)
428	fio2_d13	FiO2 day 13	text (number, Min: 0, Max: 100)
429	fio2_d14	FiO2 day 14	text (number, Min: 0, Max: 100)
430	peep_d1	PEEP day 1	text (integer, Min: 0, Max: 40)
431	peep_d2	PEEP day 2	text (integer, Min: 0, Max: 40)
432	peep_d3	PEEP day 3	text (integer, Min: 0, Max: 40)
433	peep_d4	PEEP day 4	text (integer, Min: 0, Max: 40)
434	peep_d5	PEEP day 5	text (integer, Min: 0, Max: 40)
435	peep_d6	PEEP day 6	text (integer, Min: 0, Max: 40)
436	peep_d7	PEEP day 7	text (integer, Min: 0, Max: 40)
437	peep_d8	PEEP day 8	text (integer, Min: 0, Max: 40)
438	peep_d9	PEEP day 9	text (integer, Min: 0, Max: 40)
439	peep_d10	PEEP day 10	text (integer, Min: 0, Max: 40)
440	peep_d11	PEEP day 11	text (integer, Min: 0, Max: 40)
441	peep_d12	PEEP day 12	text (integer, Min: 0, Max: 40)
442	peep_d13	PEEP day 13	text (integer, Min: 0, Max: 40)
443	peep_d14	PEEP day 14	text (integer, Min: 0, Max: 40)
444	uop_d1	24h Urine Output Day 1	text (integer, Min: 0, Max: 12000)
445	uop_d2	24h Urine Output Day 2	text (integer, Min: 0, Max: 12000)
446	uop_d3	24h Urine Output Day 3	text (integer, Min: 0, Max: 12000)
447	uop_d4	24h Urine Output Day 4	text (integer, Min: 0, Max: 12000)
448	uop_d5	24h Urine Output Day 5	text (integer, Min: 0, Max: 12000)
449	uop_d6	24h Urine Output Day 6	text (integer, Min: 0, Max: 12000)
450	uop_d7	24h Urine Output Day 7	text (integer, Min: 0, Max: 12000)
451	uop_d8	24h Urine Output Day 8	text (integer, Min: 0, Max: 12000)
452	uop_d9	24h Urine Output Day 9	text (integer, Min: 0, Max: 12000)
453	uop_d10	24h Urine Output Day 10	text (integer, Min: 0, Max: 12000)
454	uop_d11	24h Urine Output Day 11	text (integer, Min: 0, Max: 12000)
455	uop_d12	24h Urine Output Day 12	text (integer, Min: 0, Max: 12000)
456	uop_d13	24h Urine Output Day 13	text (integer, Min: 0, Max: 12000)
457	uop_d14	24h Urine Output Day 14	text (integer, Min: 0, Max: 12000)
458	max_vi_d1	Max #vasopressors/inotropes day 1	text (integer, Min: 0, Max: 6)

459	max_vi_d2	Max #vasopressors/inotropes day 2	text (integer, Min: 0, Max: 6)						
460	max_vi_d3	Max #vasopressors/inotropes day 3	text (integer, Min: 0, Max: 6)						
461	max_vi_d4	Max #vasopressors/inotropes day 4	text (integer, Min: 0, Max: 6)						
462	max_vi_d5	Max #vasopressors/inotropes day 5	text (integer, Min: 0, Max: 6)						
463	max_vi_d6	Max #vasopressors/inotropes day 6	text (integer, Min: 0, Max: 6)						
464	max_vi_d7	Max #vasopressors/inotropes day 7	text (integer, Min: 0, Max: 6)						
465	max_vi_d8	Max #vasopressors/inotropes day 8	text (integer, Min: 0, Max: 6)						
466	max_vi_d9	Max #vasopressors/inotropes day 9	text (integer, Min: 0, Max: 6)						
467	max_vi_d10	Max #vasopressors/inotropes day 10	text (integer, Min: 0, Max: 6)						
468	max_vi_d11	Max #vasopressors/inotropes day 11	text (integer, Min: 0, Max: 6)						
469	max_vi_d12	Max #vasopressors/inotropes day 12	text (integer, Min: 0, Max: 6)						
470	max_vi_d13	Max #vasopressors/inotropes day 13	text (integer, Min: 0, Max: 6)						
471	max_vi_d14	Max #vasopressors/inotropes day 14	text (integer, Min: 0, Max: 6)						
472	notes_lab	Additional Notes (if any)	notes						
473	longitudinal_data_on_labs_and_physiologic_parameters_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr> <td>0</td> <td>Incomplete</td> </tr> <tr> <td>1</td> <td>Unverified</td> </tr> <tr> <td>2</td> <td>Complete</td> </tr> </table>	0	Incomplete	1	Unverified	2	Complete
0	Incomplete								
1	Unverified								
2	Complete								

Instrument: **Acute Organ Injury in the First 14 Days Following ICU Admission** (acute_organ_injury_in_the_first_14_days_following)

[^ Collapse](#)

474	ards	Section Header: <i>The questions below refer to the first 14 days following ICU admission. Even if the patient was in the ICU for less than 14 days and was transferred to the hospital floor, continue to enter data for the full 14 days or until discharged from the hospital (whichever occurs first)Each of the acute organ injuries in this section is defined based on clinical suspicion by the treating provider(s)</i> Did ARDS occur within the first 14 days following ICU admission?ARDS defined as per chart review/progress notes	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No								
1	Yes														
0	No														
475	date_ards Show the field ONLY if: [ards] = '1'	Date ARDS was first confirmed/suspectedDo not enter any dates prior to ICU Day1; if ARDS started prior to ICU Day1 and was still present on ICU Day1, enter the ICU Day1 date	text (date_mdy), Required												
476	new_chf	New congestive heart failure (CHF) in the first 14 days following ICU admission?	radio, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>2</td> <td>No</td> </tr> <tr> <td>3</td> <td>N/A (CHF present at baseline)</td> </tr> </table>	1	Yes	2	No	3	N/A (CHF present at baseline)						
1	Yes														
2	No														
3	N/A (CHF present at baseline)														
477	ejection_fraction Show the field ONLY if: [new_chf] = '1'	Enter the left ventricular ejection fraction at the time of the new heart failure-Enter as an integer (0-100) and without % sign-If unavailable, enter, "N/A"	text, Required												
478	date_chf Show the field ONLY if: [new_chf] = '1'	Date CHF was first confirmed/suspectedDo not enter any dates prior to ICU Day1; if CHF started prior to ICU Day1 and was still present on ICU Day1, enter the ICU Day1 date	text (date_mdy), Required												
479	arrhythmia	Arrhythmia during the first 14 days following ICU admission?Do not enter any dates prior to ICU Day1; if arrhythmia started prior to ICU Day1 and was still present on ICU Day1, enter the ICU Day1 date	checkbox, Required <table border="1"> <tr> <td>1</td> <td>arrhythmia__1</td> <td>Atrial fibrillation/flutter</td> </tr> <tr> <td>2</td> <td>arrhythmia__2</td> <td>Ventricular tachycardia (VT)</td> </tr> <tr> <td>3</td> <td>arrhythmia__3</td> <td>Ventricular fibrillation</td> </tr> <tr> <td>4</td> <td>arrhythmia__4</td> <td>None of the above</td> </tr> </table> Field Annotation: @NONEOFTHEABOVE=4	1	arrhythmia__1	Atrial fibrillation/flutter	2	arrhythmia__2	Ventricular tachycardia (VT)	3	arrhythmia__3	Ventricular fibrillation	4	arrhythmia__4	None of the above
1	arrhythmia__1	Atrial fibrillation/flutter													
2	arrhythmia__2	Ventricular tachycardia (VT)													
3	arrhythmia__3	Ventricular fibrillation													
4	arrhythmia__4	None of the above													
480	sustained_vt Show the field ONLY if: [arrhythmia(2)] = '1'	Sustained or non-sustained VT?Sustained is defined as requiring shocks or anti-arrhythmic therapy	radio, Required <table border="1"> <tr> <td>1</td> <td>Sustained</td> </tr> <tr> <td>2</td> <td>Non-sustained</td> </tr> </table>	1	Sustained	2	Non-sustained								
1	Sustained														
2	Non-sustained														

481	date_afib Show the field ONLY if: [arrhythmia(1)] = '1'	Date atrial fibrillation/flutter first developedDo not enter any dates prior to ICU Day1; if atrial fibrillation/flutter started prior to ICU Day1 and was still present on ICU Day1, enter the ICU Day1 date	text (date_mdy), Required																								
482	date_vt Show the field ONLY if: [arrhythmia(2)] = '1'	Date VT first developedDo not enter any dates prior to ICU Day1; if VT started prior to ICU Day1 and was still present on ICU Day1, enter the ICU Day1 date	text (date_mdy), Required																								
483	date_vfib Show the field ONLY if: [arrhythmia(3)] = '1'	Date ventricular fibrillation first developedDo not enter any dates prior to ICU Day1; if ventricular fibrillation started prior to ICU Day1 and was still present on ICU Day1, enter the ICU Day1 date	text (date_mdy), Required																								
484	myopericard	New myocarditis and/or pericarditis in the first 14 days following ICU admission?Defined as per chart review	radio, Required <table border="1"> <tr><td>1</td><td>Myocarditis only</td></tr> <tr><td>2</td><td>Pericarditis only</td></tr> <tr><td>3</td><td>Both</td></tr> <tr><td>4</td><td>Neither</td></tr> </table>	1	Myocarditis only	2	Pericarditis only	3	Both	4	Neither																
1	Myocarditis only																										
2	Pericarditis only																										
3	Both																										
4	Neither																										
485	date_mycoperi Show the field ONLY if: [myopericard] = '1' or [myopericard] = '2' or [myopericard] = '3'	Date myocarditis or pericarditis first developedDo not enter any dates prior to ICU Day1; if myocarditis or pericarditis started prior to ICU Day1 and was still present on ICU Day1, enter the ICU Day1 date	text (date_mdy), Required																								
486	card_arrest	Cardiac arrest in the first 14 days following ICU admission? Refers to UNEXPECTED cessation of cardiac activity associated with loss of a pulse, for which CPR would normally be administered (whether or not CPR was actually administered). Thus, patients who did not receive CPR due to DNR status SHOULD be included as long as the cardiac arrest was unexpected. However, patients whose death was expected (e.g., if the patient was terminally extubated and/or their goals of care were comfort measures only) should NOT be included.	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No																				
1	Yes																										
0	No																										
487	cpr Show the field ONLY if: [card_arrest] = '1'	Was CPR administered?*Some hospitals have prohibited CPR in COVID patients to protect healthcare workers	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>2</td><td>No because they were DNR</td></tr> <tr><td>3</td><td>No because of hospital policy*</td></tr> </table>	1	Yes	2	No because they were DNR	3	No because of hospital policy*																		
1	Yes																										
2	No because they were DNR																										
3	No because of hospital policy*																										
488	date_arrest Show the field ONLY if: [card_arrest] = '1'	Date of first cardiac arrest	text (date_mdy), Required																								
489	initial_rhythm Show the field ONLY if: [cpr] = '1'	Initial cardiac rhythm	radio, Required <table border="1"> <tr><td>1</td><td>Ventricular fibrillation</td></tr> <tr><td>2</td><td>Pulseless ventricular tachycardia (VT)</td></tr> <tr><td>3</td><td>Pulseless electrical activity (PEA)</td></tr> <tr><td>4</td><td>Asystole</td></tr> <tr><td>5</td><td>Other/Unknown</td></tr> </table>	1	Ventricular fibrillation	2	Pulseless ventricular tachycardia (VT)	3	Pulseless electrical activity (PEA)	4	Asystole	5	Other/Unknown														
1	Ventricular fibrillation																										
2	Pulseless ventricular tachycardia (VT)																										
3	Pulseless electrical activity (PEA)																										
4	Asystole																										
5	Other/Unknown																										
490	cpr_therapies Show the field ONLY if: [cpr] = '1'	Therapies administered during CPR (select all that apply)	checkbox, Required <table border="1"> <tr><td>1</td><td>cpr_therapies__1</td><td>Defibrillation</td></tr> <tr><td>2</td><td>cpr_therapies__2</td><td>Epinephrine (Epi)</td></tr> <tr><td>3</td><td>cpr_therapies__3</td><td>Vasopressin</td></tr> <tr><td>4</td><td>cpr_therapies__4</td><td>Adenosine</td></tr> <tr><td>5</td><td>cpr_therapies__5</td><td>Amiodarone</td></tr> <tr><td>6</td><td>cpr_therapies__6</td><td>Lidocaine</td></tr> <tr><td>7</td><td>cpr_therapies__7</td><td>Atropine</td></tr> <tr><td>8</td><td>cpr_therapies__8</td><td>None of the above (chest compressions alone)</td></tr> </table>	1	cpr_therapies__1	Defibrillation	2	cpr_therapies__2	Epinephrine (Epi)	3	cpr_therapies__3	Vasopressin	4	cpr_therapies__4	Adenosine	5	cpr_therapies__5	Amiodarone	6	cpr_therapies__6	Lidocaine	7	cpr_therapies__7	Atropine	8	cpr_therapies__8	None of the above (chest compressions alone)
1	cpr_therapies__1	Defibrillation																									
2	cpr_therapies__2	Epinephrine (Epi)																									
3	cpr_therapies__3	Vasopressin																									
4	cpr_therapies__4	Adenosine																									
5	cpr_therapies__5	Amiodarone																									
6	cpr_therapies__6	Lidocaine																									
7	cpr_therapies__7	Atropine																									
8	cpr_therapies__8	None of the above (chest compressions alone)																									

491	duration_cpr Show the field ONLY if: [cpr] = '1'	Total duration of the code (in minutes)If unknown, enter, "N/A"	text, Required																		
492	newinfection	New infection in the first 14 days following ICU admission? Defined as a suspected or confirmed new infection other than COVID-19 that developed after admission to the ICUShould be primarily based on culture data (e.g., sputum, blood, urine, and stool), though other infections can also be included (e.g., cellulitis, abscess) if there was a strong clinical suspicion, even in the absence of positive culturesDo not enter any dates prior to ICU Day1; if the new infection started prior to ICU Day1 and was still present on ICU Day1, enter the ICU Day1 date	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				
493	type_infection Show the field ONLY if: [newinfection] = '1'	What infection(s)?	checkbox, Required <table border="1"> <tr> <td>1</td> <td>type_infection__1</td> <td>Pneumonia (including ventilator-associated pneumonia)</td> </tr> <tr> <td>2</td> <td>type_infection__2</td> <td>Urosepsis</td> </tr> <tr> <td>3</td> <td>type_infection__3</td> <td>Biliary sepsis</td> </tr> <tr> <td>4</td> <td>type_infection__4</td> <td>Bacteremia</td> </tr> <tr> <td>5</td> <td>type_infection__5</td> <td>Other</td> </tr> </table>	1	type_infection__1	Pneumonia (including ventilator-associated pneumonia)	2	type_infection__2	Urosepsis	3	type_infection__3	Biliary sepsis	4	type_infection__4	Bacteremia	5	type_infection__5	Other			
1	type_infection__1	Pneumonia (including ventilator-associated pneumonia)																			
2	type_infection__2	Urosepsis																			
3	type_infection__3	Biliary sepsis																			
4	type_infection__4	Bacteremia																			
5	type_infection__5	Other																			
494	other_infxn Show the field ONLY if: [type_infection(5)] = '1'	Enter other infection	text, Required																		
495	date_pneum Show the field ONLY if: [type_infection(1)] = '1'	Date pneumonia developedDo not enter any dates prior to ICU Day1; if pneumonia started prior to ICU Day1 and was still present on ICU Day1, enter the ICU Day1 date	text (date_mdy), Required																		
496	date_urosep Show the field ONLY if: [type_infection(2)] = '1'	Date urosepsis developedDo not enter any dates prior to ICU Day1; if urosepsis started prior to ICU Day1 and was still present on ICU Day1, enter the ICU Day1 date	text (date_mdy), Required																		
497	date_biliary Show the field ONLY if: [type_infection(3)] = '1'	Date biliary sepsis developedDo not enter any dates prior to ICU Day1; if biliary sepsis started prior to ICU Day1 and was still present on ICU Day1, enter the ICU Day1 date	text (date_mdy), Required																		
498	date_bacteremia Show the field ONLY if: [type_infection(4)] = '1'	Date bacteremia developedDo not enter any dates prior to ICU Day1; if bacteremia started prior to ICU Day1 and was still present on ICU Day1, enter the ICU Day1 date	text (date_mdy), Required																		
499	date_otherinfxn Show the field ONLY if: [type_infection(5)] = '1'	Date other infection developedDo not enter any dates prior to ICU Day1; if other infection started prior to ICU Day1 and was still present on ICU Day1, enter the ICU Day1 date	text (date_mdy), Required																		
500	thrombosis	New thromboembolic event in the first 14 days following ICU admission (select all that apply)	checkbox, Required <table border="1"> <tr> <td>1</td> <td>thrombosis__1</td> <td>Deep venous thrombosis (DVT)</td> </tr> <tr> <td>2</td> <td>thrombosis__2</td> <td>Pulmonary embolism (PE)</td> </tr> <tr> <td>3</td> <td>thrombosis__3</td> <td>Stroke</td> </tr> <tr> <td>4</td> <td>thrombosis__4</td> <td>Heparin-induced thrombocytopenia (H.I.T.)</td> </tr> <tr> <td>5</td> <td>thrombosis__5</td> <td>Other thromboembolic event</td> </tr> <tr> <td>6</td> <td>thrombosis__6</td> <td>None of the above</td> </tr> </table> Field Annotation: @NONEOFTHEABOVE=6	1	thrombosis__1	Deep venous thrombosis (DVT)	2	thrombosis__2	Pulmonary embolism (PE)	3	thrombosis__3	Stroke	4	thrombosis__4	Heparin-induced thrombocytopenia (H.I.T.)	5	thrombosis__5	Other thromboembolic event	6	thrombosis__6	None of the above
1	thrombosis__1	Deep venous thrombosis (DVT)																			
2	thrombosis__2	Pulmonary embolism (PE)																			
3	thrombosis__3	Stroke																			
4	thrombosis__4	Heparin-induced thrombocytopenia (H.I.T.)																			
5	thrombosis__5	Other thromboembolic event																			
6	thrombosis__6	None of the above																			
501	other_embolic Show the field ONLY if: [thrombosis(5)] = '1'	Enter other thromboembolic event	text, Required																		
502	date_dvt Show the field ONLY if: [thrombosis(1)] = '1'	Date of DVTD do not enter any dates prior to ICU Day1; if the DVT started prior to ICU Day1 and was still present on ICU Day1, enter the ICU Day1 date	text (date_mdy), Required																		

503	dvt_confirmed Show the field ONLY if: [thrombosis(1)] = '1'	DVT confirmed on diagnostic imaging (e.g., ultrasound)?	yesno, Required 1 Yes 0 No
504	dvt_confirmed_2 Show the field ONLY if: [thrombosis(1)] = '1'	Location of the DVT (select all that apply)Lower extremity PROXIMAL refers to the thigh/knee (e.g., inferior vena cava, iliac, common femoral/superficial femoral/deep femoral, or popliteal veins)Lower extremity DISTAL refers to the calf (e.g., peroneal, tibial, gastrocnemius, soleal, calf perforator veins)Upper extremity or neck includes the internal jugular and subclavian veinsOther includes abdominal vein thrombosis, cerebral venous sinus thrombosis, and others Superficial Veins (if in isolation, enter as "other thrombosis" not DVT) Great saphenous vein Small saphenous vein Reticular veins	checkbox, Required 1 dvt_confirmed_2__1 Lower extremity PROXIMAL 2 dvt_confirmed_2__2 Lower extremity DISTAL 3 dvt_confirmed_2__3 Upper extremity or neck 4 dvt_confirmed_2__4 Other
505	date_pe Show the field ONLY if: [thrombosis(2)] = '1'	Date of Pulmonary Embolism (PE)Do not enter any dates prior to ICU Day1; if the PE started prior to ICU Day1 and was still present on ICU Day1, enter the ICU Day1 date	text (date_mdy), Required
506	pe_confirmed Show the field ONLY if: [thrombosis(2)] = '1'	Was the pulmonary embolism confirmed on imaging?	radio, Required 1 Yes - by CT scan 2 Yes - by V/Q scan (or other modality) 3 No, the diagnosis was based on clinical suspicion only
507	pe_location Show the field ONLY if: [pe_confirmed] = '1'	What was the location of the pulmonary embolism?	radio, Required 1 Proximal (lobar or segmental pulmonary vessels) 2 Distal (subsegmental pulmonary vessels) 3 Both proximal and distal
508	date_stroke Show the field ONLY if: [thrombosis(3)] = '1'	Date of strokeDo not enter any dates prior to ICU Day1; if the stroke started prior to ICU Day1 and was still present on ICU Day1, enter the ICU Day1 date	text (date_mdy), Required
509	stroke_confirmed Show the field ONLY if: [thrombosis(3)] = '1'	Was the stroke confirmed on brain imaging?	yesno, Required 1 Yes 0 No
510	date_hit Show the field ONLY if: [thrombosis(4)] = '1'	Date HIT developedDo not enter any dates prior to ICU Day1; if the HIT started prior to ICU Day1 and was still present on ICU Day1, enter the ICU Day1 date	text (date_mdy), Required
511	thrombosis_hit Show the field ONLY if: [thrombosis(4)] = '1'	Thromboembolic event(s) in association with HIT?	yesno, Required 1 Yes 0 No
512	thrombosis_events_hit Show the field ONLY if: [thrombosis_hit] = '1'	Enter the thromboembolic event(s) in association with HIT?	text, Required
513	date_othereambo Show the field ONLY if: [thrombosis(5)] = '1'	Date of other thromboembolic eventDo not enter any dates prior to ICU Day1; if the other thromboembolic event started prior to ICU Day1 and was still present on ICU Day1, enter the ICU Day1 date	text (date_mdy), Required
514	new_coagulopathy Show the field ONLY if: [new_coagulopathy] = '1'	New coagulopathy in the first 14 days following ICU admission-Defined as INR>2 or PTT>40 in the absence of therapeutic anticoagulation-If the patient was receiving therapeutic anticoagulation, select "no"	yesno, Required 1 Yes 0 No
515	date_coagulopathy Show the field ONLY if: [new_coagulopathy] = '1'	Date coagulopathy developedDo not enter any dates prior to ICU Day1; if the coagulopathy started prior to ICU Day1 and was still present on ICU Day1, enter the ICU Day1 date	text (date_mdy), Required
516	peak_ptt Show the field ONLY if: [new_coagulopathy] = '1'	Peak PTT (seconds) in the absence of therapeutic anticoagulationIf none available, enter "N/A"	text, Required

517	upper_limit_ptt Show the field ONLY if: [new_coagulopathy] = '1'	Upper reference limit of normal for PTT (seconds) at your hospital's lab	text (number, Min: 28, Max: 80), Required																		
518	peak_inr Show the field ONLY if: [new_coagulopathy] = '1'	Peak INR in the absence of therapeutic anticoagulationIf none available, enter "N/A"	text, Required																		
519	dic	New disseminated intravascular coagulation (DIC) in the first 14 days following ICU admission?	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				
520	date_dic Show the field ONLY if: [dic] = '1'	Date DIC developedDo not enter any dates prior to ICU Day1; if the DIC started prior to ICU Day1 and was still present on ICU Day1, enter the ICU Day1 date	text (date_mdy), Required																		
521	major_bleed	New major bleed in the first 14 days following ICU admission?Defined as bleeding in a critical area or organ (e.g., intracranial, retroperitoneal, pericardial, or intramuscular bleeding with compartment syndrome) or bleeding requiring a procedural intervention (e.g., EGD or IR embolization). "Requiring" a procedural intervention could include situations where an intervention would regularly be performed, but was not actually performed because the patient was too unstable, or because of logistical/other concerns related to COVID-19.Blood transfusion alone does not qualify as an intervention.	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				
522	date_major_bleed Show the field ONLY if: [major_bleed] = '1'	Date major bleed occurredDo not enter any dates prior to ICU Day1; if the major bleed started prior to ICU Day1 and was still present on ICU Day1, enter the ICU Day1 date	text (date_mdy), Required																		
523	bleed_from_anticoag Show the field ONLY if: [major_bleed] = '1'	Did the major bleed occur in the presence of therapeutic anticoagulation?Do not include DVT prophylaxis (e.g., unfractionated heparin 5,000 units SC or lovenox 30-40 mg SC)	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				
524	bleed_ppx_or_intermed_ac Show the field ONLY if: [bleed_from_anticoag] = '0'	Did the major bleed occur in the presence of prophylactic- or intermediate-dose anticoagulation received within 24 hours prior to the bleed?Prophylactic dose anticoagulation includes subcutaneous unfractionated heparin, enoxaparin (LMWH) 30-40mg once daily, or dalteparin 5,000 units once daily Intermediate-dose anticoagulation refers to enoxaparin (LMWH) 30-40 mg twice daily or dalteparin 5,000 units twice daily	radio, Required <table border="1"> <tr> <td>1</td> <td>Yes - prophylactic dose anticoagulation</td> </tr> <tr> <td>2</td> <td>Yes - intermediate-dose anticoagulation</td> </tr> <tr> <td>3</td> <td>No</td> </tr> </table>	1	Yes - prophylactic dose anticoagulation	2	Yes - intermediate-dose anticoagulation	3	No												
1	Yes - prophylactic dose anticoagulation																				
2	Yes - intermediate-dose anticoagulation																				
3	No																				
525	bleed_from_antiplatelet Show the field ONLY if: [major_bleed] = '1'	Did the major bleed occur in the presence of any of the following antiplatelet agents received within 24 hours prior to the bleed? (select all that apply)	checkbox, Required <table border="1"> <tr> <td>1</td> <td>bleed_from_antiplatelet__1</td> <td>Aspirin</td> </tr> <tr> <td>2</td> <td>bleed_from_antiplatelet__2</td> <td>Clopidogrel (Plavix)</td> </tr> <tr> <td>3</td> <td>bleed_from_antiplatelet__3</td> <td>Prasugrel</td> </tr> <tr> <td>4</td> <td>bleed_from_antiplatelet__4</td> <td>Ticagrelor</td> </tr> <tr> <td>5</td> <td>bleed_from_antiplatelet__5</td> <td>Ticlopidine</td> </tr> <tr> <td>6</td> <td>bleed_from_antiplatelet__6</td> <td>None</td> </tr> </table>	1	bleed_from_antiplatelet__1	Aspirin	2	bleed_from_antiplatelet__2	Clopidogrel (Plavix)	3	bleed_from_antiplatelet__3	Prasugrel	4	bleed_from_antiplatelet__4	Ticagrelor	5	bleed_from_antiplatelet__5	Ticlopidine	6	bleed_from_antiplatelet__6	None
1	bleed_from_antiplatelet__1	Aspirin																			
2	bleed_from_antiplatelet__2	Clopidogrel (Plavix)																			
3	bleed_from_antiplatelet__3	Prasugrel																			
4	bleed_from_antiplatelet__4	Ticagrelor																			
5	bleed_from_antiplatelet__5	Ticlopidine																			
6	bleed_from_antiplatelet__6	None																			

526	bleed_location Show the field ONLY if: [major_bleed] = '1'	Location of major bleeding event(s) (select all that apply)	checkbox, Required <table border="1"> <tr><td>1</td><td>bleed_location__1</td><td>Bronchopulmonary</td></tr> <tr><td>2</td><td>bleed_location__2</td><td>Pleural</td></tr> <tr><td>3</td><td>bleed_location__3</td><td>Pericardial</td></tr> <tr><td>4</td><td>bleed_location__4</td><td>Peritoneal</td></tr> <tr><td>5</td><td>bleed_location__5</td><td>Retroperitoneal</td></tr> <tr><td>6</td><td>bleed_location__6</td><td>Central nervous system</td></tr> <tr><td>7</td><td>bleed_location__7</td><td>Gastrointestinal</td></tr> <tr><td>8</td><td>bleed_location__8</td><td>Genitourinary</td></tr> <tr><td>9</td><td>bleed_location__9</td><td>Musculoskeletal and soft tissue</td></tr> <tr><td>10</td><td>bleed_location__10</td><td>Other</td></tr> </table>	1	bleed_location__1	Bronchopulmonary	2	bleed_location__2	Pleural	3	bleed_location__3	Pericardial	4	bleed_location__4	Peritoneal	5	bleed_location__5	Retroperitoneal	6	bleed_location__6	Central nervous system	7	bleed_location__7	Gastrointestinal	8	bleed_location__8	Genitourinary	9	bleed_location__9	Musculoskeletal and soft tissue	10	bleed_location__10	Other
1	bleed_location__1	Bronchopulmonary																															
2	bleed_location__2	Pleural																															
3	bleed_location__3	Pericardial																															
4	bleed_location__4	Peritoneal																															
5	bleed_location__5	Retroperitoneal																															
6	bleed_location__6	Central nervous system																															
7	bleed_location__7	Gastrointestinal																															
8	bleed_location__8	Genitourinary																															
9	bleed_location__9	Musculoskeletal and soft tissue																															
10	bleed_location__10	Other																															
527	bleed_location_other Show the field ONLY if: [bleed_location(10)] = '1'	Enter the other location of the major bleed	text, Required																														
528	pt_bleed Show the field ONLY if: [major_bleed] = '1'	PT (seconds) within 24 hours prior to the major bleed-If more than one value is available within 24 hours prior to the bleed, use the value closest to and prior to the bleed-If unavailable, enter, "N/A"	text, Required																														
529	ptt_bleed Show the field ONLY if: [major_bleed] = '1'	PTT (seconds) within 24 hours prior to the major bleed-If more than one value is available within 24 hours prior to the bleed, use the value closest to and prior to the bleed-If unavailable, enter, "N/A"	text, Required																														
530	inr_bleed Show the field ONLY if: [major_bleed] = '1'	INR within 24 hours prior to the major bleed-If more than one value is available within 24 hours prior to the bleed, use the value closest to and prior to the bleed-If unavailable, enter, "N/A"	text, Required																														
531	prbcs Show the field ONLY if: [major_bleed] = '1'	Did the patient require transfusion of packed red blood cells (pRBCs) for the major bleed?-Enter the total number of units of pRBCs received within 48 hours following the bleed-If no pRBCs were transfused, enter "0"	text (number, Min: 0, Max: 20), Required																														
532	procedure_for_bleed Show the field ONLY if: [major_bleed] = '1'	Was a procedure or invasive intervention required to stop the major bleed? (e.g., endoscopy, interventional radiology, or surgery)?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No																										
1	Yes																																
0	No																																
533	bleed_fatal Show the field ONLY if: [major_bleed] = '1'	Was the major bleed clearly fatal, an important contributor to death, or a factor in the decision to withdraw care?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No																										
1	Yes																																
0	No																																
534	notes_organ	Additional Notes (if any)	notes																														
535	acute_organ_injury_in_the_first_14_days_following_completion	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete																								
0	Incomplete																																
1	Unverified																																
2	Complete																																

Instrument: **Medications and Clinical Trials** (medications_and_clinical_trials)

[^ Collapse](#)

536	abx_antiviral	<p>Section Header: <i>The questions below refer to the first 14 days following ICU admission. Even if the patient was in the ICU for less than 14 days and was transferred to the hospital floor, continue to enter data for the full 14 days or until discharged from the hospital (whichever occurs first)</i></p> <p>Antibiotics, antivirals, and antimalarials received at any time within 14 days following ICU admission (check all that apply)-Only include meds received as part of a clinical trial if the patient definitely received the med (e.g., if they were in an open-label trial of chloroquine, or even a randomized double-blind trial of chloroquine at dose X versus chloroquine at dose Y, select chloroquine; however, if the patient was in a randomized, double-blind study of chloroquine versus placebo, do not select chloroquine)*This only refers to other antivirals, not other antibiotics. We are not collecting data on antibiotics other than the ones on the checklist (chloroquine, hydroxychloroquine, and azithromycin)</p>	<p>checkbox, Required</p> <table border="1" data-bbox="1040 111 1502 432"> <tr><td>1</td><td>abx_antiviral__1</td><td>Chloroquine</td></tr> <tr><td>2</td><td>abx_antiviral__2</td><td>Hydroxychloroquine</td></tr> <tr><td>3</td><td>abx_antiviral__3</td><td>Azithromycin</td></tr> <tr><td>4</td><td>abx_antiviral__4</td><td>Remdesivir</td></tr> <tr><td>5</td><td>abx_antiviral__5</td><td>Ribavirin</td></tr> <tr><td>6</td><td>abx_antiviral__6</td><td>Lopinavir/ritonavir (Kaletra)</td></tr> <tr><td>7</td><td>abx_antiviral__7</td><td>Other antiviral*</td></tr> <tr><td>8</td><td>abx_antiviral__8</td><td>None of the above</td></tr> </table> <p>Field Annotation: @NONEOFTHEABOVE=8</p>	1	abx_antiviral__1	Chloroquine	2	abx_antiviral__2	Hydroxychloroquine	3	abx_antiviral__3	Azithromycin	4	abx_antiviral__4	Remdesivir	5	abx_antiviral__5	Ribavirin	6	abx_antiviral__6	Lopinavir/ritonavir (Kaletra)	7	abx_antiviral__7	Other antiviral*	8	abx_antiviral__8	None of the above			
1	abx_antiviral__1	Chloroquine																												
2	abx_antiviral__2	Hydroxychloroquine																												
3	abx_antiviral__3	Azithromycin																												
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5	abx_antiviral__5	Ribavirin																												
6	abx_antiviral__6	Lopinavir/ritonavir (Kaletra)																												
7	abx_antiviral__7	Other antiviral*																												
8	abx_antiviral__8	None of the above																												
537	date_chloroquine Show the field ONLY if: [abx_antiviral(1)] = '1'	Enter the date chloroquine was initiatedIf initiated prior to ICU Day1, enter the date for ICU Day1	text (date_mdy), Required																											
538	date_hydroxy Show the field ONLY if: [abx_antiviral(2)] = '1'	Enter the date hydroxychloroquine was initiatedIf initiated prior to ICU Day1, enter the date for ICU Day1	text (date_mdy), Required																											
539	date_azithro Show the field ONLY if: [abx_antiviral(3)] = '1'	Enter the date azithromycin was initiatedIf initiated prior to ICU Day1, enter the date for ICU Day1	text (date_mdy), Required																											
540	date_remdesivir Show the field ONLY if: [abx_antiviral(4)] = '1'	Enter the date remdesivir was initiatedIf initiated prior to ICU Day1, enter the date for ICU Day1	text (date_mdy), Required																											
541	date_ribavirin Show the field ONLY if: [abx_antiviral(5)] = '1'	Enter the date ribavirin was initiatedIf initiated prior to ICU Day1, enter the date for ICU Day1	text (date_mdy), Required																											
542	date_kaletra Show the field ONLY if: [abx_antiviral(6)] = '1'	Enter the date lopinavir/ritonavir (Kaletra) was initiatedIf initiated prior to ICU Day1, enter the date for ICU Day1	text (date_mdy), Required																											
543	other_antiviral Show the field ONLY if: [abx_antiviral(7)] = '1'	Enter the other antiviral	text, Required																											
544	date_other_antiviral Show the field ONLY if: [abx_antiviral(7)] = '1'	Enter the date the other antiviral was initiatedIf initiated prior to ICU Day1, enter the date for ICU Day1	text (date_mdy), Required																											
545	anti_inflam	<p>Anti-inflammatory medications received at any time within 14 days following ICU admission (check all that apply)Include meds received as part of a clinical trial as long as the patient definitely received the med (i.e., do not include drug "X" if the patient was in a randomized, double-blind study of drug "X" versus placebo)Do not include acetaminophen (Tylenol) as an "other anti-inflammatory" agent</p>	<p>checkbox, Required</p> <table border="1" data-bbox="1040 1440 1461 1793"> <tr><td>1</td><td>anti_inflam__1</td><td>Corticosteroid</td></tr> <tr><td>2</td><td>anti_inflam__2</td><td>NSAID</td></tr> <tr><td>3</td><td>anti_inflam__3</td><td>Aspirin</td></tr> <tr><td>4</td><td>anti_inflam__4</td><td>Statin</td></tr> <tr><td>5</td><td>anti_inflam__5</td><td>Tocilizumab (Actemra)</td></tr> <tr><td>6</td><td>anti_inflam__6</td><td>Other IL-6 antagonist</td></tr> <tr><td>7</td><td>anti_inflam__7</td><td>Other anti-inflammatory</td></tr> <tr><td>8</td><td>anti_inflam__8</td><td>Vitamin C (IV or PO)</td></tr> <tr><td>9</td><td>anti_inflam__9</td><td>None of the above</td></tr> </table> <p>Field Annotation: @NONEOFTHEABOVE=9</p>	1	anti_inflam__1	Corticosteroid	2	anti_inflam__2	NSAID	3	anti_inflam__3	Aspirin	4	anti_inflam__4	Statin	5	anti_inflam__5	Tocilizumab (Actemra)	6	anti_inflam__6	Other IL-6 antagonist	7	anti_inflam__7	Other anti-inflammatory	8	anti_inflam__8	Vitamin C (IV or PO)	9	anti_inflam__9	None of the above
1	anti_inflam__1	Corticosteroid																												
2	anti_inflam__2	NSAID																												
3	anti_inflam__3	Aspirin																												
4	anti_inflam__4	Statin																												
5	anti_inflam__5	Tocilizumab (Actemra)																												
6	anti_inflam__6	Other IL-6 antagonist																												
7	anti_inflam__7	Other anti-inflammatory																												
8	anti_inflam__8	Vitamin C (IV or PO)																												
9	anti_inflam__9	None of the above																												
546	steroid_name_dose Show the field ONLY if: [anti_inflam(1)] = '1'	Enter the name and initial cumulative daily dose of the corticosteroidFor example, if a patient was started on methylprednisolone 125mg twice per day, enter, "methylprednisolone 250 mg"	text, Required																											

547	date_steroid Show the field ONLY if: [anti_inflam(1)] = '1'	Enter the date the corticosteroid was initiatedIf initiated prior to ICU Day1, enter the date for ICU Day1	text (date_mdy), Required															
548	date_nsaid Show the field ONLY if: [anti_inflam(2)] = '1'	Enter the date the NSAID was initiatedIf initiated prior to ICU Day1, enter the date for ICU Day1	text (date_mdy), Required															
549	date_aspirin Show the field ONLY if: [anti_inflam(3)] = '1'	Enter the date the aspirin was initiatedIf initiated prior to ICU Day1, enter the date for ICU Day1	text (date_mdy), Required															
550	date_statin Show the field ONLY if: [anti_inflam(4)] = '1'	Enter the date the statin was initiatedIf initiated prior to ICU Day1, enter the date for ICU Day1	text (date_mdy), Required															
551	date_toci Show the field ONLY if: [anti_inflam(5)] = '1'	Enter the date the tocilizumab was initiatedIf initiated prior to ICU Day1, enter the date for ICU Day1	text (date_mdy), Required															
552	date_other_il_6 Show the field ONLY if: [anti_inflam(6)] = '1'	Enter the date the other IL-6 antagonist was initiatedIf initiated prior to ICU Day1, enter the date for ICU Day1	text (date_mdy), Required															
553	other_anti_inflamm Show the field ONLY if: [anti_inflam(7)] = '1'	Enter the other anti-inflammatory medication	text, Required															
554	date_other_anti_inflamm Show the field ONLY if: [anti_inflam(7)] = '1'	Enter the date the other anti-inflammatory medication was initiatedIf initiated prior to ICU Day1, enter the date for ICU Day1	text (date_mdy), Required															
555	date_vit_c Show the field ONLY if: [anti_inflam(8)] = '1'	Enter the date the vitamin C was initiatedIf initiated prior to ICU Day1, enter the date for ICU Day1	text (date_mdy), Required															
556	ards_meds_interv	ARDS/hypoxemia-specific medications/interventions received at any time within 14 days following ICU admission (check all that apply)*Includes cisatracurium (Nimbex) and others, but do not include short acting paralytics (e.g., rocuronium) used only for induction of intubation	checkbox, Required <table border="1"> <tr> <td>1</td> <td>ards_meds_interv__1</td> <td>Neuromuscular blockade*</td> </tr> <tr> <td>2</td> <td>ards_meds_interv__2</td> <td>Inhaled epoprostenol (Veletri or Flolan)</td> </tr> <tr> <td>3</td> <td>ards_meds_interv__3</td> <td>Inhaled nitric oxide (iNO)</td> </tr> <tr> <td>4</td> <td>ards_meds_interv__4</td> <td>Proned position</td> </tr> <tr> <td>5</td> <td>ards_meds_interv__5</td> <td>None of the above</td> </tr> </table> Field Annotation: @NONEOFTHEABOVE=5	1	ards_meds_interv__1	Neuromuscular blockade*	2	ards_meds_interv__2	Inhaled epoprostenol (Veletri or Flolan)	3	ards_meds_interv__3	Inhaled nitric oxide (iNO)	4	ards_meds_interv__4	Proned position	5	ards_meds_interv__5	None of the above
1	ards_meds_interv__1	Neuromuscular blockade*																
2	ards_meds_interv__2	Inhaled epoprostenol (Veletri or Flolan)																
3	ards_meds_interv__3	Inhaled nitric oxide (iNO)																
4	ards_meds_interv__4	Proned position																
5	ards_meds_interv__5	None of the above																
557	date_neuromus Show the field ONLY if: [ards_meds_interv(1)] = '1'	Enter the date the neuromuscular blockade was initiatedIf initiated prior to ICU Day1, enter the date for ICU Day1	text (date_mdy), Required															
558	date_inh_epo Show the field ONLY if: [ards_meds_interv(2)] = '1'	Enter the date inhaled epoprostenol (Veletri or Flolan) was initiatedIf initiated prior to ICU Day1, enter the date for ICU Day1	text (date_mdy), Required															
559	date_ino Show the field ONLY if: [ards_meds_interv(3)] = '1'	Enter the date the inhaled nitric oxide (iNO) was initiatedIf initiated prior to ICU Day1, enter the date for ICU Day1	text (date_mdy), Required															
560	proned_date Show the field ONLY if: [ards_meds_interv(4)] = '1'	Enter the date the patient was first proned	text (date_mdy), Required															

561	other_meds	Other medications received at any time within 14 days following ICU admission (check all that apply)Include meds received as part of a clinical trial as long as the patient definitely received the med*ACE-Is include lisinopril, fosinopril, captopril, and others*ARBs include losartan, valsartan, irbesartan, and others**Systemic tPA only (does not apply to tPA infused into indwelling catheters or locally delivered intra-arterial tPA used for stroke)	checkbox, Required <table border="1"> <tr> <td>1</td> <td>other_meds__1</td> <td>Convalescent serum</td> </tr> <tr> <td>2</td> <td>other_meds__2</td> <td>ACE-I*</td> </tr> <tr> <td>3</td> <td>other_meds__3</td> <td>ARB*</td> </tr> <tr> <td>4</td> <td>other_meds__4</td> <td>tissue Plasminogen Activator (tPA)**</td> </tr> <tr> <td>5</td> <td>other_meds__5</td> <td>None of the above</td> </tr> </table> Field Annotation: @NONEOFTHEABOVE=5	1	other_meds__1	Convalescent serum	2	other_meds__2	ACE-I*	3	other_meds__3	ARB*	4	other_meds__4	tissue Plasminogen Activator (tPA)**	5	other_meds__5	None of the above
1	other_meds__1	Convalescent serum																
2	other_meds__2	ACE-I*																
3	other_meds__3	ARB*																
4	other_meds__4	tissue Plasminogen Activator (tPA)**																
5	other_meds__5	None of the above																
562	date_conv_serum Show the field ONLY if: [other_meds(1)] = '1'	Enter the date the convalescent serum was initiatedIf initiated prior to ICU Day1, enter the date for ICU Day1	text (date_mdy), Required															
563	date_ace_i Show the field ONLY if: [other_meds(2)] = '1'	Enter the date the ACE-I was initiatedIf initiated prior to ICU Day1, enter the date for ICU Day1	text (date_mdy), Required															
564	date_arb Show the field ONLY if: [other_meds(3)] = '1'	Enter the date the ARB was initiatedIf initiated prior to ICU Day1, enter the date for ICU Day1	text (date_mdy), Required															
565	date_tpa Show the field ONLY if: [other_meds(4)] = '1'	Enter the date the tPA was initiatedIf initiated prior to ICU Day1, enter the date for ICU Day1	text (date_mdy), Required															
566	anticoag	Therapeutic anticoagulation received at any time within 14 days following ICU admission?Do not include DVT prophylaxis (e.g., unfractionated heparin 5,000 units SC or lovenox 30-40 mg SC)In patients receiving anticoagulation prior to ICU or hospital admission, continuation of this anticoagulation or conversion to an alternative therapeutic type means the answer to this question is, "Yes", and the date entered for anticoagulation initiation (for the following question) should be the date of ICU admission. Therapeutic anticoagulation includes any of the following categories:1) Continuous drips (infusions) of heparin, argatroban, or bilvalirudin2) Subcutaneous regimens:Enoxaparin (Lovenox) 1mg/kg twice per dayEnoxaparin (Lovenox) 1.5mg/kg once per dayDalteparin (Fragmin) 150-200 units/kg once per dayDalteparin (Fragmin) 100 units/kg twice per dayFondaparinux (Aristra) at doses of 5mg or more daily3) Oral anticoagulants: warfarin (Coumadin), apixaban (Eliquis), rivaroxaban (Xarelto), edoxaban, or dabigatran (Pradaxa)	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No											
1	Yes																	
0	No																	
567	type_anticoag Show the field ONLY if: [anticoag] = '1'	Anticoagulation type	checkbox, Required <table border="1"> <tr> <td>1</td> <td>type_anticoag__1</td> <td>Heparin drip</td> </tr> <tr> <td>2</td> <td>type_anticoag__2</td> <td>Therapeutic enoxaparin (Lovenox)</td> </tr> <tr> <td>3</td> <td>type_anticoag__3</td> <td>Bivalirudin (Angiomax)</td> </tr> <tr> <td>4</td> <td>type_anticoag__4</td> <td>Argatroban</td> </tr> <tr> <td>5</td> <td>type_anticoag__5</td> <td>Other</td> </tr> </table>	1	type_anticoag__1	Heparin drip	2	type_anticoag__2	Therapeutic enoxaparin (Lovenox)	3	type_anticoag__3	Bivalirudin (Angiomax)	4	type_anticoag__4	Argatroban	5	type_anticoag__5	Other
1	type_anticoag__1	Heparin drip																
2	type_anticoag__2	Therapeutic enoxaparin (Lovenox)																
3	type_anticoag__3	Bivalirudin (Angiomax)																
4	type_anticoag__4	Argatroban																
5	type_anticoag__5	Other																
568	date_anticoag Show the field ONLY if: [anticoag] = '1'	Enter the date therapeutic anticoagulation was startedIf already on therapeutic anticoagulation on arrival to the ICU, enter the date of ICU admission here	text (date_mdy), Required															

569	anticoag_reason Show the field ONLY if: [anticoag] = '1'	Enter the indication(s) for anticoagulation (select all that apply)	checkbox, Required <table border="1"> <tr> <td>1</td> <td>anticoag_reason__1</td> <td>Atrial fibrillation/flutter</td> </tr> <tr> <td>2</td> <td>anticoag_reason__2</td> <td>Acute coronary syndrome/myocardial infarction</td> </tr> <tr> <td>3</td> <td>anticoag_reason__3</td> <td>DVT/PE</td> </tr> <tr> <td>4</td> <td>anticoag_reason__4</td> <td>For extracorporeal circuit (e.g., ECMO or RRT)</td> </tr> <tr> <td>5</td> <td>anticoag_reason__5</td> <td>Hypercoagulable state associated with COVID-19</td> </tr> <tr> <td>6</td> <td>anticoag_reason__6</td> <td>Other</td> </tr> </table>	1	anticoag_reason__1	Atrial fibrillation/flutter	2	anticoag_reason__2	Acute coronary syndrome/myocardial infarction	3	anticoag_reason__3	DVT/PE	4	anticoag_reason__4	For extracorporeal circuit (e.g., ECMO or RRT)	5	anticoag_reason__5	Hypercoagulable state associated with COVID-19	6	anticoag_reason__6	Other
1	anticoag_reason__1	Atrial fibrillation/flutter																			
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6	anticoag_reason__6	Other																			
570	trial	Enrolled in a clinical trial for COVID-19?Includes not only clinical trials of medications but any clinical trial, including devices or other interventions	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				
571	nct_number Show the field ONLY if: [trial] = '1'	Enter the ClinicalTrials.gov Identifier, if known (otherwise enter, "N/A")-The identifier always begins with "NCT", followed by several digits (e.g., NCT12345678). Enter the entire identifier, including the "NCT". The identifier can be easily found at the top of the ClinicalTrials.gov website for the trial-FYI, the ClinicalTrials.gov webpage for the trial is a good resource to answer the subsequent questions about study design	text, Required																		
572	single_arm_trial Show the field ONLY if: [trial] = '1'	Was the trial single-arm?One intervention only, with no active comparator group	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				
573	intervent_single_arm Show the field ONLY if: [single_arm_trial] = '1'	What intervention did the patient receive?Be as specific as possible (e.g., drug X at X mg BID for X days)	notes, Required																		
574	noblind_tx Show the field ONLY if: [single_arm_trial] = '0'	What intervention(s) did the patient receive? Or, if unknown, what interventions were being tested?-Be as specific as possible (e.g., drug X at X mg BID for X days versus drug Y; or drug X versus placebo)-Include details on study design, including whether the study was randomized, double-blinded, and placebo-controlled	notes, Required																		
575	second_trial Show the field ONLY if: [trial] = '1'	Was the patient enrolled in a second clinical trial?	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				
576	second_trial_details Show the field ONLY if: [second_trial] = '1'	Enter the details of the second clinical trialInclude if the trial was single- versus double-arm, if it was randomized, double-blinded, and/or placebo-controlled, and what the intervention(s) were	notes, Required																		
577	notes_meds	Additional notes (if any)Do not use this space to write about meds that were not asked about above	notes																		
578	medications_and_clinical_trial_s_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr> <td>0</td> <td>Incomplete</td> </tr> <tr> <td>1</td> <td>Unverified</td> </tr> <tr> <td>2</td> <td>Complete</td> </tr> </table>	0	Incomplete	1	Unverified	2	Complete												
0	Incomplete																				
1	Unverified																				
2	Complete																				

Instrument: **Mortality and Length of Stay** (mortality_and_length_of_stay)

[^ Collapse](#)

579	icu_discharge	Discharged from the ICU?-If the patient died in the ICU, select "no"-Enter the date the patient was first discharged from the ICU, even if they were subsequently readmitted back to the ICU	radio, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>2</td> <td>No</td> </tr> <tr> <td>3</td> <td>N/A because the patient was in a non-ICU bed converted into an ICU bed for surge capacity, and these patients typically do not get transferred. They either die or are discharged home directly from the "non-ICU" bed</td> </tr> </table>	1	Yes	2	No	3	N/A because the patient was in a non-ICU bed converted into an ICU bed for surge capacity, and these patients typically do not get transferred. They either die or are discharged home directly from the "non-ICU" bed
1	Yes								
2	No								
3	N/A because the patient was in a non-ICU bed converted into an ICU bed for surge capacity, and these patients typically do not get transferred. They either die or are discharged home directly from the "non-ICU" bed								

580	date_icu_discharge Show the field ONLY if: [icu_discharge] = '1'	Date of discharge from the ICU	text (date_mdy), Required																		
581	mortality_status	Hospital mortality status	radio, Required <table border="1"> <tr><td>1</td><td>Survived and discharged from the hospital</td></tr> <tr><td>2</td><td>Died during hospitalization</td></tr> <tr><td>3</td><td>Patient is still hospitalized at the time of data entry</td></tr> </table>	1	Survived and discharged from the hospital	2	Died during hospitalization	3	Patient is still hospitalized at the time of data entry												
1	Survived and discharged from the hospital																				
2	Died during hospitalization																				
3	Patient is still hospitalized at the time of data entry																				
582	date_dead Show the field ONLY if: [mortality_status] = '2'	Date of death	text (date_mdy), Required, Identifier																		
583	cause_death Show the field ONLY if: [mortality_status] = '2'	Cause(s) of death (select all that apply)	checkbox, Required <table border="1"> <tr><td>1</td><td>cause_death__1</td><td>ARDS/respiratory failure</td></tr> <tr><td>2</td><td>cause_death__2</td><td>Heart failure</td></tr> <tr><td>3</td><td>cause_death__3</td><td>Septic shock</td></tr> <tr><td>4</td><td>cause_death__4</td><td>Kidney failure</td></tr> <tr><td>5</td><td>cause_death__5</td><td>Liver failure</td></tr> <tr><td>6</td><td>cause_death__6</td><td>Other</td></tr> </table>	1	cause_death__1	ARDS/respiratory failure	2	cause_death__2	Heart failure	3	cause_death__3	Septic shock	4	cause_death__4	Kidney failure	5	cause_death__5	Liver failure	6	cause_death__6	Other
1	cause_death__1	ARDS/respiratory failure																			
2	cause_death__2	Heart failure																			
3	cause_death__3	Septic shock																			
4	cause_death__4	Kidney failure																			
5	cause_death__5	Liver failure																			
6	cause_death__6	Other																			
584	cause_death_other Show the field ONLY if: [cause_death(6)] = '1'	Enter the other cause(s) of death-Do not simply write, "cardiopulmonary arrest" or "Comfort Measures Only". Rather, provide the immediate underlying cause(s) of death in addition to those already listed above (e.g., pulmonary embolism, stroke, etc.) -Would also mention here if the patient needed life-sustaining therapy (e.g., mechanical ventilation, RRT) but that it was unavailable due to shortages	notes, Required																		
585	date_fu Show the field ONLY if: [mortality_status] = '3'	Date of last follow-up	text (date_mdy), Required																		
586	date_dchosp Show the field ONLY if: [mortality_status] = '1'	Date discharged from the hospital	text (date_mdy), Required																		
587	neuro_dc_after_cpr Show the field ONLY if: [cpr] = '1' and [mortality_status] = '1'	Neurologic status at hospital discharge Normal refers to patients who are alert, conscious, and have either no neurological deficits or only mild deficits Severe disability refers to being dependent on others for activities of daily living due to neurological impairment	radio, Required <table border="1"> <tr><td>1</td><td>Normal</td></tr> <tr><td>2</td><td>Moderate disability, able to accomplish activities of daily living independently</td></tr> <tr><td>3</td><td>Severe disability, dependent on others for activities of daily living</td></tr> <tr><td>4</td><td>Coma or vegetative state</td></tr> </table>	1	Normal	2	Moderate disability, able to accomplish activities of daily living independently	3	Severe disability, dependent on others for activities of daily living	4	Coma or vegetative state										
1	Normal																				
2	Moderate disability, able to accomplish activities of daily living independently																				
3	Severe disability, dependent on others for activities of daily living																				
4	Coma or vegetative state																				
588	notes_death	Additional Notes (if any)Do NOT use this space to write about the cause of death. Cause of death should be provided above. Also, do not provide details about DNR/DNI status, comfort measures only, family meetings, etc.	notes																		
589	mortality_and_length_of_stay_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete												
0	Incomplete																				
1	Unverified																				
2	Complete																				

Instrument: **Additional Lab Data** (additional_lab_data)

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590	type_blood	Section Header: <i>The questions below refer to the first 14 days following ICU admission. Even if the patient was in the ICU for less than 14 days and was transferred to the hospital floor, continue to enter data for the full 14 days or until discharged from the hospital (whichever occurs first)</i> Blood Type	radio, Required <table border="1"> <tr><td>1</td><td>A+</td></tr> <tr><td>2</td><td>A-</td></tr> <tr><td>3</td><td>B+</td></tr> <tr><td>4</td><td>B-</td></tr> <tr><td>5</td><td>AB+</td></tr> <tr><td>6</td><td>AB-</td></tr> <tr><td>7</td><td>O+</td></tr> <tr><td>8</td><td>O-</td></tr> <tr><td>9</td><td>Unknown</td></tr> </table>	1	A+	2	A-	3	B+	4	B-	5	AB+	6	AB-	7	O+	8	O-	9	Unknown
1	A+																				
2	A-																				
3	B+																				
4	B-																				
5	AB+																				
6	AB-																				
7	O+																				
8	O-																				
9	Unknown																				
591	cr_hosp_discharge Show the field ONLY if: [mortality_status] = '1'	Serum creatinine (mg/dl) on hospital discharge if none available on the day of hospital discharge, enter the value closest to hospital discharge	text (number, Min: .3, Max: 10), Required																		
592	rrt_hosp_discharge Show the field ONLY if: [mortality_status] = '1'	Dialysis-dependent on hospital discharge?	radio, Required <table border="1"> <tr><td>1</td><td>Yes - from AKI</td></tr> <tr><td>2</td><td>Yes - from ESRD</td></tr> <tr><td>3</td><td>No</td></tr> </table>	1	Yes - from AKI	2	Yes - from ESRD	3	No												
1	Yes - from AKI																				
2	Yes - from ESRD																				
3	No																				
593	kidney_bx	Did the patient have a kidney biopsy performed?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				
594	kidney_bx_report Show the field ONLY if: [kidney_bx] = '1'	Copy and paste the entire biopsy report Be sure to remove identifiers, like name and MRN	notes, Required																		
595	additional_lab_data_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete												
0	Incomplete																				
1	Unverified																				
2	Complete																				

Instrument: **Additional Data for ECMO Patients** (additional_ecmo_data)

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596	ecmo_fyi	This instrument is only meant for patients who initiated ECMO in the first 14 days following ICU admission. If the patient did not initiate ECMO in the first 14 days, no questions will appear below, and you may skip this section.	descriptive, Required				
597	bicarb_b4_ecmo_2 Show the field ONLY if: [ecmo(1)] = '1' or [ecmo(2)] = '1' or [ecmo(3)] = '1' or [ecmo(4)] = '1' or [ecmo(5)] = '1' or [ecmo(6)] = '1' or [ecmo(7)] = '1' or [ecmo_2(1)] = '1' or [ecmo_2(2)] = '1' or [ecmo_2(3)] = '1' or [ecmo_2(4)] = '1' or [ecmo_2(5)] = '1' or [ecmo_2(6)] = '1' or [ecmo_2(7)] = '1'	Was sodium bicarbonate administered intravenously (either as a drip or bolus infusion) within 24 hours prior to ECMO cannulation?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No
1	Yes						
0	No						
598	cns_dys_b4_ecmo Show the field ONLY if: [ecmo(1)] = '1' or [ecmo(2)] = '1' or [ecmo(3)] = '1' or [ecmo(4)] = '1' or [ecmo(5)] = '1' or [ecmo(6)] = '1' or [ecmo(7)] = '1' or [ecmo_2(1)] = '1' or [ecmo_2(2)] = '1' or [ecmo_2(3)] = '1' or [ecmo_2(4)] = '1' or [ecmo_2(5)] = '1' or [ecmo_2(6)] = '1' or [ecmo_2(7)] = '1'	History of CNS dysfunction within 30 days prior to ECMO cannulation? Defined as neurotrauma, stroke, encephalopathy/altered mental status, or seizure	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No
1	Yes						
0	No						

599	<p>peak_insp_press</p> <p>Show the field ONLY if: [ecmo(1)] = '1' or [ecmo(2)] = '1' or [ecmo(3)] = '1' or [ecmo(4)] = '1' or [ecmo(5)] = '1' or [ecmo(6)] = '1' or [ecmo(7)] = '1' or [ecmo_2(1)] = '1' or [ecmo_2(2)] = '1' or [ecmo_2(3)] = '1' or [ecmo_2(4)] = '1' or [ecmo_2(5)] = '1' or [ecmo_2(6)] = '1' or [ecmo_2(7)] = '1'</p>	<p>Was peak inspiratory pressure on the ventilator \geq42 cm H₂O at any time during the 48 hours prior to ECMO cannulation?</p>	<p>yesno, Required</p> <table border="1" data-bbox="1040 113 1118 191"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No						
1	Yes												
0	No												
600	<p>pre_ecmo_mode</p> <p>Show the field ONLY if: [ecmo(1)] = '1' or [ecmo(2)] = '1' or [ecmo(3)] = '1' or [ecmo(4)] = '1' or [ecmo(5)] = '1' or [ecmo(6)] = '1' or [ecmo(7)] = '1' or [ecmo_2(1)] = '1' or [ecmo_2(2)] = '1' or [ecmo_2(3)] = '1' or [ecmo_2(4)] = '1' or [ecmo_2(5)] = '1' or [ecmo_2(6)] = '1' or [ecmo_2(7)] = '1'</p>	<p>Select the mode of mechanical ventilation documented closest to, but no more than 24 hours prior to ECMO cannulation</p>	<p>radio, Required</p> <table border="1" data-bbox="1040 432 1235 636"> <tr> <td>1</td> <td>Volume control</td> </tr> <tr> <td>2</td> <td>Pressure control</td> </tr> <tr> <td>3</td> <td>SIMV</td> </tr> <tr> <td>4</td> <td>APRV</td> </tr> <tr> <td>5</td> <td>HFOV</td> </tr> </table>	1	Volume control	2	Pressure control	3	SIMV	4	APRV	5	HFOV
1	Volume control												
2	Pressure control												
3	SIMV												
4	APRV												
5	HFOV												
601	<p>pre_ecmo_tv</p> <p>Show the field ONLY if: [ecmo(1)] = '1' or [ecmo(2)] = '1' or [ecmo(3)] = '1' or [ecmo(4)] = '1' or [ecmo(5)] = '1' or [ecmo(6)] = '1' or [ecmo(7)] = '1' or [ecmo_2(1)] = '1' or [ecmo_2(2)] = '1' or [ecmo_2(3)] = '1' or [ecmo_2(4)] = '1' or [ecmo_2(5)] = '1' or [ecmo_2(6)] = '1' or [ecmo_2(7)] = '1'</p>	<p>Enter the tidal volume (mL) immediately prior to ECMO cannulation</p>	<p>text (integer, Min: 100, Max: 1000), Required</p>										
602	<p>pre_ecmo_rr</p> <p>Show the field ONLY if: [ecmo(1)] = '1' or [ecmo(2)] = '1' or [ecmo(3)] = '1' or [ecmo(4)] = '1' or [ecmo(5)] = '1' or [ecmo(6)] = '1' or [ecmo(7)] = '1' or [ecmo_2(1)] = '1' or [ecmo_2(2)] = '1' or [ecmo_2(3)] = '1' or [ecmo_2(4)] = '1' or [ecmo_2(5)] = '1' or [ecmo_2(6)] = '1' or [ecmo_2(7)] = '1'</p>	<p>Enter the respiratory rate (per minute) immediately prior to ECMO cannulation Enter the respiratory rate set on the mechanical ventilator, which not may not necessarily be the same as the patient's actual respiratory rate</p>	<p>text (integer, Min: 10, Max: 40), Required</p>										
603	<p>pre_ecmo_plat_pres</p> <p>Show the field ONLY if: [ecmo(1)] = '1' or [ecmo(2)] = '1' or [ecmo(3)] = '1' or [ecmo(4)] = '1' or [ecmo(5)] = '1' or [ecmo(6)] = '1' or [ecmo(7)] = '1' or [ecmo_2(1)] = '1' or [ecmo_2(2)] = '1' or [ecmo_2(3)] = '1' or [ecmo_2(4)] = '1' or [ecmo_2(5)] = '1' or [ecmo_2(6)] = '1' or [ecmo_2(7)] = '1'</p>	<p>Enter the plateau pressure (cm H₂O) immediately prior to ECMO cannulation If not available, enter "N/A"</p>	<p>text, Required</p>										
604	<p>pco2_pre_ecmo</p> <p>Show the field ONLY if: [ecmo(1)] = '1' or [ecmo(2)] = '1' or [ecmo(3)] = '1' or [ecmo(4)] = '1' or [ecmo(5)] = '1' or [ecmo(6)] = '1' or [ecmo(7)] = '1' or [ecmo_2(1)] = '1' or [ecmo_2(2)] = '1' or [ecmo_2(3)] = '1' or [ecmo_2(4)] = '1' or [ecmo_2(5)] = '1' or [ecmo_2(6)] = '1' or [ecmo_2(7)] = '1'</p>	<p>What was the PCO₂ on the arterial blood gas immediately prior to ECMO cannulation?-Do not enter values from more than 24 hours prior to ECMO cannulation-If none available, enter "N/A"</p>	<p>text, Required</p>										

<p>605</p>	<p>post_ecmo_mode</p> <p>Show the field ONLY if: [ecmo(1)] = '1' or [ecmo(2)] = '1' or [ecmo(3)] = '1' or [ecmo(4)] = '1' or [ecmo(5)] = '1' or [ecmo(6)] = '1' or [ecmo(7)] = '1' or [ecmo_2(1)] = '1' or [ecmo_2(2)] = '1' or [ecmo_2(3)] = '1' or [ecmo_2(4)] = '1' or [ecmo_2(5)] = '1' or [ecmo_2(6)] = '1' or [ecmo_2(7)] = '1'</p>	<p>Select the earliest documented mode of mechanical ventilation on postoperative day 1 after ECMO cannulation-Postoperative day 1 is defined as the next day (starting at midnight) after ECMO cannulation</p>	<p>radio, Required</p> <table border="1" data-bbox="1044 111 1235 310"> <tr> <td>1</td> <td>Volume control</td> </tr> <tr> <td>2</td> <td>Pressure control</td> </tr> <tr> <td>3</td> <td>SIMV</td> </tr> <tr> <td>4</td> <td>APRV</td> </tr> <tr> <td>5</td> <td>HFOV</td> </tr> </table>	1	Volume control	2	Pressure control	3	SIMV	4	APRV	5	HFOV
1	Volume control												
2	Pressure control												
3	SIMV												
4	APRV												
5	HFOV												
<p>606</p>	<p>post_ecmo_tv</p> <p>Show the field ONLY if: [ecmo(1)] = '1' or [ecmo(2)] = '1' or [ecmo(3)] = '1' or [ecmo(4)] = '1' or [ecmo(5)] = '1' or [ecmo(6)] = '1' or [ecmo(7)] = '1' or [ecmo_2(1)] = '1' or [ecmo_2(2)] = '1' or [ecmo_2(3)] = '1' or [ecmo_2(4)] = '1' or [ecmo_2(5)] = '1' or [ecmo_2(6)] = '1' or [ecmo_2(7)] = '1'</p>	<p>Enter the earliest documented tidal volume (mL) on postoperative day 1 after ECMO cannulation-Postoperative day 1 is defined as the next day (starting at midnight) after ECMO cannulation</p>	<p>text (integer, Min: 100, Max: 1000), Required</p>										
<p>607</p>	<p>post_ecmo_rr</p> <p>Show the field ONLY if: [ecmo(1)] = '1' or [ecmo(2)] = '1' or [ecmo(3)] = '1' or [ecmo(4)] = '1' or [ecmo(5)] = '1' or [ecmo(6)] = '1' or [ecmo(7)] = '1' or [ecmo_2(1)] = '1' or [ecmo_2(2)] = '1' or [ecmo_2(3)] = '1' or [ecmo_2(4)] = '1' or [ecmo_2(5)] = '1' or [ecmo_2(6)] = '1' or [ecmo_2(7)] = '1'</p>	<p>Enter the earliest documented respiratory rate (per minute) on postoperative day 1 after ECMO cannulation-Postoperative day 1 is defined as the next day (starting at midnight) after ECMO cannulation-Enter the respiratory rate set on the mechanical ventilator, which not may not necessarily be the same as the patient's actual respiratory rate</p>	<p>text (integer, Min: 10, Max: 40), Required</p>										
<p>608</p>	<p>post_ecmo_plat_pres</p> <p>Show the field ONLY if: [ecmo(1)] = '1' or [ecmo(2)] = '1' or [ecmo(3)] = '1' or [ecmo(4)] = '1' or [ecmo(5)] = '1' or [ecmo(6)] = '1' or [ecmo(7)] = '1' or [ecmo_2(1)] = '1' or [ecmo_2(2)] = '1' or [ecmo_2(3)] = '1' or [ecmo_2(4)] = '1' or [ecmo_2(5)] = '1' or [ecmo_2(6)] = '1' or [ecmo_2(7)] = '1'</p>	<p>Enter the earliest documented plateau pressure (cm H2O) on postoperative day 1 after ECMO cannulation-Postoperative day 1 is defined as the next day (starting at midnight) after ECMO cannulation-If not available, enter "N/A"</p>	<p>text, Required</p>										
<p>609</p>	<p>pco2_post_ecmo</p> <p>Show the field ONLY if: [ecmo(1)] = '1' or [ecmo(2)] = '1' or [ecmo(3)] = '1' or [ecmo(4)] = '1' or [ecmo(5)] = '1' or [ecmo(6)] = '1' or [ecmo(7)] = '1' or [ecmo_2(1)] = '1' or [ecmo_2(2)] = '1' or [ecmo_2(3)] = '1' or [ecmo_2(4)] = '1' or [ecmo_2(5)] = '1' or [ecmo_2(6)] = '1' or [ecmo_2(7)] = '1'</p>	<p>What was the PCO2 on the first arterial blood gas on postoperative day 1 after ECMO cannulation?-Postoperative day 1 is defined as the next day (starting at midnight) after ECMO cannulation-If none available, enter "N/A"</p>	<p>text, Required</p>										
<p>610</p>	<p>ecmo_blood_flow</p> <p>Show the field ONLY if: [ecmo(1)] = '1' or [ecmo(2)] = '1' or [ecmo(3)] = '1' or [ecmo(4)] = '1' or [ecmo(5)] = '1' or [ecmo(6)] = '1' or [ecmo(7)] = '1' or [ecmo_2(1)] = '1' or [ecmo_2(2)] = '1' or [ecmo_2(3)] = '1' or [ecmo_2(4)] = '1' or [ecmo_2(5)] = '1' or [ecmo_2(6)] = '1' or [ecmo_2(7)] = '1'</p>	<p>Enter the earliest documented ECMO circuit blood flow (in liters per minute, LPM) on postoperative day 1 after ECMO cannulation-Postoperative day 1 is defined as the next day (starting at midnight) after ECMO cannulation-If not available, enter "N/A"</p>	<p>text, Required</p>										

611	ecmo_decann_28 Show the field ONLY if: [ecmo(1)] = '1' or [ecmo(2)] = '1' or [ecmo(3)] = '1' or [ecmo(4)] = '1' or [ecmo(5)] = '1' or [ecmo(6)] = '1' or [ecmo(7)] = '1' or [ecmo_2(1)] = '1' or [ecmo_2(2)] = '1' or [ecmo_2(3)] = '1' or [ecmo_2(4)] = '1' or [ecmo_2(5)] = '1' or [ecmo_2(6)] = '1' or [ecmo_2(7)] = '1'	Was the ECMO successfully decannulated (removed) during the first 28 days following ICU admission? If the ECMO was decannulated for palliative purposes, select "no"	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				
612	date_ecmo_decann28 Show the field ONLY if: [ecmo_decann_28] = '1'	Date ECMO was decannulated	text (date_mdy), Required																		
613	lib_vent_after_ecmo Show the field ONLY if: [ecmo(1)] = '1' or [ecmo(2)] = '1' or [ecmo(3)] = '1' or [ecmo(4)] = '1' or [ecmo(5)] = '1' or [ecmo(6)] = '1' or [ecmo(7)] = '1' or [ecmo_2(1)] = '1' or [ecmo_2(2)] = '1' or [ecmo_2(3)] = '1' or [ecmo_2(4)] = '1' or [ecmo_2(5)] = '1' or [ecmo_2(6)] = '1' or [ecmo_2(7)] = '1'	Successfully liberated from ventilator? Defined as off the ventilator for at least 24 hours. If palliatively extubated, select "no"	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				
614	lib_vent_after_ecmo_date Show the field ONLY if: [lib_vent_after_ecmo] = '1'	Date liberated from ventilator	text (date_mdy), Required																		
615	pntx_after_ecmo Show the field ONLY if: [ecmo(1)] = '1' or [ecmo(2)] = '1' or [ecmo(3)] = '1' or [ecmo(4)] = '1' or [ecmo(5)] = '1' or [ecmo(6)] = '1' or [ecmo(7)] = '1' or [ecmo_2(1)] = '1' or [ecmo_2(2)] = '1' or [ecmo_2(3)] = '1' or [ecmo_2(4)] = '1' or [ecmo_2(5)] = '1' or [ecmo_2(6)] = '1' or [ecmo_2(7)] = '1'	Did the patient develop a pneumothorax requiring chest tube placement at anytime following ECMO cannulation?	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				
616	date_pntx Show the field ONLY if: [pntx_after_ecmo] = '1'	Date of pneumothorax requiring chest tube placement	text (date_mdy), Required																		
617	thrombosis_15_to_28 Show the field ONLY if: [ecmo(1)] = '1' or [ecmo(2)] = '1' or [ecmo(3)] = '1' or [ecmo(4)] = '1' or [ecmo(5)] = '1' or [ecmo(6)] = '1' or [ecmo(7)] = '1' or [ecmo_2(1)] = '1' or [ecmo_2(2)] = '1' or [ecmo_2(3)] = '1' or [ecmo_2(4)] = '1' or [ecmo_2(5)] = '1' or [ecmo_2(6)] = '1' or [ecmo_2(7)] = '1'	New thromboembolic event in the 15-28 days following ICU admission (select all that apply)-Note, this question is limited to days 15-28 following ICU admission because the same question has already been asked on an earlier instrument for days 1-14	checkbox, Required <table border="1"> <tr> <td>1</td> <td>thrombosis_15_to_28__1</td> <td>Deep venous thrombosis (DVT)</td> </tr> <tr> <td>2</td> <td>thrombosis_15_to_28__2</td> <td>Pulmonary embolism (PE)</td> </tr> <tr> <td>3</td> <td>thrombosis_15_to_28__3</td> <td>Stroke</td> </tr> <tr> <td>4</td> <td>thrombosis_15_to_28__4</td> <td>Heparin-induced thrombocytopenia (H.I.T.)</td> </tr> <tr> <td>5</td> <td>thrombosis_15_to_28__5</td> <td>Other thromboembolic event</td> </tr> <tr> <td>6</td> <td>thrombosis_15_to_28__6</td> <td>None of the above</td> </tr> </table>	1	thrombosis_15_to_28__1	Deep venous thrombosis (DVT)	2	thrombosis_15_to_28__2	Pulmonary embolism (PE)	3	thrombosis_15_to_28__3	Stroke	4	thrombosis_15_to_28__4	Heparin-induced thrombocytopenia (H.I.T.)	5	thrombosis_15_to_28__5	Other thromboembolic event	6	thrombosis_15_to_28__6	None of the above
1	thrombosis_15_to_28__1	Deep venous thrombosis (DVT)																			
2	thrombosis_15_to_28__2	Pulmonary embolism (PE)																			
3	thrombosis_15_to_28__3	Stroke																			
4	thrombosis_15_to_28__4	Heparin-induced thrombocytopenia (H.I.T.)																			
5	thrombosis_15_to_28__5	Other thromboembolic event																			
6	thrombosis_15_to_28__6	None of the above																			
618	date_dvt_after_ecmo Show the field ONLY if: [thrombosis_15_to_28(1)] = '1'	Date of DVT	text (date_mdy), Required																		

619	date_pe_after_ecmo Show the field ONLY if: [thrombosis_15_to_28(2)] = '1'	Date of pulmonary embolism	text (date_mdy), Required																														
620	date_stroke_after_ecmo Show the field ONLY if: [thrombosis_15_to_28(3)] = '1'	Date of stroke	text (date_mdy), Required																														
621	date_hit_after_ecmo Show the field ONLY if: [thrombosis_15_to_28(4)] = '1'	Date of Heparin-induced thrombocytopenia (H.I.T.)	text (date_mdy), Required																														
622	date_other_thromb Show the field ONLY if: [thrombosis_15_to_28(5)] = '1'	Date of other thromboembolic event	text (date_mdy), Required																														
623	other_te_event_ecmo Show the field ONLY if: [thrombosis_15_to_28(5)] = '1'	Enter the other thromboembolic event	text, Required																														
624	major_bleed_after_ecmo Show the field ONLY if: [ecmo(1)] = '1' or [ecmo(2)] = '1' or [ecmo(3)] = '1' or [ecmo(4)] = '1' or [ecmo(5)] = '1' or [ecmo(6)] = '1' or [ecmo(7)] = '1' or [ecmo_2(1)] = '1' or [ecmo_2(2)] = '1' or [ecmo_2(3)] = '1' or [ecmo_2(4)] = '1' or [ecmo_2(5)] = '1' or [ecmo_2(6)] = '1' or [ecmo_2(7)] = '1'	New major bleed in the first 15-28 days following ICU admission?-Note, this question is limited to days 15-28 following ICU admission because the same question has already been asked on an earlier instrument for days 1-14. Defined as bleeding in a critical area or organ (e.g., intracranial, retroperitoneal, pericardial, or intramuscular bleeding with compartment syndrome) or bleeding requiring a procedural intervention (e.g., EGD or IR embolization). "Requiring" a procedural intervention could include situations where an intervention would regularly be performed, but was not actually performed because the patient was too unstable, or because of logistical/other concerns related to COVID-19. Blood transfusion alone does not qualify as an intervention.	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No																										
1	Yes																																
0	No																																
625	date_bleed_after_ecmo Show the field ONLY if: [major_bleed_after_ecmo] = '1'	Date major bleed occurred	text (date_mdy), Required																														
626	bleed_location_ecmo Show the field ONLY if: [major_bleed_after_ecmo] = '1'	Location of major bleeding event(s) (select all that apply)	checkbox, Required <table border="1"> <tr> <td>1</td> <td>bleed_location_ecmo__1</td> <td>Bronchopulmonary</td> </tr> <tr> <td>2</td> <td>bleed_location_ecmo__2</td> <td>Pleural</td> </tr> <tr> <td>3</td> <td>bleed_location_ecmo__3</td> <td>Pericardial</td> </tr> <tr> <td>4</td> <td>bleed_location_ecmo__4</td> <td>Peritoneal</td> </tr> <tr> <td>5</td> <td>bleed_location_ecmo__5</td> <td>Retroperitoneal</td> </tr> <tr> <td>6</td> <td>bleed_location_ecmo__6</td> <td>Central nervous system</td> </tr> <tr> <td>7</td> <td>bleed_location_ecmo__7</td> <td>Gastrointestinal</td> </tr> <tr> <td>8</td> <td>bleed_location_ecmo__8</td> <td>Genitourinary</td> </tr> <tr> <td>9</td> <td>bleed_location_ecmo__9</td> <td>Musculoskeletal and soft tissue</td> </tr> <tr> <td>10</td> <td>bleed_location_ecmo__10</td> <td>Other</td> </tr> </table>	1	bleed_location_ecmo__1	Bronchopulmonary	2	bleed_location_ecmo__2	Pleural	3	bleed_location_ecmo__3	Pericardial	4	bleed_location_ecmo__4	Peritoneal	5	bleed_location_ecmo__5	Retroperitoneal	6	bleed_location_ecmo__6	Central nervous system	7	bleed_location_ecmo__7	Gastrointestinal	8	bleed_location_ecmo__8	Genitourinary	9	bleed_location_ecmo__9	Musculoskeletal and soft tissue	10	bleed_location_ecmo__10	Other
1	bleed_location_ecmo__1	Bronchopulmonary																															
2	bleed_location_ecmo__2	Pleural																															
3	bleed_location_ecmo__3	Pericardial																															
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8	bleed_location_ecmo__8	Genitourinary																															
9	bleed_location_ecmo__9	Musculoskeletal and soft tissue																															
10	bleed_location_ecmo__10	Other																															
627	other_bleed_ecmo Show the field ONLY if: [bleed_location_ecmo(10)] = '1'	Enter the location of the other bleed	text, Required																														

628	<p>newinfection_after_ecmo</p> <p>Show the field ONLY if: [ecmo(1)] = '1' or [ecmo(2)] = '1' or [ecmo(3)] = '1' or [ecmo(4)] = '1' or [ecmo(5)] = '1' or [ecmo(6)] = '1' or [ecmo(7)] = '1' or [ecmo_2(1)] = '1' or [ecmo_2(2)] = '1' or [ecmo_2(3)] = '1' or [ecmo_2(4)] = '1' or [ecmo_2(5)] = '1' or [ecmo_2(6)] = '1' or [ecmo_2(7)] = '1'</p>	<p>New infection on days 15 to 28 following ICU admission?-Note, this question is limited to days 15-28 following ICU admission because the same question has already been asked on an earlier instrument for days 1-14. Defined as a suspected or confirmed new infection other than COVID-19. Should be primarily based on culture data (e.g., sputum, blood, urine, and stool), though other infections can also be included (e.g., cellulitis, abscess) if there was a strong clinical suspicion, even in the absence of positive cultures</p>	<p>yesno, Required</p> <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No											
1	Yes																	
0	No																	
629	<p>date_newinf_after_ecmo</p> <p>Show the field ONLY if: [newinfection_after_ecmo] = '1'</p>	<p>Date new infection occurred</p>	<p>text (date_mdy), Required</p>															
630	<p>type_inf_after_ecmo</p> <p>Show the field ONLY if: [newinfection_after_ecmo] = '1'</p>	<p>What infection(s)?</p>	<p>checkbox, Required</p> <table border="1"> <tr> <td>1</td> <td>type_inf_after_ecmo__1</td> <td>Pneumonia (including ventilator-associated pneumonia)</td> </tr> <tr> <td>2</td> <td>type_inf_after_ecmo__2</td> <td>Urosepsis</td> </tr> <tr> <td>3</td> <td>type_inf_after_ecmo__3</td> <td>Biliary sepsis</td> </tr> <tr> <td>4</td> <td>type_inf_after_ecmo__4</td> <td>Bacteremia</td> </tr> <tr> <td>5</td> <td>type_inf_after_ecmo__5</td> <td>Other</td> </tr> </table>	1	type_inf_after_ecmo__1	Pneumonia (including ventilator-associated pneumonia)	2	type_inf_after_ecmo__2	Urosepsis	3	type_inf_after_ecmo__3	Biliary sepsis	4	type_inf_after_ecmo__4	Bacteremia	5	type_inf_after_ecmo__5	Other
1	type_inf_after_ecmo__1	Pneumonia (including ventilator-associated pneumonia)																
2	type_inf_after_ecmo__2	Urosepsis																
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631	<p>rrt_after_ecmo</p> <p>Show the field ONLY if: [ecmo(1)] = '1' or [ecmo(2)] = '1' or [ecmo(3)] = '1' or [ecmo(4)] = '1' or [ecmo(5)] = '1' or [ecmo(6)] = '1' or [ecmo(7)] = '1' or [ecmo_2(1)] = '1' or [ecmo_2(2)] = '1' or [ecmo_2(3)] = '1' or [ecmo_2(4)] = '1' or [ecmo_2(5)] = '1' or [ecmo_2(6)] = '1' or [ecmo_2(7)] = '1'</p>	<p>Requirement for new renal replacement therapy (dialysis) at any time on days 15-28 following ICU admission?-Note, this question is limited to days 15-28 following ICU admission because the same question has already been asked on an earlier instrument for days 1-14.-Only answer "yes" if the patient required new renal replacement therapy on any of days 15-28 and did NOT require it on days 1-14.</p>	<p>yesno, Required</p> <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No											
1	Yes																	
0	No																	
632	<p>date_rrt_after_ecmo</p> <p>Show the field ONLY if: [rrt_after_ecmo] = '1'</p>	<p>Date renal replacement therapy initiated</p>	<p>text (date_mdy), Required</p>															
633	<p>additional_ecmo_data_complete</p>	<p>Section Header: <i>Form Status</i> Complete?</p>	<p>dropdown</p> <table border="1"> <tr> <td>0</td> <td>Incomplete</td> </tr> <tr> <td>1</td> <td>Unverified</td> </tr> <tr> <td>2</td> <td>Complete</td> </tr> </table>	0	Incomplete	1	Unverified	2	Complete									
0	Incomplete																	
1	Unverified																	
2	Complete																	