

## BASELINE

Hotline: + 45 9357 7750

The registration below is based on information from the first day in ICU.

#	Question	Answer	Unit	Info	Validation and limits decimals	Further comments for data manager
BL1	Sex?	<input type="checkbox"/> Male <input type="checkbox"/> Female			Single select Required	
BL2	Hospital admission date?	_ _ - _ _ - _ _ _ _	dd-mm-yyyy	If the patient was transferred directly from another hospital, report the date of admission to the first hospital	Required	Date and time must be prior to randomisation
BL3	Date of ICU admission?	_ _ - _ _ - _ _ _ _	dd-mm-yyyy	If the patient was transferred directly from another ICU, please write the date of admission to the first ICU	Required	ICU admission must be after or on the same day as hospital admission
BL4	Time of ICU admission?	_ _ - _ _	24 hours, hh:mm	If the patient was transferred directly from another ICU, please write the time of admission to the first ICU	Required	

BL5	Did the patient receive <u>elective</u> surgery within the last 7 days prior to ICU admission during current hospital admission?	<input type="checkbox"/> YES <input type="checkbox"/> NO		Elective surgery is defined as surgery scheduled 24 hours or more in advance. Includes surgery at another hospital.	Single select Required	
BL6	Did the patient receive <u>emergency</u> surgery within the last 24 hours before ICU admission?	<input type="checkbox"/> YES <input type="checkbox"/> NO		Emergency surgery is defined as surgery added to operating room plan 24 hours or less prior to surgery. Includes surgery in another hospital.	Single select Required	
<b>Co-morbidities</b>						
BL7	Does the patient have metastatic cancer?	<input type="checkbox"/> YES <input type="checkbox"/> NO		YES; if proven metastasis by surgery, CT scan or any other method.	Single select Required	
BL8	Does the patient have haematological cancer?	<input type="checkbox"/> YES <input type="checkbox"/> NO		YES, if any of the following: Leukemia: Acute lymphoblastic leukemia (ALL) Acute myelogenous leukemia (AML)	Single select Required	

				<p>Chronic myelogenous leukemia (CML)                  Chronic lymphocytic leukemia (CLL)</p> <p>Lymphoma:                  Hodgkin's disease                  Non-Hodgkin's disease                  e.g. :                  small lymphocytic lymphoma (SLL), Diffuse large B-cell lymphoma (DLBCL), Follicular lymphoma (FL), Mantle cell lymphoma (MCL), Hairy cell leukemia (HCL), Marginal zone lymphoma (MZL), Burkitt's lymphoma (BL), Post-transplant lymphoproliferative disorder (PTLD), T-cell prolymphocytic leukemia (T-PLL), B-cell prolymphatic (B-PLL), Waldenström's macroglobulinemia, Other NK- or T-cell lymphomas</p> <p>Multiple myeloma/plasma cell myeloma</p>		
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**Risk factors for delirium prior to hospital/ICU admission**

BL9	Does the patient have a history of traumatic brain injury within the last 6 months?	<input type="checkbox"/> YES <input type="checkbox"/> NO		YES, if the patient has experienced a permanent or temporary brain dysfunction caused by an external force within the last 6 months.	Single select Required	
BL10	Does the patient have a history of stroke within the last 6 months?	<input type="checkbox"/> YES <input type="checkbox"/> NO		YES, if the patient has experienced an ischemic or haemorrhagic stroke confirmed by CTC or MRI scan within the last 6 months.	Single select Required	
BL11	Does the patient have a history of mental illness?	<input type="checkbox"/> YES <input type="checkbox"/> NO		Mental illness is defined as schizophrenia (or other psychotic disorder) or major affective disorders (ICD10: F2x or F3x disorders). The diagnosis will be verified by an established (previous or current) diagnosis, and/or previous or current treatment with psychotropic medication (antipsychotics; antidepressants or mood stabilisers).	Single select Required	
BL12	Does the patient have a history of	<input type="checkbox"/> YES <input type="checkbox"/> NO		Neurodegenerative disease is defined as an established diagnosis of	Single select Required	

	neurodegenerative illness?			dementia or Parkinson's disease (ICD10: F02-F04; DG20), and/or previous or current treatment with psychotropic medication (acetylcholinesterase inhibitors, dopamine agonists, or levodopa).		
BL13	Has the patient received any treatment with haloperidol before ICU admission?	<input type="checkbox"/> YES <input type="checkbox"/> NO		YES, if the patient has received one or more doses of oral or IV haloperidol, before being admitted to the ICU. Only for this hospitalisation.	Single select Required	
BL14	Does the patient smoke?	<input type="checkbox"/> YES <input type="checkbox"/> NO		YES, if the patient smokes every day. If pack years are mentioned in the patient journal and the patient still smokes, answer 'YES'.	Single select Required	
BL15	Does the patient have any alcohol abuse?	<input type="checkbox"/> YES <input type="checkbox"/> NO		YES, if the patient has alcohol consumption above 21 units of alcohol for men and 14 units of alcohol for women on a weekly basis. (1unit is defined as 12g of alcohol).	Single select Required	
BL16	Does the patient have any other substance abuse?	<input type="checkbox"/> YES <input type="checkbox"/> NO		YES, if the patient has daily use of <b>morphine</b> , <b>benzodiazepines</b> or <b>barbiturates</b> not prescribed by a physician. Or any other use of illegal substances.	Single select Required	

BL17	Does the patient receive benzodiazepines?	<input type="checkbox"/> YES <input type="checkbox"/> NO		YES, if the patient is being treated with <b>benzodiazepines (N05BA) (N05CD08) at admission or before admission to ICU</b> , such as; Diazepam, Oxazepam, Lorazepam, Bromazepam, Cloxazolam, Midazolam.	Single select Required	
<b>SMS-ICU (Simplified Mortality Score for the Intensive Care Unit)</b>						
BL18	Lowest systolic blood pressure within the last 24 hours prior to randomisation?	_ _	mmHg		Do not allow decimals Required Limits? Laveste og højeste mulige værdi at indtaste?	
BL19	Did the patient receive vasopressor/ inotropes within the last 24 hours prior to randomisation?	<input type="checkbox"/> YES <input type="checkbox"/> NO		Continuous infusion of vasopressor or inotropes (norepinephrine, epinephrine, phenylephrine, vasopressin analogues, dopamine, dobutamin, milrinone or levosimendan) within the last 24 hours prior to randomisation.	Single select Required	
BL20	Did the patient receive respiratory support within the last 24 hours prior to randomisation?	<input type="checkbox"/> YES <input type="checkbox"/> NO		Invasive or non-invasive mechanical ventilation including continuous mask CPAP or CPAP via tracheostomy within the last 24 hours prior to randomisation. Intermittent	Single select Required	

				CPAP is NOT considered as respiratory support.		
BL21	Did the patient receive renal replacement therapy within the last 24 hours prior to randomisation?	<input type="checkbox"/> YES <input type="checkbox"/> NO		Acute or chronic intermittent or continuous renal replacement within the last 24 hours prior to randomisation.	Single select Required	