

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

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

For all comments, questions and concerns please email <a href="mailto:registrysupport@elso.org">registrysupport@elso.org</a>

#### **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 prycus@elso.org 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:

Mandatory Data Field

Major complications

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

Major Complication

## **Changes for this rollout**

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

**Changes Highlighted** 

### **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

determined by rescuers.

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.

#### **Precipitating Event** This field defines the events immediately preceding or resulting in ECPR. Events are Cardiac or Non-Cardiac. This is a required field as one selection must be made. Field Name Definition / Explanation / Example **Data Entry Rules** Collection/ Table Name Column Name / Modification Stored Values This field relates the use of ECPR for cardiopulmonary arrest One selection must be ECPR.ECPR2020Addendum PrecipitatingEvent related to cardiac and cardiovascular dysfunction. It may be made. 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 Cardiac support. Patient Z, 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. This field relates to the use of ECPR for cardiopulmonary arrest One selection must be ECPR.ECPR2020Addendum PrecipitatingEvent related to respiratory, infective, neurological etiologies without made. 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 Non-Cardiac cannulation configuration. Patient X, 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'. This field relates to the use of ECPR in the event of unwitnessed One selection must be ECPR.ECPR2020Addendum PrecipitatingEvent cardiopulmonary arrest. Use this field if no information about made. 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 Unknown (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

#### **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 /
	This field colleges notice to with life	One selection	iviounication	FCDD FCDD2020AnteredentFyente	Stored Values EventId 1
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)	must be made.		ECPR.ECPR2020AntecedentEvents	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 Field Name Definition / Explanation / Example **Data Entry Rules** Collection/ Table Name Column Name / Modification **Stored Values** This field collects patients who had One selection ECPR.ECPR2020AntecedentEvents EventId 6 clinical determination of hypoxemia must be made. Lookup table: different from patient baseline and not ECPR.ECPR2020AntecedentEventsCodes Hypoxemia corrected with supplemental oxygen or escalation to positive pressure ventilation. Arterial paCO2 of >90mmHg (or 12kPa) One selection ECPR.ECPR2020AntecedentEvents EventId 7 and/or pH <7.2 from uncompensated must be made. Lookup table: ECPR.ECPR2020AntecedentEventsCodes hypercapnia (References: 1. UK collaborative randomised trial of neonatal extracorporeal membrane oxygenation. UK Collaborative ECMO Trail Group. Lancet. 1996 348(9020):75-82. PubMed Hypercarbia / PMID: 8676720. And 2. Peek GJ, et al Respiratory CESAR trial collaboration. Efficacy and **Acidosis** 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.) Requiring pRBC transfusion (>20ml/kg/24 ECPR.ECPR2020AntecedentEvents One selection EventId 8 Pulmonary hrs of PRBCS or >3U PRBCs/24 hrs in must be made. Lookup table: Hemorrhage neonates and pediatrics and >3U ECPR.ECPR2020AntecedentEventsCodes PRBCS/24 hrs in adults) Requiring insertion of chest drain One selection FCPR.FCPR2020AntecedentEvents EventId 9 Pneumothorax must be made. 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:					
Acidosis					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/	Table Name	Column Name /
			Modification		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 Shock	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

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

#### 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) -			ECPR.ECPR2020CMconditions	ConditionId 18 Lookup table: ECPR.ECPR2020CMconditionCodes
Intoxication/ Ingestion	KDIGO 2012.  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 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.** 

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 chos	en, additional question: Emergency Medical Services of	on site Yes/No is trigg	gered		
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:
	<b>Home:</b> 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,				
	sports stadium, entertainment center, airport,				Public Place=2,
Out of	railway station, church, beach, office building -				Ambulatory Madical Cara-3
Hospital	any location with access to bystanders.  Outpatient Ambulatory Medical Care: According				Ambulatory Medical Care=3,
	to the local ELSO center, a healthcare facility for				Ambulance Transport=4,
Arrest	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.				
	Other: 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				
Services on	part of an organized medical response team.				
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 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 patients who received bystander			ECPR.ECPR2020OOHCA	OOHCAId
	CPR, defined as CPR performed by a person who is				
5	not responding as part of an organized emergency				
Bystander	response system approach to a cardiac arrest.				
CPR	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.				
	This field collects the instance when a bystander			ECPR.ECPR2020OOHCA	OOHCAId
Bystander	attempts defibrillation (e.g., public access or				
AED Use	layperson rescuer defibrillation), it is recorded as a				
7.22 000	defibrillation attempt before EMS arrival. AEDs are				
	increasingly being made available to the public.				
	This field collects where the patient had the initial			ECPR.ECPR2020Addendum	LAInHospital
	cardiopulmonary arrest. Level of available care				
	according to local ELSO center policies to the				
	patient at their in-hospital location at the time of				Lookup table:
	cardiac arrest. Note - Additional question				
	Emergency Medical Services on site Yes/No is NOT				ECPR.ECPR2020ArrestInHospital
	triggered by IN HOSPITAL choices				
					Ambulatory/Outpatient=1,
	Please select one of the following:				
to the original	Ambulatory/Outpatient Area: Non-inpatient				ED=2,
In Hospital	facility within a healthcare setting or hospital which				
Arrest	also manages inpatient care				Inpatient Ward=3 ,
	Emergency Department: Established unit				11511 4
	resourced to provide acute assessment and				HDU=4,
	management to ill and injured patients				
	General Inpatient Ward: According to the local				
	ELSO center, a healthcare facility for assessment				
	and management of illness and/or injury				
	High Dependency Unit, Intermediate Care or				
	Stepdown Unit: According to the local ELSO center,				
	a healthcare facility resourced to provide more				
	acute care than general hospital admission				

	rest (continued)				
	st is the specific location where the event occurred or	and the second s			
	uscitation continued through multiple locations, includen, additional question: Emergency Medical Services of			>20 mins - i.e. according to EC	PR definition. If an out of hospita
Field Name		Data Entry Rules	Collection/	Table Name	Column Name /
ricia riame	Definition / Explanation / Example	Butu Entry Nuics	Modification	Table Name	Stored Values
	Intensive Care Setting: According to the local ELSO			ECPR.ECPR2020Addendum	Stored values
	center, a healthcare facility resourced to provide				ICU=5,
	intensive care. (Drop down list to select specific				,
	ICU: Adult Medicine ICU, Adult Surgical ICU, Mixed				Cath Lab=6 ,
	ICU, Adult Cardiac or Cardiovascular ICU, Adult				
	Coronary Care Unit, Pediatric Intensive Care Unit,				Interventional Radiology=7,
	Pediatric Cardiac Intensive Care Unit, Neonatal				OP-9
	Intensive Care Unit)  Cardiac Catheterization Laboratory: According to				OR=8 ,
	the local ELSO center, a specialized operating room				PACU=9,
	or suite equipped with fluoroscopy for cardiac				,
	catheterization.				Delivery Room=10 ,
In Hospital	Interventional or Diagnostic Suite: According to				Other=11
Arrest	the local ELSO center, a specialized operating room				
(continued)	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.				
	<b>Delivery Room:</b> According to the local ELSO center,				
	a healthcare environment specialized for the care				
	of gravid women and newborn infants.				
	Other Inpatient Setting:  This field collects if the patient has a witnessed			ECPR.ECPR2020Addendum	WitnessedArrest
\A/:+	arrest, defined as one that is seen or heard by			Let N.Eer N.ZozoAddendum	vvidioscumi est
Witnessed	another person or an arrest that is monitored. Was				
Arrest	it recognized immediately that the patient had				
	suffered a cardiac arrest? Note: a person found				

	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 Arrest This section details the management of the arrest.

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 after admission to hospital  Hard Maximum: Must be prior to date and time of death; prior to date and time of ECMO decannulation  Time CPR Commenced  Time CPR Commenced  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.	eld Name	Definition / Explanation / Example	Data Entry Rules	Collection/ Modification	Table Name	Column Name Stored Value
		·	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		ECPR.ECPR2020Addendum	TimeCprComme
Soft limit: It would be unusual for this to be more than 60 minutes			unusual for this to be			

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 and flow without sustained ROSC for >20 minutes?  Estimate total CPR time from documentation of the cardiac arrest including CPR time in minutes from the onset of initial CPR until ECMO cannulation, if there was less than 20 minutes of sustained ROSC.  Patient X, a 54 year old man with s/p successful PCI for 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 mitral valve repair. She had clinical signs of low cardiac 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).  Patient Z, a 50 year old, suffered ventricular fibrillation	Data Entry Rules  Hard Minimum: 1 minute  Hard Maximum: 400 minutes  Soft Notifications: 1 minute and 120 minutes		Table Name  ECPR.ECPR2020Addendum	•
	ROSC for >20 mins).				

CPR Specifics (continued)								
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.  YES if the patient had regained circulation prior to ECMO flow.  NO 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.

utilized/selected, t	he estimated duration of each method will be requeste	ed.			
Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/ Modification	Table Name	Column Name / 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	InitialPulselessRhythm 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	This field collects if the patient had CPR started due to bradycardia slow enough to cause hypoperfusion. I.E, This is rare for adults, but indicated for neonates with a HR <60.			ECPR.ECPR2020Addendum	InitialPulselessRhythm 8

## **Patient treated with Cardioversion or Defibrillation.** 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. Were DC shocks delivered in the management of the arrest?

Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/ Modification	Table Name	Column Name / Stored Values
Patient treated with Cardioversion or	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	Yes / No		ECPR.ECPR2020Addendum	DCCardOrDefi
Defibrillation?	defibrillator, an implantable cardioverter-defibrillator (ICD), or a manual defibrillator.				
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			

	Rhythm at Time of Cannulation								
Field Name	dentified rhythm after ECMO cannulation/initiati  Definition / Explanation / Example	on. Data Entry Rules	Collection/	Table Name	Column Name /				
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.	Modification	ECPR.ECPR2020Addendum	Stored Values RhythmAtTimeCannulation  Lookup table: ECPR.ECPR2020RTCannulation 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.ECPR2020RTCannulation 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.ECPR2020RTCannulation 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.ECPR2020RTCannulation 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.ECPR2020RTCannulation 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.ECPR2020RTCannulation RTCannulationId 7				

	of Cannulation (Continued) identified rhythm after ECMO cannulation/initiation	nn .			
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.			ECPR.ECPR2020Addendum	RhythmAtTimeCannulation  Lookup table: ECPR.ECPR2020RTCannulation 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.ECPR2020RTCannulation  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	RhythmAtTimeCannulation  Lookup table: ECPR.ECPR2020RTCannulation RTCannulationId 6
Unknown	This field collects if the rhythm was unknown, none of the above			ECPR.ECPR2020Addendum	RhythmAtTimeCannulation  Lookup table: ECPR.ECPR2020RTCannulation RTCannulationId 10

Field Name	Definition / Explanation /	Data Entry	Collection/	racheal tube) during the resuscitation e Table Name	Column Name /
	Example	Rules	Modification		Stored Values
	Select medication field for any medication delivered during CPA. Total number of epinephrine and vasopressin doses will be required.	At least one must be selected. Multiple medications may be selected.			
Adenosine				ECPR.ECPR2020AddendumMedications	MedicationId  Lookup table:  ECPR.ECPR2020AddendumMedicationCodes  MedicationId 1
Amiodarone				ECPR.ECPR2020AddendumMedications	MedicationId  Lookup table:  ECPR.ECPR2020AddendumMedicationCode:  MedicationId 2
Atropine				ECPR.ECPR2020AddendumMedications	MedicationId  Lookup table: ECPR.ECPR2020AddendumMedicationCode: MedicationId 3
Calcium Chloride/Gluconate				ECPR.ECPR2020AddendumMedications	MedicationId  Lookup table: ECPR.ECPR2020AddendumMedicationCode: MedicationId 4
Dobutamine				ECPR.ECPR2020AddendumMedications	MedicationId  Lookup table: ECPR.ECPR2020AddendumMedicationCode: MedicationId 5
Dopamine				ECPR.ECPR2020AddendumMedications	MedicationId  Lookup table:

	ECPR.ECPR2020AddendumMedicationCode
	MedicationId 6

	Medications During Cardiopulmonary Arrest (Continued) The term drugs refers to delivery of any medication (by IV cannula, IO needle, or tracheal tube) during the resuscitation event. Check all that apply							
Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/ Modification	Table Name	Column Name / Stored Values			
Epinephrine	Enter the total number of doses delivered to the patient.	Ruics	Wodineation	ECPR.ECPR2020AddendumMedications	MedicationId  Lookup table: ECPR.ECPR2020AddendumMedicationCodes MedicationId 7			
Flumazenil				ECPR.ECPR2020AddendumMedications	MedicationId  Lookup table: ECPR.ECPR2020AddendumMedicationCodes MedicationId 8			
Glucagon				ECPR.ECPR2020AddendumMedications	MedicationId  Lookup table: ECPR.ECPR2020AddendumMedicationCodes MedicationId 9			
Glucose				ECPR.ECPR2020AddendumMedications	MedicationId  Lookup table: ECPR.ECPR2020AddendumMedicationCodes MedicationId 10			
Lidocaine				ECPR.ECPR2020AddendumMedications	MedicationId  Lookup table: ECPR.ECPR2020AddendumMedicationCodes MedicationId 11			
Magnesium Sulfate				ECPR.ECPR2020AddendumMedications	MedicationId  Lookup table: ECPR.ECPR2020AddendumMedicationCodes MedicationId 12			
Milrinone				ECPR.ECPR2020AddendumMedications	MedicationId  Lookup table:			

		ECPR.ECPR2020AddendumMedicationCodes
		MedicationId 13

	ing Cardiopulmonary Arrest (Cor efers to delivery of any medicatio		a, IO needle, or tr	acheal tube) during the resuscitation e	vent. Check all that apply
Field Name	Definition / Explanation /	Data Entry	Collection/	Table Name	Column Name /
	Example	Rules	Modification		Stored Values
				ECPR.ECPR2020AddendumMedications	MedicationId
Naloxone					Lookup table: ECPR.ECPR2020AddendumMedicationCodes MedicationId 14
				ECPR.ECPR2020AddendumMedications	MedicationId
Norepinephrine					Lookup table: ECPR.ECPR2020AddendumMedicationCodes MedicationId 15
				ECPR.ECPR2020AddendumMedications	MedicationId
Phenylephrine					Lookup table: ECPR.ECPR2020AddendumMedicationCodes MedicationId 16
				ECPR.ECPR2020AddendumMedications	MedicationId
Procainamide					Lookup table: ECPR.ECPR2020AddendumMedicationCodes MedicationId 17
				ECPR.ECPR2020AddendumMedications	MedicationId
Sodium Bicarbonate					Lookup table: ECPR.ECPR2020AddendumMedicationCodes MedicationId 18
	Enter the total number of doses delivered to the patient.			ECPR.ECPR2020AddendumMedications	MedicationId
Vasopressin					Lookup table: ECPR.ECPR2020AddendumMedicationCodes MedicationId 19
No Medications				ECPR.ECPR2020AddendumMedications	MedicationId
					Lookup table:

		ECPR.ECPR2020AddendumMedicationCodes
		MedicationId 20

	Ouring Cardiopulmonary Arrest there an attempt to electrically stimulate the	heart for the purpo	se of cardiac pacing	.?	
Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/ Modification	Table Name	Column Name /
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).		Wodincation	ECPR.ECPR2020OiDuringCPA	Stored Values  Olcpald 1  Lookup table: ECPR.ECPR2020OiDuringCPAcodes
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	Olcpald 2  Lookup table: ECPR.ECPR2020OiDuringCPAcodes
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.ECPR2020OiDuringCPAcodes
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.ECPR2020OiDuringCPAcodes
Permanent Pacemaker	This field collects whether the patient had a permanent pacemaker already in place.			ECPR.ECPR2020OiDuringCPA	Olcpald 6  Lookup table: ECPR.ECPR2020OiDuringCPAcodes
No Attempt at Pacing				ECPR.ECPR2020OiDuringCPA	Olcpald 5  Lookup table: ECPR.ECPR2020OiDuringCPAcodes
Unknown				ECPR.ECPR2020OiDuringCPA	Olcpald 6

Ī			
			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?

Quality of CPR					
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
Invasive 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/ Modification	Table Name	Column Name / 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.

Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/	Table Name	Column Name /
			Modification		Stored Values
	This field collects where the patient was cannulated Out of Hospital.			ECPR.ECPR2020Addendum	CDOutOfHospital
	Please select one of the following: <b>Home:</b> Place of residence (e.g., home, apartment, back yard of a home). Private				Lookup table: ECPR.ECPR2020ArrestOutOfHospit
	residence, whether or not it is the patient's primary residence.				Home=1,
	<b>Public Place</b> : Street, city park, shopping center, sports stadium, entertainment center, airport,				Public Place=2,
	railway station, church, beach, office building -				Ambulatory Medical Care=3,
Out of	any location with access to bystanders.				,
Hospital	Outpatient Ambulatory Medical Care:				Ambulance Transport=4,
	According to the local ELSO center, a healthcare				Other=5
	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				
	care at the time of arrest.				
	Other: Other location (e.g., hotel room, private				
	office, long-term care facility)				

Cannulation Location (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				ECPR.ECPR2020ArrestInHospital
	manages inpatient care  Emergency Department: Established unit resourced				Ambulatory/Outpatient=1 ,
	to provide acute assessment and management to ill and injured patients				ED=2,
	General Inpatient Ward: According to the local ELSO center, a healthcare facility for assessment				Inpatient Ward=3 ,
	and management of illness and/or injury High Dependency Unit, Intermediate Care or				HDU=4,
	<b>Stepdown Unit:</b> According to the local ELSO center, a healthcare facility resourced to provide more				ICU=5,
	acute care than general hospital admission  Intensive Care Setting: According to the local ELSO				Cath Lab=6 ,
In Hospital	center, a healthcare facility resourced to provide intensive care. (Drop down list to select specific				Interventional Radiology=7 ,
	ICU: Adult Medicine ICU, Adult Surgical ICU, Mixed ICU, Adult Cardiac or Cardiovascular ICU, Adult				OR=8,
	Coronary Care Unit, Pediatric Intensive Care Unit, Pediatric Cardiac Intensive Care Unit, Neonatal				PACU=9,
	Intensive Care Unit)  Cardiac Catheterization Laboratory: According to the local ELSO center, a specialized operating room				Delivery Room=10 , Other=11
	or suite equipped with fluoroscopy for cardiac catheterization.				
	Interventional or Diagnostic Suite: According to the				
	local ELSO center, a specialized operating room or				
	suite equipped for diagnostic and interventional				
	procedures.				
	Operating Room: 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				
	<b>Delivery Room:</b> 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:								

ECPR System an	d Circuit Prime				
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	ECPRTypeOfPrime

# VI. POST ECPR CARE AND MANAGMENT

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

This field collects whether the patient had any procedure to assess neurological status in the 24-hour period post cannulation.  Field Name Definition / Explanation / Example Data Entry Rules Collection/ Table Name Column Name									
			Modification		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: Standard: According to local protocols, regular duration of EEG Continuous: 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				

This field collects whether the patient had temperature management strategies employed post ECPR.									
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:  Targeted temperature management 32-34 degrees: Informed by Moler et al THAPCA N Engl J Med. 2017 Jan 26;376(4):318-329  Targeted normothermia 36-37.5 degrees: Informed by Moler et al THAPCA N Engl J Med. 2017 Jan 26;376(4):318-329  Targeted temperature management 32-36 degrees: 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	TempManagement 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				

Procedures Post ECPR – Metabolic and Environmental (Continued)  This field collects whether the patient had temperature management strategies employed post ECPR.									
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	LowestTemp24Hrs < 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				

- 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
- 4. If multiple arterial blood gases exist in this time period, choose the post-ECMO arterial blood gas closest to AND after the ECLS Start Time

Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/	Table Name	Column Name /
ricia rianie	Deminion, Expandion, Example		Modification		Stored Values
	This field collects the date and time of the arterial	Soft Notification:			Stored values
	blood gas that meets the timing criteria for the	Post ECPR Blood Gas			
	Post ECPR Blood Gas defined above.	Date/Time must be			
	Tost Let it blood das defined above.	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	than o ms.			
	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.			
	100%				
Post ECPR	ABG at 03/28/2017 10:00PM	Post ECPR Blood Gas			
First Blood	7.06/58/35/16/61% Lactate 11 FiO2 delivered	Date/Time cannot be			
Gas	= 100%	earlier than the Date			
Date/Time	ABG at 03/29/2017 1:00AM	of Birth.			
,	7.07/40/140/16/100% Lactate 10 FiO2				
	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.				

- 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
- 4. If multiple arterial blood gases exist in this time period, choose the post-ECMO arterial blood gas closest to AND 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.	<b>Soft Notification:</b>			
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.	<b>Soft Notification:</b>			
		< 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			

- 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
- 4. If multiple arterial blood gases exist in this time period, choose the post-ECMO arterial blood gas closest to AND 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 <b>Post ECPR Blood Gas</b> defined above.	number			
		<b>Soft Notification:</b>			
		< 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			

- 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
- 4. If multiple arterial blood gases exist in this time period, choose the post-ECMO arterial blood gas closest to AND after the ECLS Start Time

Field Name	Definition / Explanation / Example	Data Entry Rules	Collection/	Table Name	Column Name /
			Modification		Stored Values
НСО₃	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		ECPR.ECPR2020Addendum	HCO3
SaO <sub>2</sub> (%)	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

- 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
- 4. If multiple arterial blood gases exist in this time period, choose the post-ECMO arterial blood gas closest to AND 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			
	<b>Blood Gas</b> 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 <b>Post ECPR Blood</b>				
	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</b>	Debrief Post ECPR								
Monthly review	Monthly review of CPR cases has been associated with improved survival post CPR								
Informed by Ch	an PS, Resuscitation Practices Associated with Su	ırvival After In-Hospita	l Cardiac Arrest: A Natio	onwide 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				
	This field collects if your inter-disciplinary			ECPR.ECPR2020Addendum	DebriefPostECPR				
	team discussed the resuscitation event and								
Debrief Post	ECPR process in the period following ECPR.								
ECPR	If Yes select the timeframe that it occurred.								
LCFK	Within 24 hours:								
	If >24 hours, did this occur within 1 month								
	If >1 month, did this occur within 3 months								

# **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, nonincapacitating 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.	Data Entry Rules	Collection / Modification	Table Name  ECPR.ECPR2020Addendum	
at Discharge	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.				

# **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.