

11. What was the primary reason¹ for referral to the ICU? (please tick **one**)

Respiratory failure or insufficiency from:

- A1 Asthma / allergy
- A2 COPD
- A3 Pulmonary oedema (noncardiogenic)
- A4 Post respiratory arrest
- A5 Aspiration / poisoning / toxic
- A6 Pulmonary embolus
- A7 Infection
- A8 Neoplasm

Trauma:

- B1 Multiple trauma
- B2 Head injury

Cardiovascular failure or insufficiency from:

- C1 Hypertension
- C2 Rhythm disturbance
- C3 Congestive heart failure
- C4 Haemorrhagic shock/ hypovolaemia
- C5 Coronary artery disease
- C6 Sepsis
- C7 Post cardiac arrest
- C8 Cardiogenic shock
- C9 Dissecting thoracic/ abdominal aneurysm

Neurological:

- D1 Seizure disorder
- D2 Intra cranial/ sub-dural/ sub-arachnoid bleed

Other

- E1 Drug overdose
- E2 Diabetic ketoacidosis
- E3 GI bleeding

If not one of the above, which organ system was the principle reason for admission:

- F1 Cardiovascular
- F2 Gastrointestinal
- F3 Liver
- F4 Metabolic / renal
- F5 Neurological
- F6 Respiratory

12a. If your ICU uses APACHE II², what was the patient's first score on admission to the ICU? (0-71)

12b. If the patient has an APACHE II score, was the score modified to compute the risk of hospital death? i.e. was the APACHE score weighted according to the diagnostic categories in question 11 (see note 1)

- Yes No Unknown

12c. If the patient has no APACHE II score, or if it is unknown whether the APACHE II score was weighted, please complete the table (opposite) for the first available recording of physiological data for the patient on admission to the ICU (so that the APACHE II score can be calculated)

13a. If the patient has a Glasgow Coma Score, what was the patient's first score on admission to the ICU? (3-15)

13b. If the patient does not have a Glasgow Coma Score, please complete the following:

Best eye response

- 1 No eye opening
- 2 Eye opening to pain
- 3 Eye opening to verbal command
- 4 Eyes open spontaneously

Best verbal response

- 1 No verbal response
- 2 Incomprehensible sounds
- 3 Inappropriate words
- 4 Confused
- 5 Orientated

Best motor response

- 1 No motor response
- 2 Extension to pain
- 3 Flexion to pain
- 4 Withdrawal from pain
- 5 Localising pain
- 6 Obeys commands

1. Principle diagnostic categories leading to ICU admission from: Knaus WA, Draper EA, Wagner DP, Zimmerman JE. APACHE II: A severity of disease classification system. *Crit Care Med* 1985; (13) 818 – 827

2. Knaus WA, Draper EA, Wagner DP, Zimmerman JE. APACHE II: A severity of disease classification system. *Crit Care Med* 1985; (13) 818 – 827

Table for Question 12c.									
PHYSIOLOGICAL VARIABLE	High Abnormal Range					Low Abnormal Range			
	+4	+3	+2	+1	0	+1	+2	+3	+4
Central Temperature (°C)	≥41 <input type="checkbox"/>	39-40.9 <input type="checkbox"/>		38.5-38.9 <input type="checkbox"/>	36-38.4 <input type="checkbox"/>	34-35.9 <input type="checkbox"/>	32-33.9 <input type="checkbox"/>	30-31.9 <input type="checkbox"/>	≤29.9 <input type="checkbox"/>
Mean Arterial Pressure (mmHg)	≥160 <input type="checkbox"/>	130-159 <input type="checkbox"/>	110-129 <input type="checkbox"/>		70-109 <input type="checkbox"/>		50-69 <input type="checkbox"/>		≤49 <input type="checkbox"/>
Heart Rate (beats/min)	≥180 <input type="checkbox"/>	140-179 <input type="checkbox"/>	110-139 <input type="checkbox"/>		70-109 <input type="checkbox"/>		55-69 <input type="checkbox"/>	40-54 <input type="checkbox"/>	≤39 <input type="checkbox"/>
Respiratory Rate non-ventilated or ventilated (breath/min)	≥50 <input type="checkbox"/>	35-49 <input type="checkbox"/>		25-34 <input type="checkbox"/>	12-24 <input type="checkbox"/>	10-11 <input type="checkbox"/>	6-9 <input type="checkbox"/>		≤5 <input type="checkbox"/>
Oxygenation: A-aDO ₂ or PO ₂ (mmHg)	A-aDO ₂ ≥500 <input type="checkbox"/>	A-aDO ₂ 350-449 <input type="checkbox"/>	A-aDO ₂ 200-349 <input type="checkbox"/>		A-aDO ₂ <200 <input type="checkbox"/>				
a. FiO ₂ ≥ 0.5 record A-aDO ₂	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				
b. FiO ₂ < 0.5 record only PaO ₂					PO ₂ >70 <input type="checkbox"/>	PO ₂ 61-70 <input type="checkbox"/>		PO ₂ 55-60 <input type="checkbox"/>	PO ₂ <55 <input type="checkbox"/>
Arterial pH (H ⁺)	≥7.7 <input type="checkbox"/>	7.6-7.69 <input type="checkbox"/>		7.5-7.59 <input type="checkbox"/>	7.33-7.49 <input type="checkbox"/>		7.25-7.32 <input type="checkbox"/>	7.15-7.24 <input type="checkbox"/>	<7.15 <input type="checkbox"/>
Serum Sodium (mMol/L)	≥180 <input type="checkbox"/>	160-179 <input type="checkbox"/>	155-159 <input type="checkbox"/>	150-154 <input type="checkbox"/>	130-149 <input type="checkbox"/>		120-129 <input type="checkbox"/>	111-119 <input type="checkbox"/>	≤110 <input type="checkbox"/>
Serum Potassium (mMol/L)	≥7 <input type="checkbox"/>	6-6.9 <input type="checkbox"/>		5.5-5.9 <input type="checkbox"/>	3.5-5.4 <input type="checkbox"/>	3-3.4 <input type="checkbox"/>	2.5-2.9 <input type="checkbox"/>		<2.5 <input type="checkbox"/>
Serum Creatinine (µMol/L)	≥3.5 <input type="checkbox"/>	2-3.4 <input type="checkbox"/>	1.5-1.9 <input type="checkbox"/>		0.6-1.4 <input type="checkbox"/>		<0.6 <input type="checkbox"/>		
Haemocrit (%)	≥60 <input type="checkbox"/>		50-59.9 <input type="checkbox"/>	46-49.9 <input type="checkbox"/>	30-45.9 <input type="checkbox"/>		20-29.9 <input type="checkbox"/>		<20 <input type="checkbox"/>
White Blood Count (x10 ³ /mm ³)	≥40 <input type="checkbox"/>		20-39.9 <input type="checkbox"/>	15-19.9 <input type="checkbox"/>	3-14.9 <input type="checkbox"/>		1-2.9 <input type="checkbox"/>		<1 <input type="checkbox"/>
Chronic organ insufficiency or immunocompromised [#]	<input type="checkbox"/> Yes <input type="checkbox"/> No								

Aa-DO₂: alveolar-arterial oxygen difference; PaO₂: arterial partial pressure of oxygen; FiO₂: fraction of inspired oxygen

[#]Organ insufficiency or immunocompromised state must have preceded the current admission and must conform to the following criteria: *liver*, biopsy proven cirrhosis and documented portal hypertension, episodes of upper GI bleeding due to portal hypertension, or prior episodes of hepatic failure, coma or encephalopathy; *cardiovascular*, New York Heart Association Class IV; *respiratory*, severe exercise restriction due to chronic restrictive, obstructive or vascular disease, documented chronic hypoxia, hypercapnia, secondary polycythaemia, severe pulmonary hypertension (≥40 mmHg) or respiratory dependency; *renal*, on chronic dialysis; and *immunocompromised*, the patient has received treatment that suppresses resistance to infection, e.g. immunosuppression, chemotherapy, radiation therapy, long term steroid use, high dose steroid therapy or has a disease interfering with immune function such as lymphoma, leukaemia or AIDS.

14. Is there documented evidence that the patient suffered from any of the following **on admission** to the ICU?

- A. Malignant disease Yes No Unknown
- B. MRSA Yes No Unknown
- C. Cirrhosis Yes No Unknown
- D. Ischaemic Heart Disease (i.e. history of angina myocardial infarction) Yes No Unknown

15a. Was an intensive care consultant **present** at the time the patient was admitted? Yes No Unknown

15b. If no, Date patient first seen by intensive care consultant

Time patient first seen by intensive care consultant (use 24 hour clock)

d d

m m

y y

h h

m m

