

# **Extracorporeal Life Support Organization (ELSO)**

# ELSO Registry ECPR Addenda Data Definitions 02/13/2025

For all comments, questions and concerns please email <u>registrysupport@elso.org</u>

# Preface

This document is intended to assist data entry and identify definitions for each field. This document is organized into the sections and subsections that exist on the database registry. We also attempt to identify if fields will be incorporated in mandatory fields or major complication fields by highlighting those data elements.

However, if centers chose to submit data elements of the ECPR Addendum, there is a CORE DATASET which is maintained by many of the ECPR Addendum elements being MANDATORY fields

# **Descriptions of fields in this document**

Field Name is the name of the variable as it appears in the online application at www.ELSO.org.

**Definition/ Explanation/ Example** provides the definition of the variable with an explanation of the how to collect the variable and, when appropriate, an example of choosing the correct data collection

**Data Entry Rules** refers to formatting rules for data entry and any warnings or restrictions on data entry. For example, the user will receive a **Soft Notification** or warning when entering data that falls outside common values or if that value could represent a more common entry in a different unit. The warning does not necessarily mean data has been entered incorrectly; it is just an opportunity for the user to double check data entry. The data enterer will receive a **Hard Limit** when data is restricted from entry. This means ELSO assesses the value to be incorrect. For example, the entry of ECLS Start Time after the Date of Death is not allowed. Occasionally it is necessary for Data Entry Rules to vary by age group in ELSO. There are three mutually exclusive ELSO age groups: **Neonate** (0-28 days), **Pediatric** (29 days- 17 years), and **Adult** (≥ 18 years). The **Soft Notification** for the **Field Name** "Admission Weight" is different for each age group. (The possibility of error exists; please email Peter Rycus at <u>prycus@elso.org</u> if an unwarranted Hard Limit is received).

**Collection / Modification** describes the dates during which the data has been collected. If there was a modification of the method by which a variable is collected, the date when that modification occurred is noted here.

**Table Name** is a descriptor that provides the name of the table in which a given variable is stored. ELSO data is a relational database, meaning that different data elements are stored in different tables with common rows that allow merging of tables.

**Column Name / Stored Values** describes the column or variable name and stored values for a given variable. For example, the data field "**Hand Bag Valve Ventilation**" is stored under Column Name (or variable name) "**HandBagging.**" Handbagging has the and is stored with values "**No = 0**", "**Yes = 1**", and "**Unknown = -1.**"

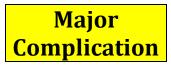
# **Mandatory Fields and Major Complications**

We indicate mandatory fields in two ways. First, the box for the **Field Name** has a red background (see below). Second, the **Definition/ Explanation/ Example** includes the sentence "**This is a required field.**" See example below:



Major complications

We indicate major complications by shading the background of the **Field Name** yellow. See example below:



# **Changes for this rollout**

We indicate items that have been added or changed usingn this green highlighted box throughout this document to bring your attention to what is new and changed in this version. See example below:



# **Extracorporeal Life Support Organization (ELSO) Registry Data Definitions**

# When is it Extracorporeal Cardiopulmonary Resuscitation (ECPR)?

• ECPR is the application of rapid-deployment venoarterial extracorporeal membrane oxygenation to provide circulatory support in patients in whom conventional cardiopulmonary resuscitation (CPR) is unsuccessful in achieving sustained return of spontaneous circulation (ROSC).

# When is return of spontaneous circulation?

• Sustained ROSC is deemed to have occurred when chest compressions are not required for 20 consecutive minutes and signs of circulation persist (Jacobs et al, Cardiac arrest and CPR outcome reports: Utstein templates from ILCOR Circulation.2004; 110 (21):3385-97; and Conrad et al, The Extracorporeal Life Support Organization Maastricht Treaty for Nomenclature in Extracorporeal Life Support. A Position Paper of the Extracorporeal Life Support Organization. Am J Respir Crit Care Med. 2018; 198(4):447-451.

# When is it not ECPR?

• Cardiac or Respiratory arrest requiring CPR but with sustained ROSC with no chest compressions for 20 consecutive minutes prior to ECMO cannulation does not fulfil ECPR definition.

# I. Pre-Cardiopulmonary Arrest

This section details the cardiopulmonary failure resulting in ECPR. ICD-10 Diagnosis Codes should be included on the main Registry Data Entry Form to support selections.

Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/ Modification	Table Name	Column Name / Stored Values
Cardiac	This field relates the use of ECPR for cardiopulmonary arrest related to cardiac and cardiovascular dysfunction. It may be selected for the use of extracorporeal membrane oxygenation with a primary indication for support of left and/or right ventricular failure by providing cardiac and gas exchange support.	One selection must be made.		ECPR.ECPR2020Addendum	PrecipitatingEven
	<b>Patient Z,</b> a 55 year old, suffered a cardiac arrest after a myocardial infarction. He achieved ROSC during ECMO cannulation, 5 minutes before full flows were achieved. Choose precipitating event type Cardiac.				
Non-Cardiac	This field relates to the use of ECPR for cardiopulmonary arrest related to respiratory, infective, neurological etiologies <i>without</i> primary cardiac involvement. It may be selected for the use of extracorporeal membrane oxygenation with a primary indication for support of respiratory failure by providing gas exchange support. Does not imply any specific ECLS mode or cannulation configuration.	One selection must be made.		ECPR.ECPR2020Addendum	PrecipitatingEver
	<b>Patient X,</b> a 3 year old, suffered a cardiac arrest during intubation for an asthma exacerbation. He was placed on V-A ECMO through the neck during active CPR. Choose precipitating event type 'Non-cardiac'.				
Unknown	This field relates to the use of ECPR in the event of unwitnessed cardiopulmonary arrest. Use this field if no information about pre-existing illness is available for the patient at the time of cannulation to ECMO. By Jacobs et al 2004 Utstein template criteria (Circulation. 2004;110:3385-3397; Resuscitation 63 (2004) 233–249), a cardiopulmonary arrest is presumed to be of cardiac etiology unless it is known or likely to have been caused by trauma, submersion, drug overdose, asphyxia, exsanguination, or any other noncardiac cause as best	One selection must be made.		ECPR.ECPR2020Addendum	PrecipitatingEven

# **Antecedent Events**

The antecedent event should be present in the prior 4 hours to event unless specified. Should be active and contributing directly to patient's immediate condition. Multiple selections may be made. ICD-10 Diagnosis Codes should be included on the main Registry Data Entry Form to support selections. **This is a required field as one selection must be made.** 

Cardiac					
Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/ Modification	Table Name	Column Name / Stored Values
Ventricular Dysfunction	This field collects patients with life- threatening hypotension despite rapidly escalating inotropic support, critical organ hypoperfusion, often confirmed by worsening acidosis and/or lactate levels or patient with declining ventricular function despite intravenous inotropic support (INTERMACS profiles 1 and 2)	One selection must be made.		ECPR.ECPR2020AntecedentEvents	Eventid 1 Lookup table: ECPR.ECPR2020AntecedentEventsCodes
Vasoplegia	This field collects patients with impaired vascular tone resulting in vasodilatation and hypotension despite escalating vasopressor support, resulting in critical organ hypoperfusion, often confirmed by worsening acidosis and/or lactate levels. May result from etiologies such as sepsis, septic shock, inflammation, neurogenic shock, etc.	One selection must be made.		ECPR.ECPR2020AntecedentEvents	Eventid 2 Lookup table: ECPR.ECPR2020AntecedentEventsCodes
Cardiac Tamponade	This field collects patients with hemodynamically significant cardiac tamponade by clinical or imaging (echocardiogram) criteria regardless of cause.	One selection must be made.		ECPR.ECPR2020AntecedentEvents	EventId 3 Lookup table: ECPR.ECPR2020AntecedentEventsCodes
Obstructive Shock	This field collects patients with obstructive shock due to pulmonary emboli, but may also be due to other forms of emboli, atrial myxoma, etc.	One selection must be made.		ECPR.ECPR2020AntecedentEvents	EventId 4 Lookup table: ECPR.ECPR2020AntecedentEventsCodes
Arrhythmia	This field collects patients who had hemodynamically significant acute onset of cardiac arrhythmia demonstrated by 3- lead rhythm strip or 12-lead ECG.	One selection must be made.		ECPR.ECPR2020AntecedentEvents	EventId 5 Lookup table: ECPR.ECPR2020AntecedentEventsCodes

# **Antecedent Events (continued)**

The antecedent event should be present in the prior 4 hours to event unless specified. Should be active and contributing directly to patient's immediate condition. Multiple selections may be made. ICD-10 Diagnosis Codes should be included on the main Registry Data Entry Form to support selections. **This is a required field as one selection must be made.** 

#### Non-Cardiac

Non-Cardiac		<u> </u>			
Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/ Modification	Table Name	Column Name / Stored Values
Hypoxemia	This field collects patients who had clinical determination of hypoxemia different from patient baseline and not corrected with supplemental oxygen or escalation to positive pressure ventilation.	One selection must be made.		ECPR.ECPR2020AntecedentEvents	Eventid 6 Lookup table: ECPR.ECPR2020AntecedentEventsCodes
Hypercarbia / Respiratory Acidosis	Arterial paCO2 of >90mmHg (or 12kPa) and/or pH <7.2 from uncompensated hypercapnia (References:1. UK collaborative randomised trial of neonatal extracorporeal membrane oxygenation. UK Collaborative ECMO Trail Group. Lancet. 1996 348(9020):75-82. PubMed PMID: 8676720. And 2. Peek GJ, et al CESAR trial collaboration. Efficacy and economic assessment of conventional ventilatory support versus extracorporeal membrane oxygenation for severe adult respiratory failure (CESAR): a multicentre randomised controlled trial. Lancet. 2009 374(9698):1351-63. Erratum in: Lancet. 2009 Oct 17;374(9698):1330. PubMed PMID: 19762075.)	One selection must be made.		ECPR.ECPR2020AntecedentEvents	EventId 7 Lookup table: ECPR.ECPR2020AntecedentEventsCodes
Pulmonary Hemorrhage	Requiring pRBC transfusion (>20ml/kg/24 hrs of PRBCS or >3U PRBCs/24 hrs in neonates and pediatrics and >3U PRBCS/24 hrs in adults)	One selection must be made.		ECPR.ECPR2020AntecedentEvents	EventId 8 Lookup table: ECPR.ECPR2020AntecedentEventsCodes
Pneumothorax	Requiring insertion of chest drain	One selection must be made.		ECPR.ECPR2020AntecedentEvents	EventId 9 Lookup table: ECPR.ECPR2020AntecedentEventsCodes

Neurological	Neurological								
Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/	Table Name	Column Name /				
			Modification		Stored Values				
Impending	This field collects patients who had	One selection		ECPR.ECPR2020AntecedentEvents	EventId 10				
Herniation	complete or impending brainstem	must be made.			Lookup table:				
Syndrome	herniation precipitating intervention.				ECPR.ECPR2020AntecedentEventsCodes				

Toxic/Metab	Toxic/Metabolic								
Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/	Table Name	Column Name /				
			Modification		Stored Values				
Metabolic	pH <7.2 without hypercapnia [i.e. paCO2	One selection		ECPR.ECPR2020AntecedentEvents	EventId 11				
Acidosis	<60mmHg (or 8kPa)]	must be made.			Lookup table:				
ACIUOSIS					ECPR.ECPR2020AntecedentEventsCodes				

Other	Other									
Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/	Table Name	Column Name /					
			Modification		Stored Values					
Unknown	Use this field if no information about pre-	One selection		ECPR.ECPR2020AntecedentEvents	EventId 12					
	existing illness is available for the patient	must be made.			Lookup table:					
	at the time of cannulation to ECMO.				ECPR.ECPR2020AntecedentEventsCodes					
None	Use this field if the patient is known to	One selection		ECPR.ECPR2020AntecedentEvents	EventId 13					
	have no relevant prior medical history at	must be made.			Lookup table:					
	the time of cannulation to ECMO.				ECPR.ECPR2020AntecedentEventsCodes					

## **Co-Morbid Conditions**

The comorbid condition was present in the 24 hours prior to event unless specified. The condition should be active and contributing directly to patient's condition. Multiple selections may be made. ICD-10 Diagnosis Codes should be included on the main Registry Data Entry Form to support selections. **This is a required field as one selection must be made.** 

Cardiac					
Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/ Modification	Table Name	Column Name / Stored Values
Acute Coronary Syndrome	This field collects patients who had clinical determination of hypoxemia different from patient baseline and not corrected with supplemental oxygen or escalation to positive pressure ventilation.	One selection must be made.		ECPR.ECPR2020CMconditions	ConditionId 1 Lookup table: ECPR.ECPR2020CMconditionCodes
CHD- acyanotic	This field collects patients with Congenital heart disease with SpO2 > 94% at baseline - acyanotic (pediatric, newborn, adult congenital heart disease). Structural congenital heart disease without limitation of pulmonary blood flow or obligatory right to left shunt or mixing lesion (eg any repaired biventricular circulation - atrioventricular canal). Baseline oxygen saturations should be normal, without the clinical findings of cyanosis.			ECPR.ECPR2020CMconditions	ConditionId 2 Lookup table: ECPR.ECPR2020CMconditionCodes
CHD— cyanotic	This field collects patients with Congenital heart disease with SpO2 <94% at baseline - cyanotic (pediatric, newborn, adult congenital heart disease). Structural congenital heart disease with either limitation of pulmonary blood flow (eg Tetralogy of Fallot) or obligatory right to left shunt or mixing lesion (e.g. tricuspid atresia) resulting in lower than normal oxygen saturation and the clinical pattern of cyanosis.			ECPR.ECPR2020CMconditions	ConditionId 3 Lookup table: ECPR.ECPR2020CMconditionCodes
CHF	This field collects patients, who during the inpatient episode of care, has the clinical features (before ECMO cannulation) of congestive heart failure due to failure of the left ventricle, the right ventricle or both. Symptoms and signs include shortness of breath (dyspnea),			ECPR.ECPR2020CMconditions	ConditionId 4 Lookup table: ECPR.ECPR2020CMconditionCodes

	reduced exercise tolerance, edema, hepatic congestion, enlarged heart (cardiomegaly on CXR or dilated cardiomyopathy on echocardiogram), reduced ventricular systolic function.			
CV Shoc	This field collects patients with clinical findings of low cardiac output with end-organ hypoperfusion and hypotension. Causes may include but are not limited to acute coronary syndrome, post-cardiotomy, pulmonary embolism or arrhythmia.		ECPR.ECPR2020CMconditions	ConditionId 5 Lookup table: ECPR.ECPR2020CMconditionCodes

The comorbid condition was present in the 24 hours prior to event unless specified. The condition should be active and contributing directly to patient's condition. Multiple selections may be made. ICD-10 Diagnosis Codes should be included on the main Registry Data Entry Form to support selections. This is a required field as one selection must be made.

#### Cardiac

Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/	Table Name	Column Name /
			Modification		Stored Values
	This field collects patients with low cardiac			ECPR.ECPR2020CMconditions	ConditionId 6
Cardiac	output secondary to constrictive physiology				Lookup table:
Tamponade	regardless of cause (may be fluid, blood, clot				ECPR.ECPR2020CMconditionCodes
	collection, pericardial disease etc.)				
	This field collects patients with hemodynamically			ECPR.ECPR2020CMconditions	ConditionId 7
Arrhythmia	significantly acute onset of cardiac arrhythmia				Lookup table:
	demonstrated in 3-lead or 12-lead ECG.				ECPR.ECPR2020CMconditionCodes
	This field collects patients with clinically			ECPR.ECPR2020CMconditions	ConditionId 8
	significant (i.e., documented by cardiac cath or				Lookup table:
	requiring pulmonary vasodilators) Pulmonary				ECPR.ECPR2020CMconditionCodes
PHN	Hypertension either idiopathic or secondary;				
	including pulmonary hypertension directly				
	related to existing acquired or				
	unrepaired/residual congenital heart disease.				
	This field collects patients with radiologically			ECPR.ECPR2020CMconditions	ConditionId 9
	proven pulmonary embolism (note: symptoms				Lookup table:
PE	and signs of PE are variable and non-specific, so				ECPR.ECPR2020CMconditionCodes
	only radiologically proved PE should be				
	documented).				

The comorbid condition was present in the 24 hours prior to event unless specified. The condition should be active and contributing directly to patient's condition. Multiple selections may be made. ICD-10 Diagnosis Codes should be included on the main Registry Data Entry Form to support selections. **This is a required field as one selection must be made.** 

#### Pulmonary

Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/	Table Name	Column Name /
			Modification		Stored Values
Critical Airway Emergency	This field collects patients with a critical airway emergency including the upper airway or lower airway. Examples include but are not limited to foreign bodies, tracheostomy or endotracheal tube dislodgement, airway trauma, vocal cord paralysis or dysfunction and laryngotracheobronchitis.			ECPR.ECPR2020CMconditions	ConditionId 10 Lookup table: ECPR.ECPR2020CMconditionCodes
Mediastinal Mass	This field collects patients with any thoracic or abdominal mass impacting effective ventilation.			ECPR.ECPR2020CMconditions	ConditionId 11 Lookup table: ECPR.ECPR2020CMconditionCodes
Obstructive Airways Disease	This field collects patients with severe asthma or obstructive airways disease. Examples may include those cases refractory to standard therapy (i.e., intubation, inhaled anesthetics, multiple classes of bronchodilator therapy, etc.).			ECPR.ECPR2020CMconditions	ConditionId 12 Lookup table: ECPR.ECPR2020CMconditionCodes
Lung Disease	This field collects patients with Hypoxic or hypercarbic acute respiratory failure, acute lung injury, pneumonia and/or ARDS requiring intervention. This may or may not meet strict AECC or Berlin Criteria for ALI/ARDS.			ECPR.ECPR2020CMconditions	ConditionId 13 Lookup table: ECPR.ECPR2020CMconditionCodes

The comorbid condition was present in the 24 hours prior to event unless specified. The condition should be active and contributing directly to patient's condition. Multiple selections may be made. ICD-10 Diagnosis Codes should be included on the main Registry Data Entry Form to support selections. **This is a required field as one selection must be made.** 

#### Neurological

Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/	Table Name	Column Name /
FIEIU Naille	Demittion / Explanation / Example	Data Entry Rules	Modification	Table Name	
			Woullication		Stored Values
	This field collects patients with neurological			ECPR.ECPR2020CMconditions	ConditionId 14
	deterioration associated with a non-				Lookup table:
Acute CNS	cerebrovascular accident event documented by				ECPR.ECPR2020CMconditionCodes
Non-Stroke	radiographic, electrographic, laboratory, or				
Event	other objective means. Examples include but are				
Lvent	not limited to space occupying lesions, seizure,				
	aneurysm, encephalitis, meningitis and other				
	encephalopathy.				
	This field collects patients with acute ischemic			ECPR.ECPR2020CMconditions	ConditionId 15
Acute	cerebrovascular event documented by				Lookup table:
Ischemic	radiographic imaging. Choose this option if				ECPR.ECPR2020CMconditionCodes
Stroke	ischemia is present, even if hemorrhage is also				
	present.				
	This field collects patients with acute			ECPR.ECPR2020CMconditions	ConditionId 16
Hemorrhagic	hemorrhagic cerebrovascular event documented				Lookup table:
Stroke	by radiographic imaging. Choose this option if				ECPR.ECPR2020CMconditionCodes
STICKE	hemorrhage is present, even if this is considered				
	to be related to a prior ischemic event.				
	This field collects patients with injury or insult			ECPR.ECPR2020CMconditions	ConditionId 17
Spinal Cord	resulting in disruption of the autonomic				Lookup table:
Injury	pathways within the spinal cord which may				ECPR.ECPR2020CMconditionCodes
	result in vasoplegia.				

The comorbid condition was present in the 24 hours prior to event unless specified. The condition should be active and contributing directly to patient's condition. Multiple selections may be made. ICD-10 Diagnosis Codes should be included on the main Registry Data Entry Form to support selections. **This is a required field as one selection must be made.** 

# Toxic/Metabolic

Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/	Table Name	Column Name /
			Modification		Stored Values
Pre-existing Chronic Renal Failure	This field collects patients with pre-existing chronic abnormalities of kidney structure or function, present for >3 months, with implications for health with any cause, GFR category, and albuminuria category (CGA) - KDIGO 2012.			ECPR.ECPR2020CMconditions	ConditionId 18 Lookup table: ECPR.ECPR2020CMconditionCodes
Intoxication/ Ingestion	This field collects patients with intentional or non-intentional ingestion or intoxication resulting in clinically significant findings including but not limited to shock, acute respiratory failure, dysrhythmia and acidosis.			ECPR.ECPR2020CMconditions	ConditionId 19 Lookup table: ECPR.ECPR2020CMconditionCodes
Vitamin/ Electrolyte Abnormality	This field collects patients with acute electrolyte disturbances resulting in clinically significant findings such as hypotension, shock, dysrhythmia, etc. Examples include but not limited to hypokalemia, hyperkalemia, hyperphosphatemia, hypophosphatemia and vitamin deficiency from malnutrition.			ECPR.ECPR2020CMconditions	ConditionId 20 Lookup table: ECPR.ECPR2020CMconditionCodes

The comorbid condition was present in the 24 hours prior to event unless specified. The condition should be active and contributing directly to patient's condition. Multiple selections may be made. ICD-10 Diagnosis Codes should be included on the main Registry Data Entry Form to support selections. **This is a required field as one selection must be made.** 

# Infectious/Inflammatory

Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/	Table Name	Column Name /
			Modification		Stored Values
Distributive Shock (non- infectious)	This field collects patients with distributive shock characterized by a high cardiac output/low systemic vascular resistance state not directly related to an infectious source, involving the use of vasopressors. Causes may include but not limited to acute liver failure, systemic lupus erythematosus, anaphylaxis, hemophagocytic lymphohistiocytosis (HLH) or macrophage activation syndrome (MAS).			ECPR.ECPR2020CMconditions	ConditionId 21 Lookup table: ECPR.ECPR2020CMconditionCodes
Sepsis or Septic Shock	This field collects patients with sepsis, defined as the presence of suspected infection along with hypotension, altered mental status and tachypnoea. Septic shock includes the features of sepsis, along with hypotension requiring vasopressors to maintain mean arterial blood pressure >65mmHg (in adults) and lactate >2mmol/L. (Sepsis-3). This may include elements of hypovolemic, distributive, and cardiogenic shock.			ECPR.ECPR2020CMconditions	ConditionId 22 Lookup table: ECPR.ECPR2020CMconditionCodes

The comorbid condition was present in the 24 hours prior to event unless specified. The condition should be active and contributing directly to patient's condition. Multiple selections may be made. ICD-10 Diagnosis Codes should be included on the main Registry Data Entry Form to support selections. **This is a required field as one selection must be made.** 

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Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/	Table Name	Column Name /
			Modification		Stored Values
	This field collects patients with pre-existing			ECPR.ECPR2020CMconditions	ConditionId 23
Hemorrhage	chronic abnormalities of kidney structure or				Lookup table:
or	function, present for >3 months, with				ECPR.ECPR2020CMconditionCodes
Hypovolemic	implications for health with any cause, GFR				
Shock	category, and albuminuria category (CGA) -				
	KDIGO 2012.				
	This field collects patients with major trauma,			ECPR.ECPR2020CMconditions	ConditionId 24
	defined as an injury or a combination of injuries				Lookup table:
Major Trauma	that are life-threatening and could be life				ECPR.ECPR2020CMconditionCodes
	changing because it may result in long-term				
	disability. NICE Guidelines 2016.				
	This field collects patients who is pregnant			ECPR.ECPR2020CMconditions	ConditionId 25
Pregnancy /	during this hospitalization or has recently				Lookup table:
Delivery	delivered with complications directly				ECPR.ECPR2020CMconditionCodes
	contributing to the patient's acute illness.				

Other					
Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/	Table Name	Column Name /
			Modification		Stored Values
Unknown	Use this field if no information about co-morbid	One selection must		ECPR.ECPR2020CMconditions	ConditionId 26
	conditions are	be made.			Lookup table:
	available for the patient at the time of				ECPR.ECPR2020CMconditionCodes
	cannulation to ECMO.				
None	Use this field if the patient is known to have no	One selection must		ECPR.ECPR2020CMconditions	ConditionId 27
	relevant prior medical history at the time of	be made.			Lookup table:
	cannulation to ECMO.				ECPR.ECPR2020CMconditionCodes

# II. Cardiopulmonary Arrest

This section details the period surrounding the arrest event.

#### Location of Arrest

Location of arrest is the specific location where the event occurred or the patient was found. Choose either 'Out of Hospital' or 'In Hospital' as the site that CPA preceding ECPR occurred. If resuscitation continued through multiple locations, include only the site of initial CPA without ROSC for >20 mins - i.e. according to ECPR definition. If an out of hospital location is chosen, additional question: Emergency Medical Services on site Yes/No is triggered

Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/	Table Name	Column Name /
			Modification		Stored Values
	This field collects where the patient had the initial			ECPR.ECPR2020Addendum	LAOutOfHospital
	cardiopulmonary arrest.				
	Please select one of the following:				Lookup table:
	Home: Place of residence (e.g., home, apartment,				ECPR.ECPR2020ArrestOutOfHospital
	back yard of a home). Private residence, whether				
	or not it is the patient's primary residence.				Home=1,
	Public Place: Street, city park, shopping center,				Public Place=2,
	sports stadium, entertainment center, airport, railway station, church, beach, office building -				Public Place-2,
Out of	any location with access to bystanders.				Ambulatory Medical Care=3,
Hospital	Outpatient Ambulatory Medical Care: According				
Arrest	to the local ELSO center, a healthcare facility for				Ambulance Transport=4,
747650	assessment and management of non-inpatient				Other=5
	care - not co-located with an inpatient or				
	emergency resourced facility.				
	Ambulance Transport: EMS personnel respond to				
	a medical emergency in an official capacity as part				
	of an organized medical response team. Choose				
	this option if the patient is under their care at the				
	time of arrest.				
	<b>Other:</b> Other location (e.g., hotel room, private				
	office, long-term care facility)				
Emergency	This field collects whether EMS personnel respond			ECPR.ECPR2020OOHCA	OOHCAId
Medical	to a medical emergency in an official capacity as part of an organized medical response team.				
Services on	part of an organized medical response tedili.				
Site					

## Location of Arrest (continued)

Location of arrest is the specific location where the event occurred or the patient was found. Choose either 'Out of Hospital" or 'In Hospital' as the site that CPA preceding ECPR occurred. If resuscitation continued through multiple locations, include only the site of initial CPA without ROSC for >20 mins - i.e. according to ECPR definition. If an out of hospital location is chosen, additional guestion: Emergency Medical Services on site Yes/No is triggered

Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/	Table Name	Column Name /
			Modification		Stored Values
Bystander CPR	This field collects patients who received bystander CPR, defined as CPR performed by a person who is not responding as part of an organized emergency response system approach to a cardiac arrest. Physicians, nurses, and paramedics may be described as performing bystander CPR if they are not part of the emergency response system involved in the victim's resuscitation.			ECPR.ECPR202000HCA	OOHCAId
Bystander AED Use	This field collects the instance when a bystander attempts defibrillation (e.g., public access or layperson rescuer defibrillation), it is recorded as a defibrillation attempt before EMS arrival. AEDs are increasingly being made available to the public.			ECPR.ECPR202000HCA	OOHCAId
In Hospital Arrest	This field collects where the patient had the initial cardiopulmonary arrest. Level of available care according to local ELSO center policies to the patient at their in-hospital location at the time of cardiac arrest. Note - Additional question Emergency Medical Services on site Yes/No is NOT triggered by IN HOSPITAL choices Please select one of the following: <b>Ambulatory/Outpatient Area</b> : Non-inpatient facility within a healthcare setting or hospital which also manages inpatient care <b>Emergency Department</b> : Established unit resourced to provide acute assessment and management to ill and injured patients <b>General Inpatient Ward</b> : According to the local ELSO center, a healthcare facility for assessment and management of illness and/or injury <b>High Dependency Unit, Intermediate Care or Stepdown Unit</b> : According to the local ELSO center, a healthcare facility resourced to provide more acute care than general hospital admission			ECPR.ECPR2020Addendum	LAInHospital Lookup table: ECPR.ECPR2020ArrestInHospital Ambulatory/Outpatient=1, ED=2, Inpatient Ward=3, HDU=4,

cation of arre curred. If resu	rest (continued) st is the specific location where the event occurred or uscitation continued through multiple locations, includ	e only the site of initia	I CPA without ROSC f		· –
cation is chose Field Name	en, additional question: Emergency Medical Services o Definition / Explanation / Example	n site Yes/No is trigge Data Entry Rules	red Collection/	Table Name	Column Name /
	, p, - p		Modification		Stored Values
In Hospital Arrest (continued)	<ul> <li>Intensive Care Setting: According to the local ELSO center, a healthcare facility resourced to provide intensive care. (Drop down list to select specific ICU: Adult Medicine ICU, Adult Surgical ICU, Mixed ICU, Adult Cardiac or Cardiovascular ICU, Adult Coronary Care Unit, Pediatric Intensive Care Unit, Pediatric Cardiac Intensive Care Unit, Neonatal Intensive Care Unit)</li> <li>Cardiac Catheterization Laboratory: According to the local ELSO center, a specialized operating room or suite equipped with fluoroscopy for cardiac catheterization.</li> <li>Interventional or Diagnostic Suite: According to the local ELSO center, a specialized operating room or suite equipped for diagnostic and interventional procedures.</li> <li>Operating Room: According to the local ELSO center, a specialized operating room for procedures.</li> <li>Post-Anesthesia Recovery Room (PACU):</li> <li>According to the local ELSO center, a specialized room or suite for post anesthesia recovery after surgical procedures.</li> <li>Delivery Room: According to the local ELSO center, a healthcare environment specialized for the care</li> </ul>			ECPR.ECPR2020Addendum	ICU=5 , Cath Lab=6 , Interventional Radiology=7 , OR=8 , PACU=9 , Delivery Room=10 , Other=11
	of gravid women and newborn infants. Other Inpatient Setting:				
Witnessed Arrest	This field collects if the patient has a witnessed arrest, defined as one that is seen or heard by another person or an arrest that is monitored. Was it recognized immediately that the patient had suffered a cardiac arrest? Note: a person found			ECPR.ECPR2020Addendum	WitnessedArrest

	collapsed should be noted as an unwitnessed arrest.				
	Please select from the following: Yes, No, Unknown				
Date of Arrest		Soft limit: It would be unusual for this to be more than 60 minutes prior to TimeOn Hard limit: Can't be after TimeOn Hard limit: ArrestDateTime must be equal or before TimeCprCommenced Hard limit: Date/time of a arrest can be before run time on but not more than 12 hours before.	04/15/2024	ECPR.ECPR2020Addendum	ArrestDateTime
Time of				ECPR.ECPR2020Addendum	ArrestDateTime
Arrest					

# III.Management of Cardiopulmonary ArrestThis section details the management of the arrest.

	Crossifies	
CPK	Specifics	

Field Name	Definition / Evaluation / Evample	Data Entry Dulas	Collection /	Table Name	Column Nonse /
Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/ Modification	Table Name	Column Name / Stored Values
Time CPR Commenced	This field collects what time CPR started for the patient the first time.	Hard Minimum: Must be after patient date and time of birth; must be at or after time of CPA; may be before patient admission to hospital Hard Maximum: Must be prior to date and time of death; prior to date and time of ECMO decannulation Soft Notification: If date is prior to hospital admission but patient was registered as an inpatient in a facility, a warning flags, but can be overcome. Soft limit: It would be unusual for this to be more than 60 minutes prior to TimeOn Hard limit: Can't be after TimeOn	04/15/2024	ECPR.ECPR2020Addendum	TimeCprCommence

CPR Specifics (co	ontinued)				
Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/ Modification	Table Name	Column Name / Stored Values
	What was the total time of CPR prior to ECMO cannulation	Hard Minimum: 1		ECPR.ECPR2020Addendum	TotalCPRTime
	and flow without sustained ROSC for >20 minutes?	minute			
	Estimate total CPR time from documentation of the cardiac	Hard Maximum:			
	arrest including CPR time in minutes from the onset of initial CPR until ECMO cannulation, if there was less than 20	400 minutes			
	minutes of sustained ROSC.	Soft Notifications:			
		1 minute and 120			
	<b>Patient X</b> , a 54 year old man with s/p successful PCI for	minutes			
	STEMI with severe left ventricular systolic dysfunction				
	develops ventricular tachycardia with a pulse, not				
	responsive to ACLS management. His rhythm deteriorates				
	to ventricular fibrillation and CPR is commenced. He is				
	cannulated ECPR after 40 minutes of CPR. His total CPR				
	time is 40 minutes.				
	Patient Y, a 5 year old girl returns to CICU from OR s/p				
Total CPR Time	mitral valve repair. She had clinical signs of low cardiac				
Prior to ECMO	output, increasing inotropic agent use and rising lactate,				
	before a 4 minute episode of sustained ventricular				
	tachycardia without pulse for which she received CPR. She responded to defibrillation x 1. Over the next hour she was				
	started on lidocaine infusion, but had worsening signs of				
	low cardiac output and developed ST segment changes in				
	lateral distribution. She had another episode of ventricular				
	tachycardia which deteriorated to ventricular fibrillation				
	which was not responsive to ACLS management. She was				
	cannulated ECPR 34 minutes into code. Her total CPR time				
	is 34 mins (i.e. initial 4 minutes not included as patient had				
	ROSC for >20 mins).				
	<b>Patient Z</b> , a 50 year old, suffered ventricular fibrillation				
	cardiac arrest. In the next 40 minutes, he required a cumulative of 35 minutes of CPR interrupted by 2 x short				
	lived ROSC (3 mins and 2 mins). When ECLS cannulas were				
	placed, he was not receiving CPR with ROSC for 2 minutes				
	prior. Total CPR time is 35 mins and; he meets ECPR criteria				
	(<20 minutes ROSC prior to ECMO).				

CPR Specifics (co	ontinued)				
Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/ Modification	Table Name	Column Name / Stored Values
Did the patient have multiple cardiopulmonary arrests within 24 hours prior to ECPR event?	This field collects whether the patient had multiple arrests within the previous 24 hours.	Yes / No		ECPR.ECPR2020Addendum	MultipleCPA
Did the patient have ROSC at any time after initial cardiopulmonary arrest, before ECMO flow initiated?	This field collects whether the patient had return of spontaneous circulation (ROSC) at any time after the initial arrest, but before ECMO flow was initiated. From the time of initial cardiac arrest precipitating ECPR, was/were there time/s of perfusing rhythm when CPR was held for short periods of time? By Utstein 2004 consensus upheld in AHA guidelines and ELSO Maastrict Treaty for Nomenclature in Extracorporeal Life Support, the phrase "any ROSC" is intended to represent a brief (approximately 30 seconds) restoration of spontaneous circulation that provides evidence of more than an occasional gasp, occasional fleeting palpable pulse, or arterial waveform.	Yes / No		ECPR.ECPR2020Addendum	ROSCtimeAfterCPR
Did the patient have a pulse at the time of cannulation?	This field collects whether the patient had ROSC at the time of ECMO cannulation. <b>YES</b> if the patient had regained circulation prior to ECMO flow. <b>NO</b> if they continue to receive CPR until ECMO cannulation and flow was established. (Holding CPR for actual cannula insertion should not be considered when answering this question).	Yes / No		ECPR.ECPR2020Addendum	PulseTimeOfCannulation

# **Compression Method Used**

Chest compressions are performed by an individual or a mechanical device during CPR in an attempt to restore spontaneous circulation. If multiple methods were utilized/selected, the estimated duration of each method will be requested.

Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/	Table Name	Column Name /
			Modification		Stored Values
Standard manual compression	This field collects whether the patient had cardiac compressions according to basic life support principles. Estimate time of standard manual compressions in minutes (if applicable)	At least one must be selected. If multiple techniques selected, an estimated time box will be for each method checked.		ECPR.ECPR2020Addendum	CMSandardEst
Automatic Compressor	This field collects whether the patient had at any time during the resuscitation, was a mechanical CPR device deployed. Estimate time of automatic compressions in minutes (if applicable)			ECPR.ECPR2020Addendum	CMAutoCompEst
Open Chest CPR	This field collects whether the patient had manual compression of the heart directly during an intra-thoracic procedure. Estimate time of open chest CPR in minutes (if applicable)			ECPR.ECPR2020Addendum	CMOpenChestEst
Unknown	This field collects if the type of compressions delivered were unknown.			ECPR.ECPR2020Addendum	CMUnknownEst

#### Initial Pulseless Rhythm

Cardiac arrest is the cessation of cardiac mechanical activity as confirmed by the absence of signs of circulation. The first monitored rhythm is the first cardiac rhythm present when a monitor or defibrillator is attached to a patient after a cardiac arrest. If the AED does not have a rhythm display, then it may be possible to determine the first monitored rhythm from a data storage card, hard drive, or other device used by the AED to record data. If the AED has no data-recording device, then the first monitored rhythm should be classified simply as shockable or non-shockable. Specify the first identified rhythm during recognized cardiac arrest

Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/ Modification	Table Name	Column Name / Stored Values
Asystole	This field collects whether the patient had at any time no cardiac electrical activity on ECG or rhythm strip	One rhythm must be selected, and only one may be chosen.		ECPR.ECPR2020Addendum	InitialPulselessRhythm 1
Pulseless Electrical Activity	This field collects whether the patient had at any time organized electrical activity on ECG or rhythm strip without appreciable arterial pulse.			ECPR.ECPR2020Addendum	InitialPulselessRhythm 2
Pulseless Ventricular Tachycardia	This field collects whether the patient had at any time wide complex organized rhythm demonstrated on ECG or rhythm strip without appreciable arterial pulse.			ECPR.ECPR2020Addendum	InitialPulselessRhythm 3
Ventricular Fibrillation	This field collects whether the patient had at any time disorganized electrical activity in the ventricles resulting in no appreciable cardiac ejection.			ECPR.ECPR2020Addendum	Initial Pulseless Rhythm 4
Unknown – Shockable	This field collects whether the AED has no data- recording device, then the first monitored rhythm should be classified simply as shockable or nonshockable. In general, shockable cardiac arrest rhythms are further divided into ventricular fibrillation and pulseless ventricular tachycardia.			ECPR.ECPR2020Addendum	InitialPulselessRhythm 5
Unknown – Non Shockable	This field collects whether the AED has no data- recording device, then the first monitored rhythm should be classified simply as shockable or nonshockable. Nonshockable cardiac arrest rhythms can be categorized as either asystole or PEA.			ECPR.ECPR2020Addendum	InitialPulselessRhythm 6
Unknown	This field collects whether the patient had no information regarding initial rhythm is available			ECPR.ECPR2020Addendum	InitialPulselessRhythm 7
Bradycardia Requiring CPR				ECPR.ECPR2020Addendum	InitialPulselessRhythm 8

	with Cardioversion or Defibrillation. Defibrillation can b ator, an implantable cardioverter-defibrillator (ICD), or a			• •	
Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/ Modification	Table Name	Column Name / Stored Values
Patient treated with Cardioversion or Defibrillation?	This field collects whether the patient had at any time during the arrest defibrillation or cardioversion. Defibrillation can be attempted by means of an automated external defibrillator (AED), a semiautomated external defibrillator, an implantable cardioverter-defibrillator (ICD), or a manual defibrillator.	Yes / No		ECPR.ECPR2020Addendum	DCCardOrDefi
Number of Shocks before	This field collect the number of times Cardioversion or Defibrillation was delivered prior to ECMO Cannulation	HARD MIN: 0		ECPR.ECPR2020Addendum	NumberOfShocks
Cannulation		HARD MAX: 50			

Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/ Modification	Table Name	Column Name / Stored Values
Asystole	This field collects whether the patient had no cardiac electrical activity on ECG or rhythm strip	One rhythm must be selected, and only one may be chosen.		ECPR.ECPR2020Addendum	RhythmAtTimeCannulation Lookup table: ECPR.ECPR2020RTCannulatio RTCannulationId 2
Pulseless Electrical Activity	This field collects whether the patient had organized electrical activity on ECG or rhythm strip without appreciable arterial pulse.			ECPR.ECPR2020Addendum	RhythmAtTimeCannulation Lookup table: ECPR.ECPR2020RTCannulatio RTCannulationId 1
Pulseless Ventricular Tachycardia	This field collects whether the patient had wide complex organized rhythm demonstrated on ECG or rhythm strip without appreciable arterial pulse.			ECPR.ECPR2020Addendum	RhythmAtTimeCannulation Lookup table: ECPR.ECPR2020RTCannulatio RTCannulationId 9
Ventricular Fibrillation	This field collects whether the patient had disorganized electrical activity in the ventricles resulting in no appreciable cardiac ejection.			ECPR.ECPR2020Addendum	RhythmAtTimeCannulation Lookup table: ECPR.ECPR2020RTCannulatio RTCannulationId 8
High Degree Atrioventricular Block	This field collects whether the patient had organized electrical activity with second or third degree atrioventricular block.			ECPR.ECPR2020Addendum	RhythmAtTimeCannulation Lookup table: ECPR.ECPR2020RTCannulatio RTCannulationId 3
Supraventricular Tachycardia	This field collects whether the patient had an organized electrical activity with heart rate higher than normal upper limit for age.			ECPR.ECPR2020Addendum	RhythmAtTimeCannulation Lookup table: ECPR.ECPR2020RTCannulatio RTCannulationId 7

Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/ Modification	Table Name	Column Name / Stored Values
Sinus Rhythm	This field collects whether the patient had an organized rhythm with impulse originating from sinoatrial node, with atrioventricular synchrony at normal rate for age.		Wouncation	ECPR.ECPR2020Addendum	RhythmAtTimeCannulation Lookup table: ECPR.ECPR2020RTCannulati RTCannulationId 4
Sinus Bradycardia	This field collects whether the patient had an organized rhythm with impulse originating from sinoatrial node, with atrioventricular synchrony, rate slower than lower limit for age.			ECPR.ECPR2020Addendum	RhythmAtTimeCannulation Lookup table: ECPR.ECPR2020RTCannulati RTCannulationId 5
Sinus Tachycardia	This field collects whether the patient had an Organized rhythm with impulse originating from sinoatrial node, with atrioventricular synchrony, rate faster than upper limit for age.			ECPR.ECPR2020Addendum	RhythmAtTimeCannulatior Lookup table: ECPR.ECPR2020RTCannulat RTCannulationId 6
Unknown	This field collects if the rhythm was unknown, none of the above			ECPR.ECPR2020Addendum	RhythmAtTimeCannulation Lookup table: ECPR.ECPR2020RTCannulati RTCannulationId 10

	g Cardiopulmonary Arrest				
			1	acheal tube) during the resuscitation e	
Field Name	Definition / Explanation /	Data Entry	Collection/	Table Name	Column Name /
	Example	Rules	Modification		Stored Values
	Select medication field for	At least one			
	any medication delivered	must be			
	during CPA. Total number of	selected.			
	epinephrine and vasopressin	Multiple			
	doses will be required.	medications			
		may be			
		selected.			
				ECPR.ECPR2020AddendumMedications	MedicationId
Adenosine					Lookup table:
					ECPR.ECPR2020AddendumMedicationCodes
					MedicationId 1
				ECPR.ECPR2020AddendumMedications	MedicationId
Amiodarone					Lookup table:
					ECPR.ECPR2020AddendumMedicationCodes
					MedicationId 2
				ECPR.ECPR2020AddendumMedications	MedicationId
Atropine					Lookup table:
					ECPR.ECPR2020AddendumMedicationCodes
					MedicationId 3
				ECPR.ECPR2020AddendumMedications	MedicationId
Calcium					
Chloride/Gluconate					Lookup table: ECPR.ECPR2020AddendumMedicationCodes
					MedicationId 4
				ECPR.ECPR2020AddendumMedications	MedicationId 4
Dobutamine					Lookup table:
					ECPR.ECPR2020AddendumMedicationCodes
					MedicationId 5
Dopamine				ECPR.ECPR2020AddendumMedications	MedicationId
Dopamilie					Lookup table:

			ECPR.ECPR2020AddendumMedicationCodes
			MedicationId 6

Field Name	Definition / Explanation / Example	Data Entry	Collection/	Table Name	Column Name /
		Rules	Modification		Stored Values
	Enter the total number of doses delivered to the patient.			ECPR.ECPR2020AddendumMedications	MedicationId
Epinephrine					Lookup table:
					ECPR.ECPR2020AddendumMedicationCode
					MedicationId 7
				ECPR.ECPR2020AddendumMedications	MedicationId
Flumazenil					Lookup table:
					ECPR.ECPR2020AddendumMedicationCode
					MedicationId 8
				ECPR.ECPR2020AddendumMedications	MedicationId
Glucagon					Lookup table:
					ECPR.ECPR2020AddendumMedicationCode
					MedicationId 9
				ECPR.ECPR2020AddendumMedications	MedicationId
Glucose					Lookup table:
					ECPR.ECPR2020AddendumMedicationCode
					MedicationId 10
				ECPR.ECPR2020AddendumMedications	MedicationId
Lidocaine					Lookup table:
					ECPR.ECPR2020AddendumMedicationCode
					MedicationId 11
				ECPR.ECPR2020AddendumMedications	MedicationId
Magnesium					Lookup table:
Sulfate					ECPR.ECPR2020AddendumMedicationCode
					MedicationId 12
				ECPR.ECPR2020AddendumMedications	MedicationId
Milrinone					
					Lookup table:

		ECPR.ECPR2020AddendumMedicationCodes
		MedicationId 13

Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/ Modification	Table Name	Column Name / Stored Values
	•			ECPR.ECPR2020AddendumMedications	MedicationId
Naloxone					Lookup table: ECPR.ECPR2020AddendumMedicationCode MedicationId 14
				ECPR.ECPR2020AddendumMedications	MedicationId
Norepinephrine					Lookup table: ECPR.ECPR2020AddendumMedicationCode MedicationId 15
				ECPR.ECPR2020AddendumMedications	MedicationId
Phenylephrine					Lookup table: ECPR.ECPR2020AddendumMedicationCode MedicationId 16
				ECPR.ECPR2020AddendumMedications	MedicationId
Procainamide					Lookup table: ECPR.ECPR2020AddendumMedicationCode MedicationId 17
				ECPR.ECPR2020AddendumMedications	MedicationId
Sodium Bicarbonate					Lookup table: ECPR.ECPR2020AddendumMedicationCode MedicationId 18
	Enter the total number of doses delivered to the patient.			ECPR.ECPR2020AddendumMedications	MedicationId
Vasopressin					Lookup table: ECPR.ECPR2020AddendumMedicationCode MedicationId 19
				ECPR.ECPR2020AddendumMedications	MedicationId
No Medications					Lookup table:

 -		
		ECPR.ECPR2020AddendumMedicationCodes
		MedicationId 20

Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/	Table Name	Column Name /
			Modification		Stored Values
Temporary cardiac pacing	During CPR, was there an attempt to electrically stimulate the heart for the purpose of cardiac pacing? If yes, what form of pacing was utilized (select from below).			ECPR.ECPR2020OiDuringCPA	Olcpald 1 Lookup table:
Transcutaneous Cardiac Pacing	This field collects whether the patient had temporary cardiac pacing by delivering pulses of electric current through the patient's chest, which stimulates the heart to contract. Most commonly deployed with pads/paddles associated with a defibrillator.			ECPR.ECPR2020OiDuringCPA	ECPR.ECPR2020OiDuringCPAcode Olcpald 2 Lookup table: ECPR.ECPR2020OiDuringCPAcode
Transvenous Cardiac Pacing	This field collects whether the patient had temporary cardiac pacing by delivering electric current via a lead inserted via the (internal jugular) vein direct to the right ventricle.			ECPR.ECPR2020OiDuringCPA	Olcpald 3 Lookup table: ECPR.ECPR2020OiDuringCPAcode
Epicardial Pacing	This field collects whether the patient had temporary cardiac pacing by delivering electric current via temporary pacing wires attached directly to the epicardium.			ECPR.ECPR2020OiDuringCPA	Olcpald 4 Lookup table: ECPR.ECPR2020OiDuringCPAcode
Permanent Pacemaker	This field collects whether the patient had a permanent pacemaker already in place.			ECPR.ECPR2020OiDuringCPA	Olcpald 6 Lookup table: ECPR.ECPR2020OiDuringCPAcode
No Attempt at Pacing				ECPR.ECPR2020OiDuringCPA	Olcpald 5 Lookup table: ECPR.ECPR2020OiDuringCPAcode
Unknown				ECPR.ECPR2020OiDuringCPA	Olcpald 6

		Lookup table:
		ECPR.ECPR2020OiDuringCPAcodes

# IV. CIRCULATION ASSESSMENT

These fields collect what measures were used to ensure the quality of compressions for CPR during CPA. During the resuscitation, were there mechanisms or processes in place to measure the quality of CPR being delivered?

Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/ Modification	Table Name	Column Name / Stored Values
End Tidal CO2	This field collects whether an end tidal CO2 monitor was in situ during CPR. If yes, enter the resultant measure closest to ECMO Flow initiation.	If yes, ETCO2 measure closest to ECMO Flow initiation must be entered. HARD MAX: 200 mmHg HARD MIN: 0 mmHg		ECPR.ECPR2020Addendum	EndTidalCO2Monitoring ETCO2
nvasive Arterial Access	This field collects whether an invasive arterial line was in situ during CPR. If yes, enter the diastolic blood pressure (DBP) recorded during CPR just prior to ECMO flow initiation.	If yes, DBP closest to ECMO flow initiation must be entered. HARD MIN: 5 mmHg HARD MAX: 110 mmHg SOFT MIN: 0 mmHg SOFT MAX: 180 mmHg		ECPR.ECPR2020Addendum	InvasiveArterialAccess DBPflowStart
Cerebral Near- Infrared Spectroscopy	This field collects whether cerebral NIRS was in situ during CPR. If yes, enter the NIRS measured just prior to ECMO flow initiation.	If yes, NIRS closest to ECMO flow initiated. HARD MAX: 100		ECPR.ECPR2020Addendum	CerebralNIRS NIRS
CPR Feedback Device	This field identifies the use of devices that measure chest compression quality during CPR (e.g. accelerometer, force transducer, etc.). This includes CPR quality coaching systems integrated with mechanics devices (e.g. metronomes, and Zoll-R defibrillators). If yes enter the rate of compressions delivered.	If yes, number of compressions delivered. Estimate allowed. HARD MIN: 20 HARD MAX: 200 SOFT MIN: 40 SOFT MAX: 160		ECPR.ECPR2020Addendum	CPRFeedbackDevice CPR

Quality of CPR (Continued)						
Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/	Table Name	Column Name /	
			Modification		Stored Values	
Signs of Life Present	Was the patient making attempts at breathing, gagging or moving prior to cannulation? If no, must enter whether the patient received neuromuscular blockade (paralysis).	If no, must select Yes/No for did the patient receive neuromuscular blockade.		ECPR.ECPR2020Addendum	SignsOfLifePreECLS NeuromuscularBlockadeUse	
None	Select if none of the above were in place.					

# V. CANNULATION AND CIRCUIT DETAILS

These fields collect where cannulation and initiation of ECMO occurred as well as pump and circuitry details.

ield Name	Definition / Explanation / Example	Data Entry Rules	Collection/ Modification	Table Name	Column Name / Stored Values
	This field collects where the patient was cannulated Out of Hospital.			ECPR.ECPR2020Addendum	CDOutOfHospital
Out of Hospital	Please select one of the following: Home: Place of residence (e.g., home, apartment, back yard of a home). Private residence, whether or not it is the patient's primary residence. Public Place: Street, city park, shopping center, sports stadium, entertainment center, airport, railway station, church, beach, office building - any location with access to bystanders. Outpatient Ambulatory Medical Care: According to the local ELSO center, a healthcare facility for assessment and management of non- inpatient care - not co-located with an inpatient or emergency resourced facility. Ambulance Transport: EMS personnel respond to a medical emergency in an official capacity as part of an organized medical response team. Choose this option if the patient is under their				Lookup table: ECPR.ECPR2020ArrestOutOfHospit Home=1, Public Place=2, Ambulatory Medical Care=3, Ambulance Transport=4, Other=5

Cannulation L	ocation (Continued)				
Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/	Table Name	Column Name /
			Modification		Stored Values
	This field collects where the patient was cannulated In Hospital.			ECPR.ECPR2020Addendum	CDInHospital
	Please select one of the following: Ambulatory/Outpatient Area: Non-inpatient facility				Lookup table:
	within a healthcare setting or hospital which also manages inpatient care				ECPR.ECPR2020ArrestInHospital
	<b>Emergency Department:</b> Established unit resourced to provide acute assessment and management to ill				Ambulatory/Outpatient=1 ,
	and injured patients General Inpatient Ward: According to the local				ED=2 ,
	ELSO center, a healthcare facility for assessment and management of illness and/or injury				Inpatient Ward=3 ,
	High Dependency Unit, Intermediate Care or Stepdown Unit: According to the local ELSO center,				HDU=4 ,
	a healthcare facility resourced to provide more acute care than general hospital admission				ICU=5 ,
In Hospital	<b>Intensive Care Setting:</b> According to the local ELSO center, a healthcare facility resourced to provide				Cath Lab=6 ,
	intensive care. (Drop down list to select specific ICU: Adult Medicine ICU, Adult Surgical ICU, Mixed				Interventional Radiology=7 ,
	ICU, Adult Cardiac or Cardiovascular ICU, Adult Coronary Care Unit, Pediatric Intensive Care Unit,				OR=8 ,
	Pediatric Cardiac Intensive Care Unit, Neonatal Intensive Care Unit)				PACU=9 ,
	<b>Cardiac Catheterization Laboratory:</b> According to the local ELSO center, a specialized operating room or suite equipped with fluoroscopy for cardiac				Delivery Room=10 , Other=11
	catheterization. Interventional or Diagnostic Suite: According to the				
	local ELSO center, a specialized operating room or				
	suite equipped for diagnostic and interventional procedures.				
	<b>Operating Room:</b> According to the local ELSO center, a specialized operating room for procedures.				
	Post-Anesthesia Recovery Room (PACU): According				
	to the local ELSO center, a specialized room or suite				

for post anesthesia recovery after surgical		
procedures.		

Cannulation Location (Continued)								
Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/	Table Name	Column Name /			
			Modification		Stored Values			
	Delivery Room: According to the local ELSO center, a							
In Hospital	healthcare environment specialized for the care of gravid							
(continued)	women and newborn infants.							
	Other Inpatient Setting:							

Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/ Modification	Table Name	Column Name / Stored Values
Pre-Primed Circuit	This field collects whether a pre-primed circuit was used prior to cannulation and initiation of ECMO. Refers to a circuit that was assembled and filled with a fluid and on standby. Pump and circuit that was assembled and primed specifically for this patient CPR event should not entered.	Yes/No/Unknown		ECPR.ECPR2020Addendum	ECPRSystem
Type of Prime	If yes, then select from the type of primed fluid used: Blood Prime: Circuit was primed with a mix of crystalloid fluid and blood products. Clear Prime: Circuit was primed with a crystalloid fluid. Unknown: No information available.	If yes, then select fluid type		ECPR.ECPR2020Addendum	ECPRTypeOfPrin

# VI. POST ECPR CARE AND MANAGMENT

This section collects information regarding care and management in the time after cannulation and intiation of ECMO.

Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/ Modification	Table Name	Column Name / Stored Values
EEG Monitoring	This field collects whether post-ECPR electroencephalogram was performed within the first 24 hours - whether or not the results were abnormal. If yes, then select: <b>Standard:</b> According to local protocols, regular duration of EEG <b>Continuous:</b> EEG applied within the first 24 hours for a period of >12 hours of continuous monitoring	Must select one, if Yes then additional questions apply.		ECPR.ECPR2020Addendum	EEGMonitoring
Intracranial Imaging	This field collects whether Intracranial imaging was performed within the first 24 hours - whether or not the results were abnormal. If yes, then select: Cranial Ultrasound: CT Scan of Brain:	Must select one, if Yes then additional questions apply.		ECPR.ECPR2020Addendum	IntracranialImagin

Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/	Table Name	Column Name /
			Modification		Stored Values
Temperature Management Strategy Planned	This field collects the intended temperature management strategy early post cardiopulmonary arrest. If yes, then select: <b>Targeted temperature management 32-34 degrees:</b> Informed by Moler et al THAPCA N Engl J Med. 2017 Jan 26;376(4):318-329 <b>Targeted normothermia 36-37.5 degrees:</b> Informed by Moler et al THAPCA N Engl J Med. 2017 Jan 26;376(4):318-329 <b>Targeted temperature management 32-36 degrees:</b> Informed by ILCOR 2015, Part 8 - Post-cardiac arrest care; Targeted temperature management No specifically targeted temperature management: Unknown:	One must be selected, but one choice may be made.		ECPR.ECPR2020Addendum	TempManageme Targeted 32 - 34°C=1, Targeted normothermia=2 Targeted 32 - 36°C=3, No Target=4, Unknown=5"
Highest Temperature in first 24 hours	This field collects the highest temperature management strategy (i.e. targeted normothermia) and whether this was achieved in the early post cardiopulmonary arrest phase (<24 hours). Choose one of the following: <32 degrees Centigrade 32 - <34 degrees Centigrade 34 - <35 degrees Centigrade 35 - <36 degrees Centigrade 36 - 37.5 degrees Centigrade 37.6 - 38.5 degrees Centigrade >38.5 degrees Centigrade Unknown	One must be selected, but only one choice may be made.		ECPR.ECPR2020Addendum	HighestTemp24H < 32°C=2, 32 -< 34°C=3, 34 -< 35°C=4, 35 -< 36°C=5, 36 - 37.5°C=6, 37.6 - 38.5°C=7, > 38.5°C=8, Unknown=9

Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/ Modification	Table Name	Column Name / Stored Values
Lowest Temperature in first 24 hours	This field collects the lowest temperature management (i.e. targeted normothermia) and whether this was achieved in the early post cardiopulmonary arrest phase (<24 hours). Choose one of the following: <30 degrees Centigrade 30 - <32 degrees Centigrade 32 - <34 degrees Centigrade 34 - <35 degrees Centigrade 35 - <36 degrees Centigrade 36 - 37.5 degrees Centigrade 37.6 - 38.5 degrees Centigrade >38.5 degrees Centigrade Unknown	Not mandatory.		ECPR.ECPR2020Addendum	LowestTemp24H < 30°C=1, 32 -< 34°C=3, 34 -< 35°C=4, 35 -< 36°C=5, 36 - 37.5°C=6, 37.6 - 38.5°C=7, > 38.5°C=8, Unknown=9, 30 -< 32°C = 10

	wn no more than 6 hours after the ECLS Start Time				
4. IT MU	ultiple arterial blood gases exist in this time period, ch	oose the post-ECMO arte	rial blood gas closest to	o AND after the ECLS Start T	īme
Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/ Modification	Table Name	Column Name / Stored Values
	This field collects the date and time of the arterial	Soft Notification:			
	blood gas that meets the timing criteria for the	Post ECPR Blood Gas			
	Post ECPR Blood Gas defined above.	Date/Time must be			
		AFTER the ECLS Start			
	Patient M had an ECLS start time of 03/28/2017	Time but not more			
	09:00PM	than 6 hrs.			
	He had the following 3 blood gases following				
	shorthand: pH/PaCO2/PaO2/HCO3/SaO2	Hard Limit:			
	Lactate=X, FiO2 delivered=X	Post ECPR Blood Gas			
		Date/Time must be			
	ABG at 03/28/2017 7:00PM	AFTER the time on			
	7.13/48/42/18/76% Lactate 5 FiO2 delivered =	ECMO.			
Post ECPR	100%				
First Blood	ABG at 03/28/2017 10:00PM	Post ECPR Blood Gas			
	7.06/58/35/16/61% Lactate 11 FiO2 delivered = 100%	Date/Time cannot be			
Gas	ABG at 03/29/2017 1:00AM	earlier than the Date			
Date/Time	7.07/40/140/16/100% Lactate 10 FiO2	of Birth.			
	delivered = 100%	Post ECPR Blood Gas			
		Date/Time cannot be			
	ABG on 03/28/2017 at 7:00PM is ineligible	after the Date of			
	because it was collected before the ECLS Start	Death.			
	Time. ABG on 3/29/2017 at 1:00AM is ineligible				
	because it is the second ABG after ECLS Start				
	Time. Enter Post-ECLS Blood Gas Date/Time ABG				
	at 03/28/2017 10:00PM because it is the ABG				
	closest to, but after the start of ECMO. Use all				
	values for pH, PaCO2, PaO2, HCO3, SaO2, Lactate,				
	from the same ABG and report the FiO2 at the				
	time the ABG was drawn.				

Choose the first arterial blood gas that meets the following 4 criteria:

- 1. Blood gas obtained from patient rather than circuit specify arterial vs venous
- 2. Drawn after the ECLS Start Time
- 3. Drawn no more than 6 hours after the ECLS Start Time

Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/	Table Name	Column Name /
			Modification		Stored Values
	This field collects the pH on that meets the	Precision 2 decimal		ECPR.ECPR2020Addendum	рН
	timing criteria for the Post ECPR Blood Gas	points			
	defined above.	Soft Notification:			
рН		< 6.90 or > 7.50			
	Potential of hydrogen (negative of the base 10	Hard Limit:			
	logarithm of the activity of the hydrogen ion)	<6.00 or > 8.00			
	in the arterial blood sample.				
	This field collects the arterial partial pressure	US units of Entry		ECPR.ECPR2020Addendum	PCO2
	of carbon dioxide (PaCO <sub>2</sub> ) that meets the	Precision whole			
	timing criteria for the Post ECPR Blood Gas	number			
	defined above.	Soft Notification:			
		< 30 mm Hg or >			
	Arterial partial pressure of carbon dioxide in	100 mm Hg			
	mm Hg	Hard Limit:			
		< 10 mm Hg or >			
		240 mm Hg			
PaCO <sub>2</sub>					
		International Units			
		Precision 2 decimal			
		points			
		Soft Notification:			
		< 4.00 kPa or >			
		13.33 kPa			
		Hard Limit:			
		< 1.30 kPa or >			
		32.00 kPa			

Choose the first arterial blood gas that meets the following 4 criteria:

- 1. Blood gas obtained from patient rather than circuit specify arterial vs venous
- 2. Drawn after the ECLS Start Time
- 3. Drawn no more than 6 hours after the ECLS Start Time

Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/	Table Name	Column Name /
			Modification		Stored Values
	This field collects the arterial partial pressure	US units of Entry		ECPR.ECPR2020Addendum	PO2
	oxygen (PaO <sub>2</sub> ) that meets the timing criteria	Precision whole			
	for the Post ECPR Blood Gas defined above.	number			
		Soft Notification:			
		< 20 mm Hg or >			
	Arterial partial pressure of oxygen in mm Hg	300 mm Hg			
		Hard Limit:			
	Not required if venous gas	< 0 mm Hg or > 760			
		mm Hg			
PaO <sub>2</sub>					
		International Units			
		Precision 2 decimal			
		points			
		Soft Notification:			
		< 2.66 kPa or >			
		40.00 kPa			
		Hard Limit:			
		< 0 kPa or > 101.31			
		kPa			

Choose the first arterial blood gas that meets the following 4 criteria:

- 1. Blood gas obtained from patient rather than circuit specify arterial vs venous
- 2. Drawn after the ECLS Start Time
- 3. Drawn no more than 6 hours after the ECLS Start Time

Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/	Table Name	Column Name /
			Modification		Stored Values
HCO₃	This field collects the arterial standard bicarbonate (HCO <sub>3</sub> ) that meets the timing criteria for the <b>Post ECPR Blood Gas</b> defined above. Standard bicarbonate concentration <b>mEq/L</b> or <b>mmol/L</b>	US units of Entry Precision whole number Soft Notification: < 10 mEq/L or > 40 mEq/L Hard Limit: < 0 mEq/L or > 70 mEq/L International units Precision whole number Soft Notification: < 10 mmol/L or > 40 mmol/L Hard Limit: < 0 mmol/L or > 70 mmol/L or > 70		ECPR.ECPR2020Addendum	HCO3
SaO2 (%)	This field collects the arterial oxyhemoglobin saturation that meets the timing criteria for the <b>Post ECPR Blood Gas</b> defined above. Arterial blood oxyhemoglobin saturation from arterial blood gas in %	Units of measure for US and International is % Precision whole number Soft Notification: <50% or > 100% Hard Limit: <1% or > 100%		ECPR.ECPR2020Addendum	SaO2

Choose the first arterial blood gas that meets the following 4 criteria:

- 1. Blood gas obtained from patient rather than circuit specify arterial vs venous
- 2. Drawn after the ECLS Start Time
- 3. Drawn no more than 6 hours after the ECLS Start Time

Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/	Table Name	Column Name /
			Modification		Stored Values
	This field collects the highest serum lactate	Units of measure		ECPR.ECPR2020Addendum	Lactate
	concentration from an arterial blood gas	for <b>US</b> and			LactateUnknown
	arterial oxyhemoglobin saturation that	International is			
	meets the timing criteria for the <b>Post ECPR</b>	mmol/L			
	Blood Gas defined above. If the lactate was				
	drawn from a venous sample it is ok to enter.	Soft Notification:			
		<0mmol/L or >20			
Lactate		mmol/l			
	Highest serum lactate concentration drawn	Hard Limit:			
	in the 6 hours preceding ECLS. If not all	<0mmol/L or >40			
	blood gases collect lactate, it can be drawn	mmol/l			
	separately from the other arterial blood gas				
	values, but it still needs to fall in the above				
	described time period for Post ECPR Blood				
	Gas.				
No Blood Gas	This field to be selected if no blood gas was			ECPR.ECPR2020Addendum	BloodGasAvailable
Within 6	obtained within 6 hours of ECMO				
hours	cannulation and initiation.				

<b>Debrief Post ECPR</b> Monthly review of CPR cases has been associated with improved survival post CPR Informed by Chan PS, Resuscitation Practices Associated with Survival After In-Hospital Cardiac Arrest: A Nationwide Survey. JAMA Cardiol. 2016 May 1;1(2):189-97.									
Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/	Table Name	Column Name /				
			Modification		Stored Values				
Debrief Post ECPR	This field collects if your inter-disciplinary team discussed the resuscitation event and ECPR process in the period following ECPR. If Yes select the timeframe that it occurred. Within 24 hours: If >24 hours, did this occur within 1 month If >1 month, did this occur within 3 months			ECPR.ECPR2020Addendum	DebriefPostECPR				

# Neurological Assessment at Discharge

At the time of hospital discharge, what was the patient's functional performance assessed by Cerebral Performance Category (CPC) for patients >18yo; or Pediatric Cerebral Performance Category (0-18yo).

Informed by Jennett and Bond Assessment of outcome after severe brain damage Lancet 1975 Mar 1;1(7905):480-4; and Fiser Assessing the outcomes of pediatric intensive care J Pediatr. 1992 Jul;121(1):68-74.

Field Name	Definition / Explanation / Example	Data Entry	Collection /	Table Name	Column Name /
		Rules	Modification		Stored Values
Neurological Assessment at Discharge	This field collects if the patient had a functional performance assessment by Cerebral Performance Category (CPC) for patients >18 yo; or by Pediatric Cerebral Performance Category (0-18 yo) If yes, enter result: Cerebral Performance Category (Adult): CPC 1: Conscious, alert, able to work and lead a normal life. May be minor psychologic or neurologic deficits (mild dysphasia, non- incapacitating hemiparesis, or minor cranial nerve abnormalities). CPC 2: Conscious. Sufficient cerebral function for part-time work in sheltered environment or independent activities of daily life (dress, travel by public transportation, food preparation). May have hemiplegia, seizures, ataxia, dysarthria, or permanent memory or mental changes. CPC 3: Conscious. Dependent on others for daily support (in an institution or at home with exceptional family support). Has at least limited cognition. This category includes a wide range of cerebral abnormalities, from patients who are ambulatory but have severe memory disturbances or dementia precluding independent existence, to those who are paralyzed and can communicate only with their eyes, as in the "locked in" syndrome. CPC 4: Unconscious. Unaware of surroundings, no cognition. No verbal and/or psychologic interaction with environment. CPC 5: Brain dead, circulation preserved. Death at Discharge.			ECPR.ECPR2020Addendum	NeurologicalAssessment AdPedScore CPC 1=1, CPC 2=2, CPC 3=3, CPC 4=4, CPC 5=5, Death at Discharge=6

# Neurological Assessment at Discharge (continued)

At the time of hospital discharge, what was the patient's functional performance assessed by Cerebral Performance Category (CPC) for patients >18yo; or Pediatric Cerebral Performance Category (0-18yo).

Informed by Jennett and Bond Assessment of outcome after severe brain damage Lancet 1975 Mar 1;1(7905):480-4; and Fiser Assessing the outcomes of pediatric intensive care J Pediatr. 1992 Jul;121(1):68-74.

Field Name	Definition / Explanation / Example	Data Entry	Collection /	Table Name	Column Name /
		Rules	Modification		Stored Values
Neurological Assessment at Discharge	<ul> <li>Pediatric Cerebral Performance Category Scale (PCPCS):</li> <li>Normal (1): Normal at age appropriate level.</li> <li>School age child attends regular school classroom.</li> <li>Mild Disability (2): Conscious alert and able to interact at an age appropriate level. School age child attending regular school classroom but grade perhaps not appropriate for age. May have mild neurologic deficit.</li> <li>Moderate Disability (3): Conscious. Sufficient cerebral function for age-appropriate independent activities of daily life. School age child attending special education classroom. May have learning deficit.</li> <li>Severe Disability (4): Conscious. Dependent on others for daily support because of impaired brain function.</li> <li>Coma or Vegetative State (5): Any degree of coma without any of the criteria for brain death. Unawareness even if awake in appearance without interaction with the environment.</li> <li>Cerebral unresponsiveness. No evidence of cortical function and aroused by verbal stimuli.</li> <li>Possibly some reflexive responses, spontaneous eye opening and/or sleep-wake cycles.</li> <li>Death (6): Brain Apnea OR areflexia OR electroencephalographic (EEG) silence.</li> </ul>			ECPR.ECPR2020Addendum	AdPedScore Normal (1)=1, Mild Disability (2)=2, Moderate Disability (3)=3, Severe Disability (4)=4, Coma or Vegetative State (5)=5, Brain Death (6)=6