

COVIP study 2022 - Patient CRF

Please fill out the eCRF below.

If you have any questions please write: contact@vipstudy.org

ICU credentials

ICU ID

* must provide value

You received the ICU ID in a confirmation email when you registered your ICU.

ICU primary contacts email address

* must provide value

MUST BE LOWER CASE LETTERS.
The email address used as the primary local contact email when your registered your ICU.
This serves as a confirmation of your identity along with the ICU ID.

Go to: [Demographics](#) [Admission](#) [Interventions](#) [Medical treatment](#) [Erythrocytes](#) [Limitations](#) [Outcome](#) [Follow-up](#)


Demographics

Patient number
(consecutive for your ICU or any format required by local/national regulations)

* must provide value

Unique for this patient at your site.
Usually a consecutive patient number for your ICU. 1, 2, 3 etc.
Use this as a help to match this electronic record to your local records.
First patient is no. 1, second patient is no. 2 and so forth.
Please keep track locally how this number matches that patient i.e. use a national identification number or similar. If your national regulations require you to track each patient any longer number/identification format is allowed as well.
NB. start at 1 for the COVIP-2022-study extension

Date of consent/inclusion

  Today D-M-Y

The ICU interventions and mortality are relative the the ICU admission day which is day 1.

Age at admission

Age at time of admission to ICU.
Whole number.
Only patients age 70 or older on the day of admission can be included in the study.

Gender

☐ Male ☐ Female

[reset](#)

SARS-CoV-2 variant

☐ Beta
☐ Delta
☐ Omikron
☐ Other (known type)
☐ Unknown

[reset](#)

Days in the hospital prior to ICU admission	<input type="text"/> Whole number If patient is admitted to hospital and ICU same day, it's day 1 9999 = unknown
Days with symptom onset prior to hospital admission	<input type="text"/> Days. Whole number. 9999 = unknown/missing
Place of living before admission (optional)	<div><input type="radio"/> Own home - independant (no support)</div> <div><input type="radio"/> Own home (with support)</div> <div><input type="radio"/> Other home with family or caregivers</div> <div><input type="radio"/> Nursing home</div> <div><input type="radio"/> Hospital ward</div> <div><input type="radio"/> Other</div> <div><input type="radio"/> Unknown</div> <div>reset</div>
<div>Go to: Demographics Admission Interventions Medical treatment Erythrocytes Limitations Outome Follow-up</div>	
ICU admission	
First blood gas analysis	
PaO2	<div><input type="text"/> mmHg <input type="text"/> kPa</div> <div>Enter either mmHg or kPa. Use . for decimal separator.</div>
FiO2 (refer to table below if the patient is not on mechanical ventilation)	<div><input type="text"/></div> <div>Range: 0.21-1. Use . for decimal separator 9999 = unknown/missing</div>

System, flow and oxygen delivery

Low-Flow System	Oxygen Flow Rates (L/min)	FiO ₂
Nasal cannula	1	0.24
	2	0.28
	3	0.32
	4	0.36
	5	0.40
	6	0.44
Simple face mask	5-6	0.40
	6-7	0.50
	7-8	0.60
Partial-rebreathing mask	6	0.60
	7	0.70
	8	0.80
	9	0.80
	10	0.80
Non-rebreathing mask	10	0.80
	15	0.90
Adapted from Critical Care Medicine: Perioperative Management by Michael James Murray, Lippincott Williams & Wilkins, 2002		

PaCO₂

mmHg

kPa

Enter either mmHg or kPa.
Use . for decimal separator.

Vaccination status

- ☐ Not vaccinated
☐ Initial fully vaccinated (according to license + >14 days since last vaccination)
☐ Received booster

[reset](#)

Immuno-suppression

- ☐ Yes ☐ No

[reset](#)

Active haemato-oncology disease or active immunosuppressive drugs

Go to: [Demographics](#) [Admission](#) [Interventions](#) [Medical treatment](#) [Erythrocytes](#) [Limitations](#) [Outcome](#) [Follow-up](#)

SOFA score values (at or close to time of admission)

Mechanically ventilated

- ☐ Yes ☐ No

[reset](#)

At or close to time of admission

Glasgow Coma Scale score

3-15. Unknown=9999.
At or close to time of admission.

Mean arterial pressure

- ☐ MAP ≥ 70 mmHg ☐ MAP < 70 mmHg

[reset](#)

At or close to time of admission

Dopamine	<input type="radio"/> None <input type="radio"/> > 0 and <= 5 µg/kg/min <input type="radio"/> > 5 and <= 15 µg/kg/min <input type="radio"/> > 15 µg/kg/min At or close to time of admission	reset
Dobutamine	<input type="radio"/> None <input type="radio"/> Yes (any dose) At or close to time of admission	reset
Vasopressin (or analogue such as terliepressin and selepressin)	<input type="radio"/> None <input type="radio"/> Yes (any dose) At or close to time of admission	reset
Norepinephrine (noradrenaline)	<input type="radio"/> None <input type="radio"/> Yes <= 0.1 µg/kg/min <input type="radio"/> Yes > 0.1 µg/kg/min At or close to time of admission	reset
Epinephrine (adrenaline)	<input type="radio"/> None <input type="radio"/> Yes <= 0.1 µg/kg/min <input type="radio"/> Yes > 0.1 µg/kg/min At or close to time of admission	reset
Bilirubin	<div> <input type="text"/> µmol/L <input type="text"/> mg/dl </div> Enter either µmol/L or mg/dl. Normal range ca. 5-25 µmol/L or 0.3-1.2 md/dl. At or close to time of admission. Use . as decimal separator.	
Platelets (10³/µL)	<input type="text"/> Normal range 150-450.	
Creatinine	<div> <input type="text"/> µmol/L <input type="text"/> mg/dl </div> Enter either µmol/L or mg/dl. Normal range ca. 50-115 µmol/L or 0.6-1.3 md/dl. At or close to time of admission. Use . as decimal separator.	
Urine output	<input type="radio"/> > 500 ml/day <input type="radio"/> > 200 and <= 500 ml/day <input type="radio"/> <= 200 ml/day 	reset
Clinical Frailty Scale		
Clinical Frailty Scale assesment	<input checked="" type="radio"/> Was assessed <input type="radio"/> Was not assessed Please attempt to assess CFS even though it is not used in daily clinical practice at your institution. The CFS may be assessed via the patient records.	reset

Clinical Frailty Scale



1 Very Fit – People who are robust, active, energetic and motivated. These people commonly exercise regularly. They are among the fittest for their age.



7 Severely Frail – Completely dependent for personal care, from whatever cause (physical or cognitive). Even so, they seem stable and not at high risk of dying (within ~ 6 months).



2 Well – People who have no active disease symptoms but are less fit than category 1. Often, they exercise or are very active occasionally, e.g. seasonally.



8 Very Severely Frail – Completely dependent, approaching the end of life. Typically, they could not recover even from a minor illness.



3 Managing Well – People whose medical problems are well controlled, but are not regularly active beyond routine walking.



9 Terminally Ill – Approaching the end of life. This category applies to people with a life expectancy <6 months, who are not otherwise evidently frail.



4 Vulnerable – While not dependent on others for daily help, often symptoms limit activities. A common complaint is being “slowed up”, and/or being tired during the day.



5 Mildly Frail – These people often have more evident slowing, and need help in high order IADLs (finances, transportation, heavy housework, medications). Typically, mild frailty progressively impairs shopping and walking outside alone, meal preparation and housework.

Scoring frailty in people with dementia

The degree of frailty corresponds to the degree of dementia. Common **symptoms in mild dementia** include forgetting the details of a recent event, though still remembering the event itself, repeating the same question/story and social withdrawal.

In **moderate dementia**, recent memory is very impaired, even though they seemingly can remember their past life events well. They can do personal care with prompting.

In **severe dementia**, they cannot do personal care without help.



6 Moderately Frail – People need help with all outside activities and with keeping house. Inside, they often have problems with stairs and need help with bathing and might need minimal assistance (cuing, standby) with dressing.

Clinical Frailty Scale Score

- ☐ 1. Very fit
- ☐ 2. Well
- ☐ 3. Managing well
- ☐ 4. Vulnerable
- ☐ 5. Mildly frail
- ☐ 6. Moderately frail
- ☐ 7. Severely frail
- ☐ 8. Very severely frail
- ☐ 9. Terminally ill

[reset](#)

1-9

Prior to this hospital admission
See image/pictogram of scale above.

F-R-A-I-L score

F > Functional impairment

- ☐ Yes
- ☐ No

[reset](#)

Patients who are unable to carry out their instrumental or even basic activities of daily living independently

R > Recurrent hospitalizations

- ☐ Yes
- ☐ No

[reset](#)

Patients who have 2 or more unplanned hospital admissions in the past 12 months

A -> Advanced malignancy and chronic disease	<input type="radio"/> Yes <input type="radio"/> No reset <p>Examples include metastatic cancer and GOLD IV chronic obstructive pulmonary disease.</p>
I -> Irreversible organ failure	<input type="radio"/> Yes <input type="radio"/> No reset <p>Examples include end-stage renal failure and heart failure that exhausted existing treatment options.</p>
L -> Long hospital stay	<input type="radio"/> Yes <input type="radio"/> No reset <p>Patients hospitalized for a prolonged period of time in the current episode due to poor progress or complications.</p>
F-R-A-I-L sum	<input type="text"/>
Go to: Demographics Admission Interventions Medical treatment Erythrocytes Limitations Outcome Follow-up	
ICU interventions	
Intubation and mechanical ventilation?	<input checked="" type="radio"/> Yes <input type="radio"/> No reset <p>Was patient intubated and mechanically ventilated at any time during the ICU stay?</p>
Start of Intubation and mechanical ventilation (day number)	<input type="text"/> <p>Whole number. The day the treatment was started. The day of ICU admission is number 1. 9999 = unknown</p>
End of Intubation and mechanical ventilation (day number)	<input type="text"/> <p>Whole number. The day the treatment was ended. The day of admission is number 1. 9999 = unknown</p>
Treatment with prone position	<input checked="" type="radio"/> Yes <input type="radio"/> No reset <p>During mechanical ventilation.</p>
Start of prone position treatment (day number)	<input type="text"/> <p>Whole number. The day the treatment was started. The day of ICU admission is number 1. 9999 = unknown</p>
Proned during...	<input type="checkbox"/> High Flow Oxygen treatment <input type="checkbox"/> Non-invasive ventilation (NIV) <input type="checkbox"/> Mechanical ventilation
Tracheostomy	<input checked="" type="radio"/> Yes <input type="radio"/> No reset <p>Tracheostomy performed with any technique (surgical, dilatational etc.) during ICU stay</p>

Day of tracheostomy (day number)	<input type="text"/> Whole number. The day the treatment was started. The day of ICU admission is day 1. 9999 = unknown/missing 8888 = patient had a tracheostomy at ICU admission
Vasoactive drugs used?	<input checked="" type="radio"/> Yes <input type="radio"/> No reset Were vasoactive drugs used during ICU stay? Vasopressors, inopressors or inodilators (at any point during the ICU stay) Only if adrenergic agents were used. Pure vasodilators should be disregarded.
Start of treatment with vasoactive drugs (day number)	<input type="text"/> Whole number. The day the treatment was started. The day of ICU admission is number 1. 9999 = unknown
End of treatment with vasoactive drugs (day number)	<input type="text"/> Whole number. The day the treatment was started. The day of ICU admission is number 1. 9999 = unknown
Renal Replacement Therapy used?	<input checked="" type="radio"/> Yes <input type="radio"/> No reset Was renal replacement therapy of any type used during ICU stay?
Start of Renal Replacement Therapy (RRT) (day number)	<input type="text"/> Whole number. The day the treatment was started. The day of ICU admission is number 1. 9999 = unknown
Type of Renal Replacement Therapy (RRT)	<input type="radio"/> Only intermittent RRT <input type="radio"/> At least one period of continuous RRT reset
End of Renal Replacement Therapy (RRT) (day number)	<input type="text"/> Whole number. The day the treatment was started. The day of ICU admission is number 1. 9999 = unknown
Non-invasive ventilation (NIV)?	<input checked="" type="radio"/> Yes <input type="radio"/> No reset Was non-invasive ventilation used during ICU stay? Intermittant CPAP does not count as NIV-treatment. High-flow-nasal cannula oxygen therapy is not considered NIV treatment.
Start of Non-invasive ventilation (NIV) (day number)	<input type="text"/> Whole number. The day the treatment was started. The day of ICU admission is number 1. 9999 = unknown

End of Non-invasive ventilation (NIV) (day number)	<input type="text"/> Whole number. The day the treatment ended (even if after period of HFNO or mechanical ventilation). The day of ICU admission is number 1. 9999 = unknown
High flow nasal oxygen used?	<input checked="" type="radio"/> Yes <input type="radio"/> No reset
Start of HFNO (day number)	<input type="text"/> Whole number. The day the treatment was started. The day of ICU admission is number 1. 9999 = unknown
End of HFNO (day number)	<input type="text"/> Whole number. The day the treatment ended (even if after period of mechanical ventilation). The day of ICU admission is number 1. 9999 = unknown
Go to: Demographics Admission Interventions Medical treatment Erythrocytes Limitations Outcome Follow-up	
Medical treatment	
Corticosteroids	<input checked="" type="radio"/> Yes <input type="radio"/> No reset
First dose of steroids (day number)	<input type="text"/> Day number. Whole number. The day the treatment was started. The day of ICU admission is number 1, here it can be a negative value.
Last dose of steroids (day number)	<input type="text"/> Day number. Whole number. The day the treatment was ended. The day of ICU admission is number 1, here it can be a negative value.
Steroid bolus/pulse used (large single dose of methylprednisolone or equivalent)	<input checked="" type="radio"/> Yes <input type="radio"/> No reset
Steroid bolus/pulse dose	<input type="text"/> Miligrams of methylprednisolone or equivalent.
IL-6R receptor blockers ex.tocilizumab, sarilumab (also if given before ICU)	<input type="radio"/> Yes <input type="radio"/> No reset
JAK inhibitor such as Baricitinib (also if given before ICU)	<input type="radio"/> Yes <input type="radio"/> No reset
Neutralizing monoclonal antibodies (also if given before ICU)	<input type="radio"/> Yes <input type="radio"/> No reset

Remdesivir (also if given before ICU)	<input type="radio"/> Yes <input type="radio"/> No	reset
Molnupuravir (also if given before ICU)	<input type="radio"/> Yes <input type="radio"/> No	reset
Paxlovid (also if given before ICU)	<input type="radio"/> Yes <input type="radio"/> No	reset
Go to: Demographics Admission Interventions Medical treatment Erythrocytes Limitations Outcome Follow-up		

Erythrocytes

First hemoglobin value at ICU admission	<input type="text"/> mol/L <input type="text"/> g/dl	Enter either mmol/L or g/dl. Use . as decimal separator.
Lowest hemoglobin value during ICU stay	<input type="text"/> mol/L <input type="text"/> g/dl	Enter either mmol/L or g/dl. Use . as decimal separator.
Hemoglobin value at ICU discharge (if patient survived to ICU discharge)	<input type="text"/> mol/L <input type="text"/> g/dl	Enter either mmol/L or g/dl. Use . as decimal separator.
Was a red blood cell transfusion performed?	<input checked="" type="radio"/> Yes <input type="radio"/> No	reset
How many red blood cell transfusions (bags) during ICU stay?	<input type="text"/>	
Transfusion trigger in this patient for the first RBC transfusion (hemoglobin value)	<input type="text"/> mol/L <input type="text"/> g/dl	Enter either mmol/L or g/dl. Use . as decimal separator.

Discharge

Was ICU discharge planned together with a geriatrician?	<input type="radio"/> Yes <input type="radio"/> No	reset Geriatrician = physician specialised in geriatrics.
Would you be surprised if this patient is dead in three months time?	<input type="radio"/> Yes <input type="radio"/> No	reset
Go to: Demographics Admission Interventions Medical treatment Erythrocytes Limitations Outcome Follow-up		

Limitations of treatment

Life sustaining care withheld	<input checked="" type="radio"/> Yes <input type="radio"/> No	reset Was a decision made to withhold any therapy for this patient? (For example was decision made to not treat with mechanical ventilation, CRRT or other).
When was decision made to withhold life sustaining care (day number)	<input type="text"/>	The day of the decision to withhold the first life sustaining treatment. The day of admission is day 1. 9999 = unknown/missing
Life sustaining care withdrawn	<input checked="" type="radio"/> Yes <input type="radio"/> No	reset Was a decision made to withdraw life sustaining therapy that had been started?
When was decision made to withdraw life sustaining care (day number)	<input type="text"/>	The day of the decision to withhold the first life sustaining treatment. The day of admission is day 1. 9999 = unknown/missing
Was any family meeting performed to discuss prognosis, limitations of care and patient's will?	<input type="radio"/> Yes <input type="radio"/> No	reset
Was treatment withdrawn or withhold performed without consulting next of kin?	<input type="radio"/> Yes <input type="radio"/> No	reset YES means that you did not consult the caregivers.
Were any written advanced directives available for the treatment team?	<input type="radio"/> Yes <input type="radio"/> No	reset
Go to: Demographics Admission Interventions Medical treatment Erythrocytes Limitations Outcome Follow-up		
<h2>Outcome</h2>		
Survived to ICU discharge	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	reset
ICU length of stay (hours)	<input type="text"/>	Sum of hours (whole number) from admission until discharge (or death if patient died in the ICU). 9999 = unknown/missing
Vital status at 30 days	<input type="radio"/> Alive <input type="radio"/> Dead <input type="radio"/> Unknown	reset From day of ICU admission. Day of ICU-admission is day 1. Please make an effort to find this information.
Vital status at 3 months	<input checked="" type="radio"/> Alive and discharged from ICU <input type="radio"/> Alive but still admitted to ICU <input type="radio"/> Dead <input type="radio"/> Unknown/missing	reset From day of ICU admission. Day of ICU-admission is day 1. Please make an effort to find this information.

Follow-up after 3 months

Place of living after three months (optional)

- ☐ Own home - independant (no support)
- ☐ Own home (with support)
- ☐ Other home with family or caregivers
- ☐ Nursing home
- ☐ Hospital ward
- ☐ Other
- ☐ Unknown

[reset](#)

Question for the patient:
If you had known this would be your current condition after three months: Would you have wanted ICU care?

- ☐ Yes
- ☐ No
- ☐ I don't know

[reset](#)

Question for the partner or caregiver:
If you had known this would be the patient's condition after three months: Would you have wanted ICU care for your relative?"

- ☐ Yes
- ☐ No
- ☐ I don't know

[reset](#)

In relation to your current quality of life: what do you think is the longest acceptable time to receive treatment on the ICU?

Days.

EQ-5D-5L after 3 months (OPTIONAL)

This sections only opens for entry if the patient is marked as alive after 3 months.

EQ-5D-5L scoring obtained from

- ☒ Patient
- ☐ Family/caregiver
- ☐ Hospital records
- ☐ Other
- ☐ Not assessed

[reset](#)

Describing the health today:
Please answer on behalf of the patient or by yourself, respectively.
Under each heading, mark correct/incorrect according to what your assessment or let the patient describe his/her own health TODAY if he/she were able to do.

Mobility (walking about)

- ☐ There are no problems in walking about
- ☐ There are slight problems in walking about
- ☐ There are a moderate problems in walking about
- ☐ There are a severe problems in walking about
- ☐ There is inability to walk about

[reset](#)

Self-care

- ☐ There are no problems in washing or dressing
- ☐ There are slight problems in washing or dressing
- ☐ There are moderate problems in washing or dressing
- ☐ There are severe problems in washing or dressing
- ☐ There is inability to wash or dress

[reset](#)

**Usual activities
(for example work, study, housework, family or leisure activities)**

- ☐ There are no problems doing usual activities
- ☐ There are slight problems doing usual activities
- ☐ There are moderate problems doing usual activities
- ☐ There are severe problems doing usual activities
- ☐ There is inability to do usual activities

[reset](#)

Pain / discomfort

- ☐ There is no pain or discomfort
- ☐ There is slight pain or discomfort
- ☐ There is moderate pain or discomfort
- ☐ There is severe pain or discomfort
- ☐ There is extreme pain or discomfort

[reset](#)

Anxiety / Depression

- ☐ There is no anxiety or depression
- ☐ There is slight anxiety or depression
- ☐ There is moderate anxiety or depression
- ☐ There is severe anxiety or depression
- ☐ There is extreme anxiety or depression

[reset](#)

We would like to know how good or bad your/the patient's health is TODAY.



Change the slider above to set a response

[reset](#)

- 1) This scale is numbered from 0 to 100.**
- 2) 100 means the best health imaginable**
- 3) 0 means the worst health imaginable**
- 4) Move the slider to indicate how the health is TODAY.**

Please use "**Submit**"-button to commit data to the database.

(There's no need to use "Save and return later" as you will ALWAYS have access to an overview of your patients and will be able to return to view/edit data for any of these via the link on your ICU overview page).

Submit

Save & Return Later