GiViTI

Gruppo Italiano per la Valutazione degli Interventi In Terapia Intensiva

Report PROSAFE project

Year 2018

National report for general ICUs (6 ICUs)

POLAND

PROSAFE project - National report for general ICUs (6 ICUs)

May 2019

Authors of the report:

Valentina Barbetta, Bergamo - IT Francesca Baroncelli, Torino - IT Guido Bertolini, Bergamo - IT Corinne Bonardi, Bergamo - IT Greta Carrara, Bergamo - IT Stefano Finazzi, Bergamo - IT Joanne Fleming, Padova - IT Elena Garbero, Bergamo - IT Giulia Mandelli, Bergamo - IT Luana Nava, Bergamo - IT Carlotta Rossi, Bergamo - IT

Software developers:

Gaia Vitiello, Bergamo - IT

Obou Brissy, Bergamo - IT Marco Carminati, Bergamo - IT Michele Giardino, Bergamo - IT Carlo Gustinetti, Bergamo - IT Marco Sala, Bergamo - IT Giampietro Trussardi, Bergamo - IT Michele Zanetti, Bergamo - IT

Steering Committee:

Andrea Bottazzi, Pavia - IT
Arturo Chieregato, Milano - IT
Stefano Finazzi, Bergamo - IT
Roberto Fumagalli, Milano - IT
Sergio Livigni, Torino - IT
Giuseppe Nardi, Rimini - IT
Giancarlo Negro, Lecce - IT
Carlo Olivieri, Novara - IT
Daniele Poole, Belluno - IT
Danilo Radrizzani, Milano - IT
Clara Ripamonti, Lecco - IT
Mario Tavola, Genova - IT
Bruno Viaggi, Firenze - IT

GiViTI Coordinating Center

Daccò Center for Clinical Research on Rare Diseases Mario Negri Institute for Pharmacological Research Villa Camozzi - 24020 Ranica (BG), IT tel: +390354535313 email: giviti@marionegri.it www.giviti.marionegri.it

The PROSAFE/CREACTIVE project has received funding from the European Union's Seventh Framework Programme for research, technological development and demonstration under grant agreement No. 602714 and DGSANCO Contract No. 2007331. Stefano Finazzi has been supported by Fondazione CARIPLO through grant No. 2014-1962. GiViTI thanks Alifax, Bellco, MSD and Thermo Fisher for the unconditional grants.

Contents

The project	5
Data collection	5
The reports	6
Description of the statistics Project participation	6 7
Statistics Project participation Description of hospitals Description of ICUs Study flow-chart Description of adult patients Description of adult patients evaluated in the GiViTI model Description of adult non surgical patients evaluated in the GiViTI model Description of adult elective surgical patients evaluated in the GiViTI model Description of adult emergency surgical patients evaluated in the GiViTI model Validity of the models	19 20 23 25 37 49 61 73
Appendix	87

The project

The PROSAFE project was conceived as an observational project for the continuous electronic collection of data on patients admitted to intensive care units (ICUs). The objectives of the project are to:

- standardize the procedures for collecting data on admitted patients;
- analyse the activity carried out in terms of both clinical results achieved and resources used;
- gather information on the collected case series for research and/or routine clinical management purposes;
- promote comparison among ICUs, on the basis of detailed epidemiological research work, with a view to improving the quality of the care provided.

In addition to these general objectives, the PROSAFE project provides a tool that serves as the operating base for all research projects undertaken by the individual ICUs, both under the umbrella of the GiViTI group and at local level. The PROSAFE program, by virtue of its modular structure, is designed to smoothly integrate the collection of basic data (the PROSAFE 'core') with the collection of specific data for research projects focused on various different topics (the PROSAFE 'petals').

The Petals functioning in 2018 in Italy were:

- the Infections Surveillance Petal, designed to describe the epidemiology of infections in ICUs in Italy, focusing
 specifically on the identification and study of the main risk and prognostic factors for infections, with a view to
 comparing the various ICUs in terms of incidence of infections and their severity, prevalent bacterial flora and
 multiresistant germs;
- the Cardiosurgical Petal, whose aim is to describe in detail the characteristics of patients admitted to the ICU and subject to cardiosurgical procedures;
- the StART Petal, whose objective is to assess the appropriateness of ICU bed utilization by comparing the level of care required by admitted patients with the level of care that can be provided using available resources.
- the CREACTIVE (Collaborative REsearch on ACute Traumatic brain Injury in intensiVe care medicine in Europe) and CAF (Creactive Ambulatory Follow-up) Petals, that aim to collect relevant information to better characterize patients admitted to the ICU for a traumatic brain injury (european collaborative project FP7-HEALTH-2013-INNOVATION-1).
- the TUONO Petal, designed to permit comparison of chest ultrasound reports.
- the BIO-AX-TBI Petal, whose aim is to identify biological and imaging biomarkers that best characterize axonal injury in traumatic brain injury.

The information currently collected in the program 'core' refers to personal patient data, information on origin, reason for admission and whatever else GiViTI has, over the years, determined to be needed to best describe patients admitted to intensive care.

Data collection

The PROSAFE software is distributed free of charge to all ICUs taking part in the project. To date 293 ICUs collected data during 2018, 257 Italian and 36 foreign ICUs, for a total of 97069 patients registered in PROSAFE. Only the ICUs that collected valid data (233) for a period of over 4 months were included in the aggregate analyses. On the whole, therefore, the assessment was based on a total of 88248 patients admitted to intensive care during 2018.

The reports

The Coordinating Centre (GiViTI) produces the following reports (only for subgroups composed of at least 5 ICUs):

- 1. The (Italian) national report on the general (medical/surgical) ICUs. This first report includes the logistic regression model to assess performance in the various ICUs taking part in the project. The statistics for the most representative regions can be downloaded from the GiViTI website (www.giviti.marionegri.it).
- 2. The (Italian) national report on the surgical ICUs.
- 3. The (Italian) national report on the neurosurgical ICUs.
- 4. The personalized report for each individual centre, in Italian or English, which has different sections according to type of ICU and a similar structure to the national report, is designed to foster precise but user-friendly interpretation of the various values for predicting hospital mortality.

All reports (except for the personalized reports, sent to the project Contact person and the Director of the ICU) can be downloaded from the PROSAFE Project section of the GiViTI website (www.giviti.marionegri.it). The participating ICUs can access an online tool, the Analyzer (http://givitiweb.marionegri.it/Analyzer/), to perform analyses both on their own data and on the whole national dataset. An analysis application form is available on the GiViTI website to obtain more complex analyses.

Description of the statistics

Project participation

The table on page 17 summarizes the participation in the project of the 233 ICUs which collected valid data in 2018 for a period of at least 4 months.

Description of the hospitals and ICUs

This section presents the organizational-structural features of the ICUs included in the report. The information (except for the information shown on page 21, which is the result of joint analysis of structural data and those collected during the year via the software) is taken from the 'Structural Data' form (available on the GiViTI portal at https://givitiweb.marionegri.it/). Absolute numbers, percentages and the number of missing data are reported for the categorical variables; the mean, standard deviation, median and Q1 (first quartile: the value below which lie 25% of the population) and Q3 (third quartile: the value below which lie 75% of the population) serve as indicators for the continuous variables.

Below are a few tips on how to correctly interpret the statistics.

Number of accredited beds Number of beds officially accredited.

Number of available beds Number of beds actually available in ICU. This number is the sum of the beds declared in each single room ('Structural Data' form, section 'Icu rooms'). This number is used for computing utilization indicators.

ICU Structure We define as 'OPEN-SPACE' a ward where each room can be 'monitored' from any other. A room can be 'monitored' from another room when all the beds located in the other room can be visually and

instrumentally controlled.

Available beds per physician (average) e Available beds per nurse (average) The mean is computed taking into account the differences between daily shifts of personnel.

Indicators of utilization Data on the number of available beds, total admissions in 2018 and ICU stay days were used to calculate indicators of utilization, i.e. indicators able to measure utilization levels and healthcare facility activity levels.

• The bed **occupation rate** expresses bed occupancy as a percentage value, by dividing total ICU stay days recorded at a given time by the total number of days in the period in question multiplied by the number of staffed beds. The product corresponds to the ICU's total availability for admissions (daily number of available beds); the closer total ICU stay days are to total availability, the more the occupation rate tends towards 100%. Occupation rate can even exceed 100% when a new patient is admitted to a bed that became vacant on the same day.

Occupation rate =
$$\frac{\text{ICU stay days}}{\text{Days} \times \text{Number of beds}}$$
 (1)

• The **rotation index** expresses the mean number of patients 'staying' in a bed in one year. It is calculated by dividing the number of admissions by the number of beds. Data collected for less than one year have to be extrapolated.

Rotation index =
$$\frac{\text{Number of patients}}{\text{Number of beds}}$$
 (2)

• The **turnover interval** expresses the period of time in which a bed remains vacant between two consecutive patients. It is calculated by dividing the number of days with vacant beds by the number of patients admitted during the period in question, giving mean unoccupied time per bed. It is calculated by dividing the number of days with unoccupied beds by the number of patients admitted in the period in question. This gives the mean unoccupied time per bed. This indicator is expressed in hours.

Turnover =
$$24 \times \frac{\text{(Number of beds} \times \text{Days)} - \text{ICU stay days}}{\text{Number of patients}}$$
 (3)

Occupied beds per physician (average) e Occupied beds per nurse (average) The mean is computed taking into account the differences between daily shifts of personnel. Daily occupied beds are considered in the calculations. This number is obtained by multiplying the average number of beds available per operator for the occupation rate (preliminarily divided by 100).

Study flow-chart

The flow chart, or tree diagram, on page 23 presents the various subgroups of analysed patients. PROSAFE has a very accurate indicator of the completeness and validity of the data entered on each patient, i.e. status.

The program envisages 5 status levels:

- status 1 the patient record presents errors or unsolved warnings;
- status 2 the record is incomplete, there are still missing data;

- status 3 the patient has been discharged from the ICU, the clinical data are all entered and have undergone congruency checks; only hospital outcome is missing;
- status 4 record complete and free of errors;
- status 5 record free of errors but incomplete; the missing data are irretrievable.

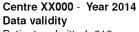
Patients with status 1, 2 and 5 data are clearly incomplete.

It would be wrong to omit only patients with incomplete data (in status 1, 2 and 5) from the analyses since this could skew the estimates because of a so-called 'selection bias'. Patients with incomplete data may instead represent a special population subgroup. If only these patients were omitted from the analysed group, the statistics would no longer represent the whole group. It is plausible to assume, for example, that the majority of the patients for whom hospital outcome is missing were discharged alive from hospital, since it is much easier and quicker to retrieve information on hospital outcome when a patient has died. Calculating statistics on hospital mortality in the whole group of patients would result in mortality being incorrectly overestimated.

To address this problem it was decided to omit from each individual ICU's data any patients recruited during months when the validity percentages were below a high threshold (approximately 90%). Another check performed to reduce the risk of selection bias is to analyse the number of patients admitted per month. If the number of patients admitted in one or more months differs significantly from the mean number of monthly admissions (with a threshold arbitrarily set at a mean of +/- 2 trimmed SD), or if the variability in the number of admissions is too high (variation coefficient above 40%), a warning message will appear asking for the entered data to be checked. To correctly participate in the PROSAFE project, all patients consecutively admitted to the ICU must be registered in the software on a continuous basis throughout the year; any marked swings in the number of admissions should suggest that there may be patient registration 'gaps'. It is, however, impossible to distinguish between registration 'gaps' and periods in which there is a real reduction/increase in admissions. Hence our objective is to draw attention to potential problems by asking each individual centre for feedback.

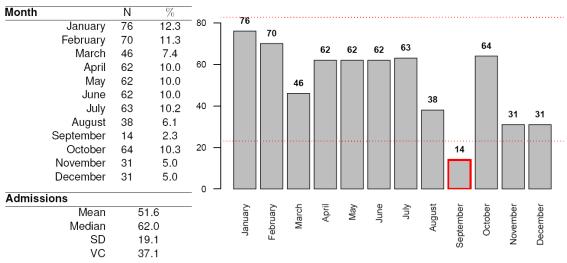
To more clearly illustrate the selection methods used in the choice of valid data, we present an extract from the data validity report of a randomly selected, anonymized ICU.

From January to December, Centre XX000 recruits a total of 619 patients. The first table and the bar graph show the number of monthly admissions to intensive care. In this case, a warning will appear at the bottom of the bar graph asking for confirmation of the entered data.



Patients admitted: 619

Admissions



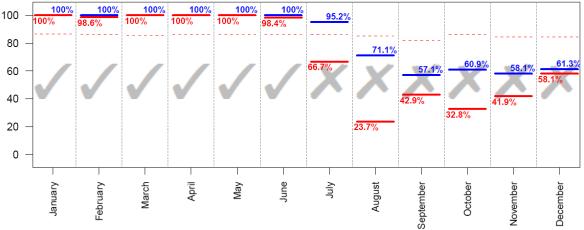
WARNING! The highlighted months have a number of patients quite different from the average. Please verify the correctness of the data and, particularly, that all consecutive patients have been registered in the Prosafe software.

The second table divides the recruited patients by admission month and form completion status. Overall, the ICU in question presents complete data for 485 patients. 134 patients still present incomplete data.

	Status (N)								
Month	1	2	3	4	5	Total	% Pts. in status 3/4	% Pts. in status 4	
January	0	0	0	76	0	76	100.0	100.0	
February	0	0	1	69	0	70	100.0	98.6	
March	0	0	0	46	0	46	100.0	100.0	
April	0	0	0	62	0	62	100.0	100.0	
May	0	0	0	62	0	62	100.0	100.0	
June	0	0	1	61	0	62	100.0	98.4	
July	0	3	18	42	0	63	95.2	66.7	
August	0	11	18	9	0	38	71.1	23.7	
September	0	6	2	6	0	14	57.1	42.9	
October	4	21	18	21	0	64	60.9	32.8	
November	0	13	5	13	0	31	58.1	41.9	
December	0	12	1	18	0	31	61.3	58.1	
Total	4	66	64	485	0	619	88.7	78.4	

The final graph shows level of data completeness in the various months. Percentages of patients with records in status 3 or 4 and in status 4 are shown in blue and red respectively.

According to our elimination criterion, the overall analysis will exclude those patients admitted in the months of August, September, October, November and December since they present a validity percentage below the defined threshold (dashed line). Accordingly, 441 patients have valid data for the analysis. Regarding analysis of hospital mortality, patients admitted in July will also be excluded (in that month the % of patients with record not in status 4 is still too hight). Hence, the analysis on hospital outcome will involve 378 patients on 619 admitted.



Patients admitted in months with % of patients in status 3 or 4 over the threshold (drawn in the graph with a dashed line): **441**; patients in status 4: **378**.

Description of patients

These sections of the report present the results of the analyses conducted on the group of patients with valid data. Patients admitted in the months with This part presents patient characteristics at ICU admission and during ICU stay, severity scores, process indicators, and outcomes for the various patient subgroups.

Absolute number, percentage and number of missing data are reported for the categorical data, while mean, standard deviation, median, interquartile range (Q1-Q3) and minimum and maximum range are reported for continuous variables. The acronym 95% CI indicates the 95% confidence interval of the estimate.

Below are a few tips on how to correctly interpret the analyses.

BMI The calculation of Body Mass Index is based on weight and height values, with the following formula:

$$BMI = \frac{\text{weight (kg)}}{\text{height (m)}^2}$$
 (4)

The categories of underweight, overweight and obese are determined according to the following criteria: underweight if BMI<20 (males) or BMI<19 (females); normal weight if 20<=BMI<=25 (males) or 19<=BMI<=24 (females); overweight if 25<BMI<=30 (males) or 24<BMI<=29 (females); obese if BMI>30 (males) or BMI>29 (females).

Stay before ICU Days spent between admission to hospital and admission to ICU.

Reason for transfer from other ICU The reported items refer to the following reasons:

- Specialist expertise -> specialist expertise within the hospital;
- Step-up care -> management of high complexity critical patient;
- Logistical/organizational reasons -> continuation of treatment in stabilized patient (transfer for logistic/ organizational reasons);
- Step-down care-> continuation of treatment in a non-specialist environment.

Surgical interventions on admission (top 10) This lists the top 10 surgical interventions, divided by elective surgery and emergency surgery patients, operated between 7 days prior to and one day after admission to the ICU. Each

single intervention (even more than one per patient) is counted.

Timing of surgical interventions on admission The timing of sorgical interventions on admissions is specified. Each single intervention (even more than one per patient) is counted. It may happen that the percentages exceed the threshold of 100 % if patients underwent more than one intervention in the specified time periods.

Multiple trauma The category multiple trauma is defined by the presence of trauma in two or more regions.

SAPSII The score cannot be calculated if GCS (first 24 hours) is unassessable.

The SAPSII score for individual patients can become the probability of dying in hospital. This is performed by the following formula:

Predicted hospital mortality =
$$\frac{e^{\text{Logit}}}{1 + e^{\text{Logit}}}$$
 (5)

where

$$Logit = -7.763 + 0.074 \times SAPSII + 0.997 \times ln (SAPSII + 1)$$
(6)

PELOD The PELOD score for individual pediatric patients can become the probability of dying in ICU. This is performed by the following formula:

Predicted ICU mortality =
$$\frac{1}{1 + e^{7.64 - 0.30 \times PELOD}}$$
 (7)

PIM 2/PIM 3 The PIM score for individual pediatric patients can become the probability of dying in ICU. This is performed by the following formula:

Predicted ICU mortality =
$$\frac{e^{PIM}}{1 + e^{PIM}}$$
 (8)

Severity evolution (of infections) The severity of infection on admission is shown in the rows. Maximum severity reached during ICU stay is indicated in the columns. The table reports the absolute numbers and row percentages by which to assess the evolution of infection severity. For example, in the case below, the severity of the infection did not worsen during ICU stay in 15 out of the 17 patients admitted with SEPSIS (15/17=88.2%). Conversely, the condition of SEPSIS developed into SEPTIC SHOCK in 2 patients (2/17=11.8%).

Sever	rity evolution	During the stay					
	N (R %)	None	Infection without SEPSIS	SEPSIS	SEPTIC SHOCK	тот	
_	None	173 (93.0%)	9 (4.8%)	1 (0.5%)	3 (1.6%)	186	
ission	Infection without SEPSIS	-	19 (95.0%)	0 (0.0%)	1 (5.0%)	20	
dmis	SEPSIS	-	-	15 (88.2%)	2 (11.8%)	17	
Ad	SEPTIC SHOCK	-	-	-	36 (100.0%)	36	
	ТОТ	173	28	16	42	259	

VAP Forms of pneumonia associated with invasive ventilation are defined as VAP (pneumonia onsetting after the 2nd day of ventilation or developing within 2 days of the end of ventilation).

Incidence of VAP Two different incidence rates are presented:

Incidence of VAP =
$$\frac{\text{Number of patients with VAP during stay}}{\text{Mechanical ventilation days pre VAP}} \times 1000$$
 (9)

where the variable *mechanical ventilation days pre-VAP* corresponds to the total number of mechanical ventilation days pre-VAP of all patients admitted to the ICU. It is equal to the total duration of mechanical ventilation for patients who do not develop VAP and to the difference between the date of onset of VAP and the start date of mechanical ventilation for infected patients. The mechanical ventilation days in patients who were discharged or died within 2 days of the start of ventilation are excluded from the denominator.

Incidence of VAP =
$$\frac{\text{Number of patients with VAP during stay}}{(\text{Mechanical ventilation days pre VAP})/8} \times 100$$
 (10)

The second rate is only a reworking of the previous one, to simplify interpretation of the data. It answers the question: 'Out of 100 patients ventilated for 8 days in the ICU, how many develop VAP?'. The 8-day cut off has been set by convention. The rates are accompanied by 95% confidence intervals.

Incidence of CR-BSI Just like VAP, two incidence rates are presented for catheter-related blood stream infections:

Incidence of CRBSI =
$$\frac{\text{Number of patients with CRBSI during stay}}{\text{CVC days pre CRBSI}} \times 1000$$
 (11)

Incidence of CRBSI =
$$\frac{\text{Number of patients with CRBSI during stay}}{(\text{CVC days pre CRBSI})/12} \times 100$$
 (12)

The second one responds to the question 'Out of 100 theoretical patients catheterized for 12 days in the ICU, how many will develop catheter-related blood stream infections?'.

Invasive ventilation (approach) The reported items refer to the following scenarios:

- Due to pulmonary failure -> invasive ventilation in a patient with hypoxic and/or hypercapnic respiratory failure;
- For airway mainteinance -> invasive ventilation in a patient without respiratory failure, to support airways (e.g. coma patient);
- In weaning -> final part of invasive ventilation in a patient admitted for weaning from ventilation.

Non invasive ventilation (approach) The reported items refer to the following scenarios:

- Non invasive ventilation only -> non-invasive ventilation as the only ventilatory approach to the patient;
- Non invasive ventilation failed -> non-invasive ventilation immediately followed by patient intubation;
- For weaning -> non-invasive ventilation started within one day of the end of invasive ventilation.

Surgical interventions during stay (top 10) The surgical interventions performed from the second day of stay.

Reason of transfer to other ICU See the item 'Reason of transfer from other ICU'.

Hospital mortality Statistics on hospital outcome (indicated with an asterisk, where necessary) involve the subgroup of patients with valid data for this variable or patients admitted during the months when over a defined % of patients were in status 4, after excluding readmissions from another hospital ward.

Last hospital mortality For patients transferred to other ICU or to rehabilitation/high dependency care unit in other hospital, is the outcome at the last hospital discharge.

Readmissions Only readmissions from other hospital wards are considered.

ICU stay (days) Length of pre-ICU, post-ICU and hospital stay are simply calculated as the difference between dates. Calculation of ICU stay can be optimized by using time of patient admission and discharge. The difference between the discharge date and the admission date is calculated. 1 is added if the patient is admitted before 12:00 and discharged after this time. Conversely, 1 is subtracted if the patient is admitted after midday and discharged before midday. If the length of stay in the ICU is equal to 0, length of stay is entered as 1.

Analysis of mortality: This section presents indicators or graphs useful for a detailed analysis of mortality. The diagram lists the reference models used for the calculation of expected mortality according to the type of patients evaluated. All the predictive models involve the subgroup of patients admitted during the months when over a defined % of patients were in status 4. Analyses involving adult patients exclude cardiac surgery patients, patients admitted for diagnosis of death/organ donation and readmissions.

Patients	Model	Mortality
Adults non CS	GiViTI 2018	Last hospital mortality
	PIM 2	ICU mortality
Pediatric	PIM 3	ICU mortality
	PELOD	ICU mortality

Statistics

National report for general ICUs - Year 2018 Project participation*

	Total	2 ICUs 1115 patients	5 ICUs 1088 patients	1 ICUs 437 patients	3 ICUs 1760 patients	207 ICUs 80065 patients	8 ICUs 1261 patients	7 ICUs 2522 patients	233 ICUs 88248 patients
	Other				1 ICUs 449 patients	8 ICUs 3169 patients		2 ICUs 676 patients	11 ICUs 4294 patients
	HDC					4 ICUs 2358 patients			4 ICUs 2358 patients
	Pediatrics		1 ICUs 144 patients		1 ICUs 792 patients	3 ICUs 1076 patients	2 ICUs 386 patients		7 ICUs 2398 patients
TYPE	Neurosurgical			1 ICUs 437 patients		11 ICUs 4712 patients			12 ICUs 5149 patients
	Surgical					11 ICUs 6483 patients		4 ICUs 1523 patients	15 ICUs 8006 patients
	Cardiosurgical					19 ICUs 10771 patients			19 ICUs 10771 patients
	General	2 ICUs 1115 patients	4 ICUs 944 patients		1 ICUs 519 patients	151 ICUs 51496 patients	6 ICUs 875 patients	1 ICUs 323 patients	165 ICUs 55272 patients
	Nation	Cyprus	Greece	Hungary	lsrael	Italy	Poland	Slovenia	Total

*Are considered as adhering the ICUs with at least 4 months of valid compilation.

%

16.7 16.7 33.3 0.0 16.7 16.7

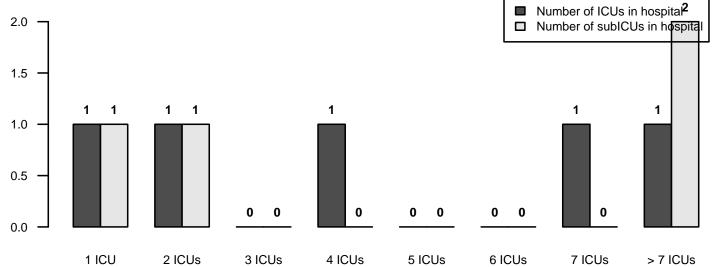
33.3 0.0 16.7 33.3 16.7 50.0

33.3 16.7 33.3 83.3 66.7 66.7 83.3 66.7 0.0

16.7 33.3 33.3 0.0 16.7 0.0 0.0 16.7 0.0

Description of hospitals (N=6) - Year 2018

Number of beds in hospital	N	%	Surgical specialties	Ν
< 300 beds	2	40.0	(independent ward)	
300 - 800 beds	3	60.0	Neurosurgery	1
> 800 beds	0	0.0	Cardiosurgery	1
Missing	1		Major vascular surgery	2
			Thoracic surgery	0
Type of ICUs present in hospital	N	%	Pediatric surgery	1
General	5	83.3	Transplantation activities	1
Medical	2	33.3	Surgical specialties	N
Surgical	2	33.3	(procedures only)	IN
Neurological/neurosurgical	2	33.3	Neurosurgery	2
Cardiosurgical	2	33.3		0
Burns	1	16.7	Cardiosurgery	1
	1	16.7	Major vascular surgery	
Post-transplantations	2	33.3	Thoracic surgery	2
Other	2	33.3	Pediatric surgery	1
			Transplantation activities	3
ype of subICUs present in hospital	N	%	Services/activities available in H	Ν
General	1	16.7	(h24)	
Surgical	2	33.3	Neuroradiology	2
Cardiological	4	66.7	Interventional neuroradiology	1
Respiratory	2	33.3	Interventional vascular radiology	2
Neurological (stroke unit)	3	50.0	CT scan	5
Other	2	33.3	MRI	4
			Interventional hemodynamic	4
lan auraical apocialtica	N	%	Endoscopy	5
Ion surgical specialties			Bronchoscopy	4
Cardiology	3	60.0	Hyperbaric chamber	0
Pulmonology	2	40.0		
Nephrology	1	20.0	Services/activities available in H	Ν
Infection disease	0	0.0	(rep.)	
Pediatric	3	60.0	Neuroradiology	1
Neonatology	4	80.0	Interventional neuroradiology	2
Neurology	2	40.0	Interventional vascular radiology	2
Haematology	0	0.0	CT scan	0
Emergency room	4	80.0	MRI	1
	3	60.0	Interventional hemodynamic	0
Traumatology	_		F	0
	3	60.0	Endoscopy	U
Traumatology	3	60.0	Endoscopy Bronchoscopy	1

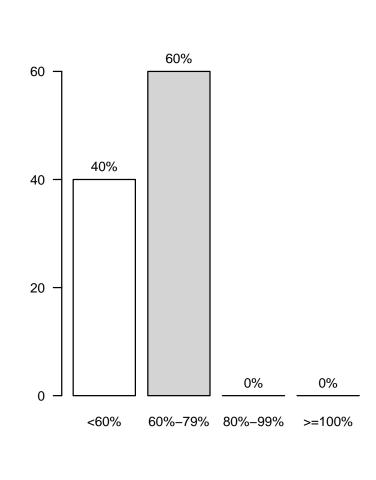


Description of ICUs (N=6) - Year 2018

Number of activable beds			Number of hours conceeded for		N	%
Mean (SD)		5 (2.8)	relatives' visits			
Median (Q1-Q3)	6 ((4-9)		1	1	20.0
Missing		1		2	0	0.0
				3-4	1	20.0
Number of beds declared to hospital				-12	2	40.0
Mean (SD)	52.6	5 (99.8)		-20	0	0.0
Median (Q1-Q3)	9 (9-10)		20	1	20.0
Missing		1	Miss	ing	1	
University officials	N		Maximum number of visitors per		N	%
University affiliation	2	40.0	patient			
Yes No			C)ne	2	40.0
	3	60.0	Т	wo	2	40.0
Missing	1		Three or mo	ore	1	20.0
			Miss	ing	1	
Square meter per bed		<u> </u>				
Mean (SD)		2 (7.0)	•	Median	Q1-Q3	<5
Median (Q1-Q3) Missing	18 (16–19) 1	declared bed			Years (mean %
Wilsonig		•)
Clinical psychologist	N	%	Total available monitors (excluding those dedicated to transport)	8.0	0.4-1.4	40.0
No	0	0.0	of which only for basic monitoring (without	0.8	0.4-1.0	28.8
For relatives	2	40.0	transducers detection of invasive pressure,			
For patients	5	100.0	pic, pvc,)			
For personnel	1	20.0	Invasive monitoring of cardiac output (Swan-Ganz)	0.0	0.0-0.3	0.0
ICU Structure	N	%	Invasive monitoring of cardiac output (PiCCO)	0.0	0.0-0.1	33.3
NON OPEN-SPACE	1	20.0	Invasive monitoring of cardiac output	0.0	0.0-0.0	50.0
OPEN-SPACE (or alike)	4	80.0	(Vigileo)	0.0	0.0 0.0	50.0
Missing	1		Non-invasive monitoring of cardiac output (impedentiometry)	0.1	0.1-0.1	25.0
Physicians	N	%	Defibrillators	0.2	0.2-0.5	44.4
Dedicated to ICU only	0	0.0	Both invasive and non invasive ventilators	1.1	1.0-1.7	50.3
Dedicated to ICU on a rotation basis	0	0.0	Non invasive ventilators	0.0	0.0-0.2	75.0
Dedicated to ICU only and on a	5	100.0	Syringe pumps	5.3	3.9-7.4	39.5
rotation basis	Ū	100.0	Peristaltic pumps	0.7	0.1-1.0	36.7
Missing	1		Biomedical equipment in ICU		N	%
			Transoesophageal e		1	20.0
Declared beds per physician (average	•		Basic ultrasou			100.0
Mean (SD)		(110.2)	Advanced ultrasou			40.0
Median (Q1-Q3)	4.1 (2	2.2–5.2)	Blood-gas analy			100.0
Missing		1	Haemodialysis - Haemofiltra			100.0
			Transport ventila			100.0
Nurses	N	%	Fiberso			100.0
Dedicated to ICU only	1	20.0	Extracorporeal circulation syst	•	1	20.0
Dedicated to ICU on a rotation basis	0	0.0	=/x: acc. pc. ca. c. ca.a.c. c. c.		•	_0.0
Dedicated to ICU only and on a	4	80.0	Routine microbiological		N	%
rotation basis			surveillance cultures			-
Missing	1			Yes	5	100.0
•				No	0	0.0
Declared beds per nurse (average)			Miss		1	
Mean (SD)	116.7	(230.2)		-		
Median (Q1-Q3)						
Missing	- (2				

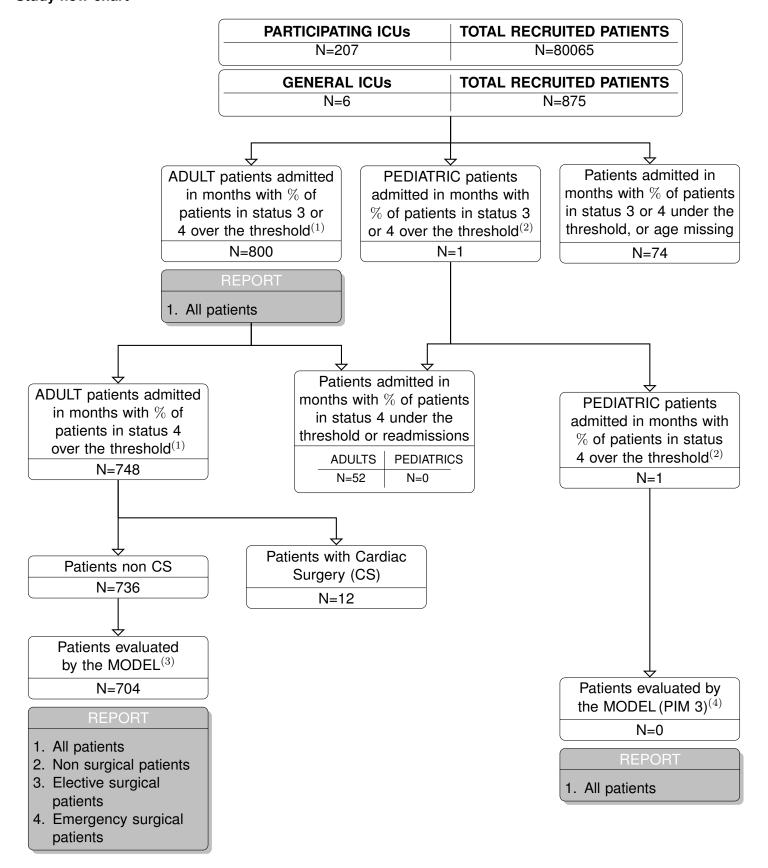
Description of ICUs (N=6) - Year 2018

Patients admitted		
Me	ean (SD)	207.0 (85.7)
	Median	210.1
	Q1-Q3	174.5-243.7
	Missing	1
Occupancy rate (%)		
Me	ean (SD)	68.4 (9.4)
	Median	70.6
	Q1-Q3	66.1 - 73
	Missing	2
Rotation index (patients/bed	l)	
Me	ean (SD)	24.1 (5.4)
	Median	22.6
	Q1-Q3	21.2 - 25.5
	Missing	2
Turnover (hours)		
Me	ean (SD)	122.2 (51.4)
	Median	123
	Q1-Q3	94.7-150.5
	Missing	2
Occupied beds per physicia	n (averag	je)
Me	ean (SD)	2.6 (1.3)
	Median	2.9
	Q1-Q3	1.7 - 3.6
	Missing	1
Occupied beds per nurse (a	• ,	
Me	ean (SD)	2.7 (3.1)
	Median	1.2
	Q1-Q3	1-2.9
	Missing	2



Occupancy rate (%)

National report for general ICUs (6 ICUs) - Year 2018 Study flow-chart



⁽¹⁾ Patients older than 17 years are considered ADULT patients.

⁽²⁾ Patients under 17 years of age are considered PEDIATRIC patients.

⁽³⁾ Patients evaluated by the GiViTI model of hospital mortality are those with all the variables of the model completed, including the hospital outcome. Patients admitted for diagnosis of death/organ donation and readmissions are excluded.

⁽⁴⁾ Patients transferred to other ICU are excluded.

Patients (N): 800

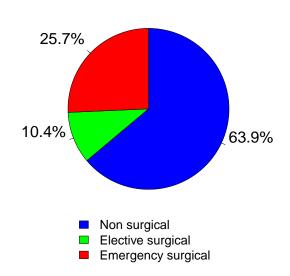
Sex	N	%
Male		61.3
Female		38.7
Missing	, 2	
Age (years)	N	%
17-45	157	19.6
46-65	266	33.2
66-75	190	23.8
>75	187	23.4
Missing	j 0	
Mear	1 (61.8
SD)	17.2
Mediar	1	65
Q1-Q3	5	1-75
Min-Max	(1	7–99
Body mass Index (BMI)	N	%
Underweight		4.9
Norma		36.1
Overweight		33.9
Obese		25.2
Missing		
Pregnancy status		
Females (N=309)	N	%
Not fertile	115	37.7
Not pregnant/Unknowr	180	59.0
Currently pregnant	t 3	1.0
Post partum	ı 7	2.3
Missing	j 4	
Comorbidities	N	%
No		13.3
Yes	677	86.7
Missing	j 19	
Comorbidities (top 10)	N	%
Hypertension		51.0
NYHA class II-II		27.0
Arrhythmia		22.9
Myocardial infarction		15.2
Diabetes Type II with insulin treatmen		14.0
Peripheral vascular disease		13.4
Moderate or severe renal disease		13.1
Alcohol addiction		12.9
Cerebrovascular disease	73	9.3
Diabetes Type II without insulin tr		8.7
Missing		

Stay before ICU (days)				
Mean		.5		
SD	8.6 1			
Median		-		
Q1-Q3	0-	-5		
Missing	2	21		
Source of admission	N	%		
Same hospital	621	79.5		
Other hospital	159	20.4		
Long-term chronic care hospital	1	0.1		
Directly from the community	0	0.0		
Missing	19			
Ward of admission				
Hospital (N=780)	Ν	%		
Medical ward	217	27.8		
Surgical ward	310	39.7		
Emergency room	216	27.7		
Other ICU	34	4.4		
High dependency care unit	3	0.4		
Missing	0			
Reason for transfer from				
Other ICU (N=34)	Ν	%		
Specialist expertise	4	11.8		
Step-up care	3	8.8		
Logistical/organizational reasons	26	76.5		
Step-down care	1	2.9		
Missing	0			
Ward of admission				
Same hospital (N=621)	Ν	%		
Medical ward	157	25.3		
Surgical ward	280	45.1		
Emergency room	168	27.1		
Other ICU	15	2.4		
High dependency care unit	1	0.2		
Missing	0			
Ward of admission				
Other hospital (N=159)	Ν	%		
Medical ward	60	37.7		
Surgical ward	30	18.9		
Emergency room	48	30.2		
Other ICU	19	11.9		
High dependency care unit	2	1.3		
Missing	0			
Scheduled admission	N	%		
No No	732	93.7		
Yes	49	6.3		
Missing	19	0.0		
MISSING	19			

National report for general ICUs - Year 2018 Characteristics on admission - Adult patients

Trauma		Ν	%
	No	692	88.6
	Yes	89	11.4
	Multiple trauma	18	2.3
	Missing	19	
Surgical status		N	%
	Non surgical	499	63.9
	Elective surgical	81	10.4
En	nergency surgical	201	25.7
	Missing	19	

Surgical status



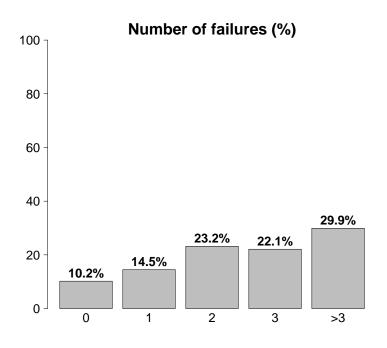
Source of admission		
Surgical pt. (N=282)	Ν	%
Operating theatre of surgical ward	196	69.5
Operating theatre of emergency room	4	1.4
Surgical ward	49	17.4
Other	33	11.7
Missing	0	

Surgical interventions (top 10)		
Elective surgical (N=81)	Ν	%
Gastrointestinal surgery	21	25.9
Neurosurgery	17	21.0
Pancreatic surgery	9	11.1
Gynaecological surgery	9	11.1
Biliary tract surgery	6	7.4
Acquired valv. heart dis. surgery	4	4.9
Orthopaedic surgery	4	4.9
Esophageal surgery	4	4.9
Nephro/Urological surgery	3	3.7
Other surgery	3	3.7
Missing	1	

Timing		
Elective surgical (N=81)	N	%
From -7 to -3 days	8	9.9
From -2 to -1 days	10	12.3
On ICU admission day	68	84.0
The day after ICU admission Missing	3 0	3.7
Missing	U	
Surgical interventions (top 10)		
Emergency surgical (N=201)	Ν	%
Gastrointestinal surgery	70	34.8
Neurosurgery	51	25.4
Orthopaedic surgery	16	8.0
Peripheral vascular surgery	13	6.5
Other surgery	13	6.5
Biliary tract surgery	10	5.0
Obstetric surgery	7	3.5
Abdominal vascular surgery	7	3.5
Gynaecological surgery	6	3.0
Splenectomy	4	2.0
Missing	4	
Timing		
Emergency surgical (N=201)	Ν	%
From -7 to -3 days	29	14.4
From -2 to -1 days	28	13.9
On ICU admission day	148	73.6
The day after ICU admission	12	6.0
Missing	0	
Non surgical interventions	N	%
None	715	91.5
Elective	8	1.0
Emergency	58	7.4
Missing	19	,
Non surgical interventions Elective (N=8)	N	%
Interventional neuroradiology	5	62.5
Interventional endoscopy	2	25.0
Interventional radiology	0	0.0
Interventional cardiology	0	0.0
Missing	1	0.0
Non surgical interventions Emergency (N=58)	N	%
	22	37.9
Interventional endoscopy	22 18	37.9 31.0
Interventional cardiology Interventional neuroradiology	11	19.0
Interventional neuroradiology Interventional radiology	4	6.9
Missing	3	0.9
iviissing	J	

National report for general ICUs - Year 2018 Characteristics on admission - Adult patients

Reason for admission	N	%
Monitoring/Weaning	80	10.2
Post surgical weaning	25	3.2
Surgical monitoring	8	1.0
Post interventional weaning	4	0.5
Interventional monitoring	6	0.8
Non surgical monitoring	36	4.6
Missing	1	
Admission for procedures/treatments	0	0.0
Intensive Treatment	698	89.4
Only ventilatory support	192	24.6
Only cardiovascular support	35	4.5
Ventilatory and cardiovascular support	471	60.3
Missing	0	
Palliative Sedation	2	0.3
Diagnosis of death/Organ donation	1	0.1
Missing	19	



Failures on admission	N	%
No	82	10.2
Yes	718	89.8
A: Respiratory failure	662	82.8
B: Cardiovascular failure	506	63.2
C: Neurological failure	185	23.1
D: Hepatic failure	26	3.2
E: Renal failure	323	40.4
F: Acute skin failure	3	0.4
G: Metabolic failure	337	42.1
H: Coagulation failure	22	2.8
Missing	0	

$\begin{array}{cccccccccccccccccccccccccccccccccccc$			
AB			
A 87 10.9 ABCEG 54 6.8 ABE 46 5.8 ABC 45 5.6 ABC 45 5.6 ABC 43 5.4 AC 26 3.2 ABCG 24 3.0 AG 23 2.9 Missing 0 Missing 0 Meurologic failure			
ABCEG 54 6.8 ABE 46 5.8 ABC 45 5.6 ABG 43 5.4 AC 26 3.2 ABCG 24 3.0 AG 23 2.9 Missing 0 Respiratory failure			
ABE 46 5.8 ABC 45 5.6 ABG 43 5.4 AC 26 3.2 ABCG 24 3.0 AG 23 2.9 Missing 0 Respiratory failure None 137 17.1 Only hypercapnic failure 408 51.1 Only hypercapnic failure 129 16.1 Intubation for airway maint. 91 11.4 Missing 1 Cardiovascular failure N % None 294 36.8 Without shock 241 30.1 Cardiogenic shock 68 8.5 Septic shock 106 13.2 Haemorrhagic/hypovolemic shock 14 1.8 Anaphylactic shock 1 0.1 Neurogenic shock 8 1.0 Other shock 22 2.8 Mixed shock 10 1.2 Missing 0 Neurologic failure N % None 285 60.6 Cerebral coma 70 14.9 Metabolic coma 25 5.3 Postanoxic coma 80 17.0 Toxic coma 10 2.1 Missing or not evaluable 330 Renal failure (AKIN) N % None 457 58.6 Mild 99 12.7 Moderate 93 11.9 Severe 131 16.8 Missing 20 Metabolic failure N % None 443 56.8 PNone 443 56.8 Missing 20			
ABC 45 5.6 ABG 43 5.4 AC 26 3.2 ABCG 24 3.0 AG 23 2.9 Missing 0			
ABG 43 5.4 AC 26 3.2 ABCG 24 3.0 AG 23 2.9 Missing 0 Respiratory failure			
AC 26 3.2 ABCG 24 3.0 AG 23 2.9 Missing 0 Respiratory failure			
ABCG			
AG			
Missing 0			
None			2.5
None 137 17.1			
Only hypoxic failure 408 51.1 Only hypercapnic failure 34 4.3 Hypoxic-hypercapnic failure 129 16.1 Intubation for airway maint. 91 11.4 Missing 1 Cardiovascular failure None 294 36.8 Without shock 241 30.1 Cardiogenic shock 68 8.5 Septic shock 106 13.2 Haemorrhagic/hypovolemic shock 14 1.8 Anaphylactic shock 1 0.1 Neurogenic shock 8 1.0 Other shock 22 2.8 Mixed shock 10 1.2 Missing 0 Neurologic failure N % Remal failure (AKIN) N % Renal failure (AKIN) N % None 457 58.6 Mild 99 12.7 Moderate 93 11.9 Severe 131 16.8 Missing 20 Metabolic failure N % None 443 56.8 pH <= 7.3, PaCO2 < 45 mmHg 73 9.4			
Only hypercapnic failure 34 4.3 Hypoxic-hypercapnic failure 129 16.1 Intubation for airway maint. 91 11.4 Missing 1 Cardiovascular failure None 294 36.8 Without shock 241 30.1 Cardiogenic shock 68 8.5 Septic shock 106 13.2 Haemorrhagic/hypovolemic shock 14 1.8 Anaphylactic shock 1 0.1 Neurogenic shock 8 1.0 Other shock 22 2.8 Mixed shock 10 1.2 Missing 0 Neurologic failure N % None 285 60.6 Cerebral coma 70 14.9 Metabolic coma 25 5.3 Postanoxic coma 80 17.0 Toxic coma 10 2.1 Missing or not evaluable 330 Renal failure (AKIN) N % None 457 58.6 Mild 99 12.7 Moderate 93 11.9 Severe 131 16.8 Missing 20 Metabolic failure N % None 443 56.8 pH <= 7.3, PaCO2 < 45 mmHg 73 9.4			
Hypoxic-hypercapnic failure 129 16.1 Intubation for airway maint. 91 11.4 Missing 1 11.4 Missing 2 294 36.8 Without shock 241 30.1 Cardiogenic shock 68 8.5 Septic shock 106 13.2 Haemorrhagic/hypovolemic shock 36 4.5 Hypovolemic shock 14 1.8 Anaphylactic shock 1 0.1 Neurogenic shock 8 1.0 Other shock 22 2.8 Mixed shock 10 1.2 Missing 0 Neurologic failure N % None 285 60.6 Cerebral coma 70 14.9 Metabolic coma 25 5.3 Postanoxic coma 80 17.0 Toxic coma 10 2.1 Missing or not evaluable 330 Renal failure (AKIN) N % None 457 58.6 Mild 99 12.7 Moderate 93 11.9 Severe 131 16.8 Missing 20 Metabolic failure N % None 443 56.8 None 443 56.8 PH <= 7.3, PaCO2 < 45 mmHg 73 9.4	• • • • • • • • • • • • • • • • • • • •		
Intubation for airway maint. Missing 1			
None 294 36.8			
None 294 36.8	•		11.4
None 294 36.8	Missing	1	
Without shock 241 30.1 Cardiogenic shock 68 8.5 Septic shock 106 13.2 Haemorrhagic/hypovolemic shock 36 4.5 Hypovolemic shock 14 1.8 Anaphylactic shock 1 0.1 Neurogenic shock 8 1.0 Other shock 22 2.8 Mixed shock 10 1.2 Missing 0 Neurologic failure N % None 285 60.6 Cerebral coma 70 14.9 Metabolic coma 25 5.3 Postanoxic coma 80 17.0 Toxic coma 10 2.1 Missing or not evaluable 330 Renal failure (AKIN) N % None 457 58.6 Mild 99 12.7 Moderate 93 11.9 Severe 131 16.8 Missing 20 Metabolic failure N % None 443 56.8 PH <= 7.3, PaCO2 < 45 mmHg 73 9.4			
Cardiogenic shock 58 58 58 58 58 58 58 5			
Septic shock 106 13.2 Haemorrhagic/hypovolemic shock 36 4.5 Hypovolemic shock 14 1.8 Anaphylactic shock 1 0.1 Neurogenic shock 8 1.0 Other shock 22 2.8 Mixed shock 10 1.2 Missing 0 Neurologic failure N % None 285 60.6 Cerebral coma 70 14.9 Metabolic coma 25 5.3 Postanoxic coma 80 17.0 Toxic coma 10 2.1 Missing or not evaluable 330 Renal failure (AKIN) N % None 457 58.6 Mild 99 12.7 Moderate 93 11.9 Severe 131 16.8 Missing 20 Metabolic failure N % None 443 56.8 PH <= 7.3, PaCO2 < 45 mmHg 73 9.4			
Haemorrhagic/hypovolemic shock Hypovolemic			
Hypovolemic shock			
Anaphylactic shock 1 0.1 Neurogenic shock 8 1.0 Other shock 22 2.8 Mixed shock 10 1.2 Missing 0 Neurologic failure N % None 285 60.6 Cerebral coma 70 14.9 Metabolic coma 25 5.3 Postanoxic coma 80 17.0 Toxic coma 10 2.1 Missing or not evaluable 330 Renal failure (AKIN) N % None 457 58.6 Mild 99 12.7 Moderate 93 11.9 Severe 131 16.8 Missing 20 Metabolic failure N % None 443 56.8 pH <= 7.3, PaCO2 < 45 mmHg 73 9.4			
Neurogenic shock 8 1.0 Other shock 22 2.8 Mixed shock 10 1.2 Missing 0 Neurologic failure N % None 285 60.6 Cerebral coma 70 14.9 Metabolic coma 25 5.3 Postanoxic coma 80 17.0 Toxic coma 10 2.1 Missing or not evaluable 330 Renal failure (AKIN) N % None 457 58.6 Mild 99 12.7 Moderate 93 11.9 Severe 131 16.8 Missing 20 Metabolic failure N % None 443 56.8 pH <= 7.3, PaCO2 < 45 mmHg 73 9.4			
Other shock 22 2.8 Mixed shock 10 1.2 Missing 0 1.2 None 285 60.6 Cerebral coma 70 14.9 Metabolic coma 25 5.3 Postanoxic coma 80 17.0 Toxic coma 10 2.1 Missing or not evaluable 330 Renal failure (AKIN) N % None 457 58.6 Mild 99 12.7 Moderate 93 11.9 Severe 131 16.8 Missing 20 Metabolic failure N % None 443 56.8 pH <= 7.3, PaCO2 < 45 mmHg	' '		
Mixed shock 10 1.2 Missing 0	_		
Neurologic failure			
None 285 60.6 Cerebral coma 70 14.9 Metabolic coma 25 5.3 Postanoxic coma 80 17.0 Toxic coma 10 2.1 Missing or not evaluable 330 Renal failure (AKIN) N % None 457 58.6 Mild 99 12.7 Moderate 93 11.9 Severe 131 16.8 Missing 20 Metabolic failure N % None 443 56.8 pH <= 7.3, PaCO2 < 45 mmHg 73 9.4			1.2
None 285 60.6 Cerebral coma 70 14.9 Metabolic coma 25 5.3 Postanoxic coma 80 17.0 Toxic coma 10 2.1 Missing or not evaluable 330 Renal failure (AKIN) N % None 457 58.6 Mild 99 12.7 Moderate 93 11.9 Severe 131 16.8 Missing 20 Metabolic failure N % None 443 56.8 pH <= 7.3, PaCO2 < 45 mmHg 73 9.4	Missing	U	
Cerebral coma 70			
Metabolic coma 25 5.3 Postanoxic coma 80 17.0 Toxic coma 10 2.1 Missing or not evaluable 330			
Postanoxic coma 80 17.0 Toxic coma 10 2.1 Missing or not evaluable 330 Renal failure (AKIN) N % None 457 58.6 Mild 99 12.7 Moderate 93 11.9 Severe 131 16.8 Missing 20 Metabolic failure N % None 443 56.8 pH <= 7.3, PaCO2 < 45 mmHg 73 9.4			
Toxic coma 10 2.1 Missing or not evaluable 330 Renal failure (AKIN) N % None 457 58.6 Mild 99 12.7 Moderate 93 11.9 Severe 131 16.8 Missing 20 Metabolic failure N % None 443 56.8 pH <= 7.3, PaCO2 < 45 mmHg 73 9.4			
Missing or not evaluable 330 Renal failure (AKIN) N % None 457 58.6 Mild 99 12.7 Moderate 93 11.9 Severe 131 16.8 Missing 20 16.8 Metabolic failure N None 443 56.8 pH <= 7.3, PaCO2 < 45 mmHg			
None 457 58.6			2.1
None 457 58.6	Missing or not evaluable	330	
$\begin{tabular}{c ccccc} Mild & 99 & 12.7\\ Moderate & 93 & 11.9\\ Severe & 131 & 16.8\\ Missing & 20 \\ \hline \end{tabular}$ $\begin{tabular}{c cccc} Metabolic failure & N & \%\\ \hline None & 443 & 56.8\\ pH <= 7.3, PaCO2 < 45 mmHg & 73 & 9.4\\ \hline \end{tabular}$	Renal failure (AKIN)	N	%
	None	457	58.6
$\begin{tabular}{cccccccccccccccccccccccccccccccccccc$	Mild	99	12.7
$\begin{tabular}{c cccc} Missing & 20 \\ \hline \hline \textbf{Metabolic failure} & N & \% \\ \hline \hline None & 443 & 56.8 \\ pH <= 7.3, PaCO2 < 45 \ mmHg & 73 & 9.4 \\ \hline \end{tabular}$	Moderate	93	11.9
Metabolic failure N % None 443 56.8 pH <= 7.3, PaCO2 < 45 mmHg	Severe	131	16.8
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	Missing	20	
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	Metabolic failure	N	%
$pH <= 7.3, PaCO2 < 45 mmHg \qquad 73 \qquad \qquad 9.4$	None	443	
· · · · · · · · · · · · · · · · · · ·		73	
	Base deficit >= 5 mmol/L, lactate >1.5x	264	33.8

Missing

20

National report for general ICUs - Year 2018 Characteristics on admission - Adult patients

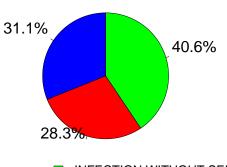
Clinical conditions on admission	N	%
Respiratory	174	22.3
Acute exacerbation of COPD	47	6.0
Mild ARDS	42	5.4
Aspiration pneumonia	34	4.4
Pleural effusion	25	3.2
Moderate ARDS	15	1.9
Cardiovascular	257	32.9
Cardiac arrest	100	12.8
Left heart failure without pulm. edema	80	10.2
Left heart failure with pulmonary edema	44	5.6
Acute myocardial infarction	25	3.2
Right heart failure	20	2.6
Neurological	179	22.9
Metabolic/postanoxic encephalopathy	38	4.9
Cerebral Aneurysm	28	3.6
Seizures	26	3.3
Intracranial hypertension	24	3.1
Spontaneous Subarachnoid haemorrhage	24	3.1
Gastrointestinal and hepatic	144	18.4
Acute pancreatitis	22	2.8
Gastrointestinal perforation	21	2.7
Gastrointestinal bleeding: upper tract	16 16	2.0
Acute on chronic liver disease	_	2.0
Intestinal occlusion	14	1.8 11.4
Trauma (anatomical districts)	89	7.2
Head	56 25	7.2 3.2
Chest	25 19	3.2 2.4
Pelvis/bone/joint & muscle	8	1.0
Spine Abdomen	5	0.6
Major vessels injury	2	0.3
Major vessels mjury	0	0.0
Other	156	20.0
Nephrourologic disease	42	5.4
Acute intoxication	34	4.4
Metabolic disorder	32	4.1
Coagulation disorder	22	2.8
Other disease	21	2.7
Post transplantation	0	0.0
-	0	0.0
-	0	0.0
Infections	362	46.4
Pneumonia	200	25.6
NON-surgical urinary tract infection	29	3.7
Post-surgical peritonitis	25	3.2
NON-surgical secondary peritonitis	23	2.9
Cholecystitis/cholangitis	17	2.2
L.R.T.I. other than pneumonia	17	2.2
NON-surgical skin/soft tissue infection	13	1.7
Primary peritonitis	10	1.3
Gastroenteritis	8	1.0
Primary bacteraemia of unknown origin	7	0.9
Missing	19	

Trauma (anatomical districts)	Ν	%
Head	56	7.2
Traumatic Subdural haematoma	23	2.9
Skull fracture	21	2.7
Traumatic subarachnoid haemorrhage	12	1.5
Extradural/epidural haematoma	11	1.4
Traumatic intraparenchymal bleeding	11	1.4
Spine	8	1.0
Cervical injury, incomplete deficit	3	0.4
Vertebral fracture, without deficit	2	0.3
Dorsal injury, incomplete deficit	2	0.3
Chest	25	3.2
Traum. haemothorax/pneumothorax	14	1.8
Other injuries of the chest	9	1.2
Flail chest	6	0.8
Abdomen	5	0.6
Bowel transection/perforation	3	0.4
Spleen: Massive rupture	2	0.3
Stomach: Rupture or perforation	1	0.1
Pelvis/bone/joint & muscle	19	2.4
Long bone fracture	17	2.2
Multiple fracture of the pelvis	4	0.5
Massive crush/amputation	1	0.1
Major vessels injury	2	0.3
Aorta: rupture/dissection	1	0.1
Proximal limbs vessels: transection	1	0.1
-	0	0.0
Miscellaneous	0	0.0
-	0	0.0
	0	0.0
Missing	19	
Infection severity on admission	N	%

ection severity on admission	Ν	%
None	419	53.8
INFECTION WITHOUT SEPSIS	146	18.7
SEPSIS	102	13.1
SEPTIC SHOCK	112	14.4
Missing	21	

Infection severity on admission

Patients infected (N=360)



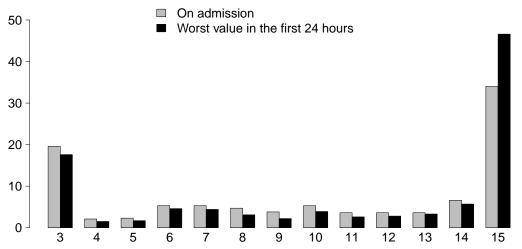
■ INFECTION WITHOUT SEPSIS

SEPSIS

■ SEPTIC SHOCK

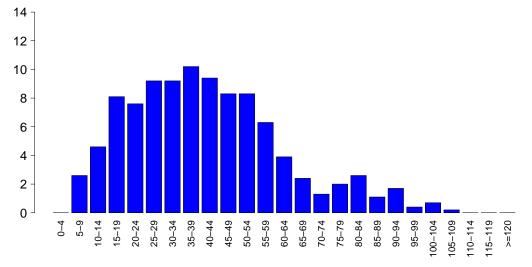
National report for general ICUs - Year 2018 Severity scores - Adult patients

Glasgow Coma Scale (%)

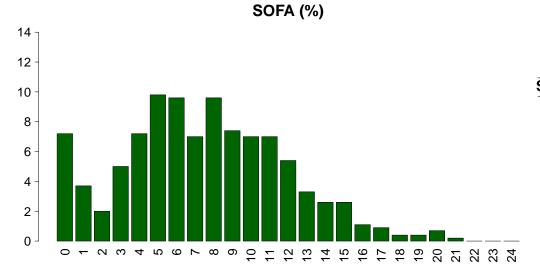


GCS (admission)	
Median	11
Q1-Q3	6 - 15
Not evaluable	310
Missing	20
GCS (first 24 hour	s)
GCS (first 24 hour Median	's)
Median	14

SAPS II (%)



SAPSII	
Mean	41.3
SD	20.7
Median	39
Q1-Q3	26.5-53
Not evaluable	321
Missing	20



SOFA		
	Mean	7.5
	SD	4.4
	Median	7
	Q1-Q3	4.5 - 10
Not e	valuable	321
	Missing	20

National report for general ICUs - Year 2018 Characteristics during the stay - Adult patients

Complications during the stay	N	%
No	368	47.2
Yes	412	52.8
Missing	20	02.0
Wildowing	20	
Failures during the stay	N	%
No	674	84.2
Yes	126	15.8
A: Respiratory failure	31	3.9
B: Cardiovascular failure	41	5.1
C: Neurological failure	4	0.5
D: Hepatic failure	5	0.6
E: Renal failure (AKIN)	66	8.2
F: Acute skin failure	2	0.2
G: Metabolic failure	20	2.5
H: Coagulation failure	0	0.0
Missing	0	
Failures during the stay (top 10)	N	%
E	38	4.8
В	23	2.9
G	14	1.8
A	13	1.6
AE	8	1.0
AB	6	0.8
BE	6	0.8
EG	5	0.6
D	3	0.4
ABCE	2	0.2
Missing	0	
Respiratory failure occured	N	%
None	749	96.0
Intubation for airway maint.	7	0.9
Hypoxic failure	24	3.1
Hypercapnic failure	8	1.0
Missing	20	
Cardiovascular failure occured	N	%
None	739	94.7
Cardiogenic shock	6	0.8
Hypovolemic shock	10	1.3
Haemorrhagic/hypovolemic shock	4	0.5
Septic shock	17	2.2
Anaphylactic shock	0	0.0
Neurogenic shock	2	0.3
Other shock	2	0.3
Missing	20	
Neurological failure occured	N	%
None	776	99.5
Cerebral coma	1	0.1
Metabolic coma	1	0.1
Postanoxic coma	2	0.3
	20	0.0
Missing		

Renal failure occured (AKIN)	N	
None	714	91.5
Mild	3	0.4
Moderate	15	1.9
Severe	48	6.2
Missing	20	0.2
Complications during the stay	N	%
Respiratory	53	6.8
Pleural effusion	22	2.8
Severe ARDS	6	8.0
Pneumothorax/Pneumomediastinum	6	8.0
Mild ARDS	5	0.6
Moderate ARDS	4	0.5
Cardiovascular	159	20.4
Cardiac arrest	60	7.7
Left heart failure w/o pulm. edema	40	5.1
Acute severe arrhythmia: tachycardias	25	3.2
Pulmonary edema	24	3.1
Right heart failure	11 123	1.4 15.8
Neurological	49	6.3
Brain edema	49 47	6.0
Intracranial hypertension Drowsiness/agitation/delirium	36	4.6
Seizures	22	2.8
New ischaemic stroke	15	1.9
Gastrointestinal and hepatic	49	6.3
Gastrointestinal bleeding: upper tract	15	1.9
Anastomotic dehiscence	8	1.0
Bowel ischaemia	7	0.9
Gastrointestinal bleeding: lower tract	6	8.0
Paralytic Ileus	6	8.0
Other	56	7.2
Nephrourologic disease	22	2.8
Metabolic disorder	20	2.6
Category/Stage III: Full Thickness Skin Loss	6	8.0
Other disease	5	0.6
Category/Stage II: Partial Thickness Skin Loss	4	0.5
Extremity compartment syndrome (severe)	2	0.3
Other skin and/or soft tissue pathology	2	0.3
Infections	134	17.2
Pneumonia	52	6.7
NON-surgical urinary tract infection	33	4.2
L.R.T.I. other than pneumonia	25 10	3.2 1.3
Primary bacteraemia of unknown origin Clinical sepsis	7	0.9
Post-surgical peritonitis	6	0.8
Gastroenteritis	5	0.6
Post-surgical skin/soft tissue infection	5	0.6
Post-surgical bone and joint infection	2	0.3
Catheter-related bacteremia (CR-BSI)	2	0.3
Missing	20	

National report for general ICUs - Year 2018 Characteristics during the stay - Adult patients

Infections	Ν	%	Maximum severity of infection	Ν	%
None	327	41.9	None	327	42.2
Only on admission	319	40.9	INFECTION WITHOUT SEPSIS	162	20.9
On admission and during ICU stay	42	5.4	SEPSIS	158	20.4
Only during ICU stay	92	11.8	SEPTIC SHOCK	128	16.5
Missing	20		Missing	25	

Seve	rity evolution		Du	ring the stay		
	N (R %)	None	INFECTION WITHOUT SEPSIS	SEPSIS	SEPTIC SHOCK	тот
	None	327 (78.6%)	40 (9.6%)	38 (9.1%)	11 (2.6%)	416
Admission	INFECTION WITHOUT SEPSIS	-	122 (83.6%)	21 (14.4%)	3 (2.1%)	146
Adn	SEPSIS	-	-	99 (97.1%)	3 (2.9%)	102
	SEPTIC SHOCK	-	-	-	111 (100.0%)	111
	TOT	327	162	158	128	775

Ventil. Associat. Pneumonia (VAP)	N	%	Catheter Bacteraemia (CR-BSI)	Ν	%
No	754	94.2	No	778	99.7
Yes	46	5.8	Yes	2	0.3
Missing	0		Missing	20	
Incidence of VAP			Incidence of CR-BSI		
(Pts. with VAP/1000 days of VM pre-VAP)			(Pts. with CR-BSI/1000 days of CVC pre-CR-BS	SI)	
Estimate	g).9	Estimate	C).3
CI (95%)	7.2-	-13.2	CI (95%)	0.0	-1.1
Incidence of VAP			Incidence of CR-BSI		
(Pts. with VAP/pts. ventilated for 8 days)			(Pts. with CR-BSI/pts. catheterized for 12 days)		
Estimate	7.	9%	Estimate	0.	3%
CI (95%)	5.8-	-10.6	CI (95%)	0.0	_1.3

National report for general ICUs - Year 2018 Process indicators - Adult patients

Process indicators - Adult patients		gal	On ada	On admission	On discharge	harde		andth (dave)		Dave	Dave from admission	uoioa
Procedures and/or treatments (Missing=19)	Z	%	2	%	5 Z	%	Median	Q1-Q3	Missing	Median	Q1-Q3	Missing
Procedures (antibiotics excluded)	276	99.4										
Invasive ventilation	089	87.1	202	64.7	160	20.5	က	1–9	0	0	0-0	0
Non invasive ventilation	20	6.4	12	1.5	12	1.5	7	1–6	0	0	0-4	0
Tracheostomy	123	15.7	13	1.7	77	9.1	41 0	6–24	0	ω	6-10	0
INO (inhaled nitric oxide)	- 6	0.1	- 8	0.1	0 8	0 0	N (2-2	o (ď	((
Central Venous Catheter	669	89.5	298	38.2	263	33.7	ဖ	2–12	0	0 (0-0	0
PICC	_	0.1	0	0	0	0	0	0-0	0	0	0-0	0
Arterial Catheter	730	93.5	198	25.4	241	30.9	2	2–11	0	0	0-0	0
Vasoactive drugs	299	7.97	370	47.4	165	21.1	က	1–8	0	0	0-0	0
Antiarrhythmics	165	21.1	21	6.5	29	9.7	က	1 -8	0	0	0-1	0
IABP	7	6.0	9	8.0	က	0.4	4	3–8	0	0	0-0	0
Invasive monitoring of C.O.	334	45.8	25	6.7	33	4.2	9	2-10	0	0	0-0	0
Continous monitoring of ScVO2	0	0.0										
Temporary pacing	2	9.0	4	0.5	-	0.1	-	0–3	0	ω	8-8	0
Ventricular assistance	0	0.0										
DC-shock	52	3.2								-	0-4	0
CPR	71	9.1								-	0-4	0
Massive blood transfusion	2	9.0								0	0-0	0
ICP monitoring without CSF drainage	က	0.4	0	0	0	0	4	3–4	0	0	0-0	0
ICP monitoring with CSF drainage	0	0.0										
External ventricular drainage without ICP	0	0.0										
Haemofiltration	62	7.9	2	9.0	7	0.3	4	3–8	0	0	0-2	0
Haemodialysis	95	11.8	59	3.7	39	2	လ	2–8	0	-		0
ECMO	က	0.4	က	0.4	-	0.1	9	4–6	0			
Hepatic clearance techniques	0	0.0										
Clearance techniques during sepsis	_	0.1	0	0	0	0	0	0-0	0	2	2-2	0
IAP (intra-abdominal pressure)	10	1.3										
Hypothermia	-	0.1	-	0.1	0	0	က	3–3	0			
Enteral nutrition	446	57.1	62	7.9	135	17.3	۷ -	3–13	0 (- (0-1	0 (
Parenteral nutrition	346	44.3	34	4.4	120	15.4	2	2-10	0	0	0-1	0
SUD (Topical, Topical and Systemic)	134	7.7										
Patient restraint		- ·	c	c	•	Ţ	c		c	-	7	c
rendural cameter	-!	- 0	>	0	-	-	٥	0-0	0	_		o (
Electrical cardioversion	1/	2.2								-	0-5	0
vacuum merapy	င	0.0										
Antibiotics	280	74.3										
Antibiotic prophylaxis	132	16.9	64	8.2	20	6.4	2	1-4	0	0	0-0	0
Empirical antibiotic therapy	309	39.6	84	10.8	20	တ	က	2–2	0	0	0-0	0
Empirical antibiotic therapy in unconfirmed diagnosis	9/	9.7	12	1.5	8	-	4	2–5	0	0	0-0	0
Targeted antibiotic therapy	231	29.6	35	4.5	78	10	7	4-12	0	က	2-6	0

National report for general ICUs - Year 2018 Process indicators - Adult patients

Process indicators - Adult patients				L	ength (days)			
Invasive ventilation (N=680)	N	%	Mean	SD	Median	Q1-0	Q 3	Missing
Due to pulmonary failure	552	81.2	8.3	13.0	4	1-1	10	0
For airway mainteinance	87	12.8	7.6	14.2	3	1-	7	0
In weaning	32	4.7	0.2	0.2 0.4 0 0-0			0	0
Not evaluable	9	1.3	3.0	3.8	1	0-	4	0
Reintubation within 48 hours	3	0.4	2.7	1.5	3	2–3	.5	0
Non invasive ventilation (N=50)	N	%	Number	of surgical	interventior		N	%
Non invasive ventilation only	29	58.0				0	742	95.1
Non invasive ventilation failed	4	8.0				1	29	3.7
For weaning	13	26.0				2	6	8.0
Other	4	8.0				3	3	0.4
Missing	0					>3	0	0.0
Tracheostomy not present on	N	%			Mis	ssing	20	
admission (N=110)			Surgical	interventio	ns			
Surgical	15	13.6	Days	from admis	sion			
Percutwist	0	0.0			N	/lean		9.0
Ciaglia	0	0.0				SD		8.5
Monodil. Ciaglia	1	0.9			Me	edian		6.5
Fantoni	0	0.0			Q1	-Q3	3-	-10.8
Griggs	62	56.4			Mis	ssing		0
Other Kind	4	3.6	Currical	interventie	no (ton 10)		N I	04
Unknown	28	25.5	Surgical	interventio			N	%
Missing	0			Ga	strointestinal su		20	2.6
Tracheostomy - Days after the begins	ning of	inv vent			Neurosi		10	1.3
	_	iiiv. veiit.			Other su		10	1.3
Not present on admission (N=110)		<u> </u>			Orthopaedic su		4	0.5
Mean		3.1			Organ do		2	0.3
SD Median		1.6			Thoracic su	• •	1	0.1
		8		Periph	eral vascular su	• •	1	0.1
Q1-Q3	0-	_10 			Biliary tract su	• .	1	0.1
Missing		0			Esophageal su	ırgery	1	0.1
Invasive monitoring of C.O. (N=334)	N	%			N.4	-	0 20	0.0
Swan Ganz	12	3.6				issing	20	
PICCO	44	13.2	Non surç	gical interve	entions		N	%
LIDCO	215	64.4				No	741	95.0
Vigileo-PRAM	16	4.8				Yes	39	5.0
Other	47	14.1			Mis	ssing	20	
Missing	0		Non sur	gical interve	ntione			
SDD (N=134)	N	%	-	from admis				
Topical	81	60.4				/lean		18.3
Topical and systemic	53	39.6			•	SD		18.0
Missing	0				Me	edian		14
Antibiotic therapy						_Q3	6-	-22.5
Pt. infected in ICU only (N=92)	N	%				ssing		0
Only empirical	20	22.7	Non our	wieel interv			N	07
Only targeted	25	28.4	ivon sur	gical interve		000:::		% 5.6
Targeted after empirical	34	38.6			rventional endo		44	5.6
Other	9	10.2			rventional card		2	0.3
Missing	4	. •			erventional rad		1	0.1
				interven	tional neurorad		0	0.0
Surgical interventions	N 740	<u>%</u>			M	issing	20	
No	742	95.1						
Yes	38	4.9						
Missing	20							

National report for general ICUs - Year 2018 Outcome indicators - Adult patients

Addit patients		
ICU outcome	N	%
Dead	314	40.7
Transferred to same hospital	305	39.6
Transferred to other hospital	116	15.0
Discharged home	36	4.7
Disch. terminally ill	0	0.0
Missing	29	
Transferred to (N=421)	N	%
Ward	397	94.3
Other ICU	21	5.0
High dependency care unit	3	0.7
Rehabilitation	0	0.0
Day hospital or Long-term care	0	0.0
Missing	0	
Reason of transfer to		
Other ICU (N=21)	N	%
Specialist expertise	4	19.0
Step-up care	10	47.6
Logistical/organizational reasons	7	33.3
		0.0
Step-down care	0	0.0
Missing	0	
Transferred to		
Same hospital (N=305)	Ν	%
Ward	303	99.3
Other ICU	0	0.0
High dependency care unit	2	0.7
Rehabilitation	0	0.0
Day hospital or Long-term care	0	0.0
Missing	0	
Transferred to Other hospital (N=116)	N	%
Ward	94	81.0
Other ICU	21	18.1
High dependency care unit	1	0.9
Rehabilitation	0	0.9
Day hospital or Long-term care Missing	0 0	0.0
Missing	U	
ICU mortality	N	%
Alive	457	59.3
Dead	314	40.7
Missing	29	
		~~
Timing of ICU mortality (N=314)	N	%
Daytime (08:00AM - 07:59PM)	164	52.2
Nighttime (08:00PM - 07:59AM)	150	47.8
Weekdays (Monday - Friday)	226	72.0
Weekend (Saturday - Sunday)	88	28.0
Missing	0	

Hospital mortality *	N	%
Alive	407	55.8
Dead	322	44.2
Missing	19	
Timing of hosp. mortality * (N=322)	N	%
In ICU	296	91.9
Within 24 hours after ICU	1	0.3
24-47 hours after ICU	4	1.2
48-71 hours after ICU	3	0.9
72-95 hours after ICU	0	0.0
After 95 hours after ICU	18	5.6
Missing	0	

Timing of hosp. mortality (days from ICU disch.) * Discharged alive from ICU (N=26)

Mean	12.5
SD	12.7
Median	9.5
Q1-Q3	2-17.5
Missing	0

^{*} Statistics computed on patients admitted in months with % of patients in status 4 over the threshold (readmissions excluded) (N=748).

9.4

Mean

National report for general ICUs - Year 2018 Outcome indicators - Adult patients

N

404

Alive

%

55.4

Last hospital mortality *

Alive	404	55.4		wean	9.4
Dead	325	44.6		SD	12.9
Missing	19			Median	5
S .				Q1-Q3	2-11
			-	Missing	20
Readmission from ward	N	%		Wilssing	20
No	793	99.2	ICU stay (days)		
Yes	6	8.0	Alive (N=457)		
Missing	1			Mean	8.9
Number of readmissions (N=6)	N	%		SD	11.1
1	6	100.0		Median	5
2	0	0.0		Q1-Q3	2–11
>2				Missing	0
>2 Missing	0 0	0.0			
iviissirig	U		ICU stay (days)		
Timing of readmission (N=6)	N	%	Dead (N=314)	Mana	0.1
Within 48 hours	2	33.3		Mean	9.1
48-71 hours	1	16.7		SD	13.2
72-95 hours	1	16.7		Median	5
After 95 hours	2	33.3		Q1-Q3	1-10
Missing	0	00.0		Missing	0
iviissii ig	U				
Timing readmission (days)			Stay after ICU (days) *		
N		6	Alive (N=425)		
Mean		3.1		Mean	8.3
SD		2.7		SD	12.0
Median		2.9		Median	5
Q1-Q3		 1_5.3		Q1-Q3	0-11
Q1 Q0	٠.	1 0.0		Missing	1
				_	
			Hospital stay (days) *		
				Mean	17.7
				SD	19.4
				Median	11
				Q1-Q3	5-24
				Missing	19
				•	
			Hospital stay (days) * Alive (N=407)		
				Mean	19.9
				SD	19.9
				Median	14
				Q1-Q3	7-28
				Missing	0
				5519	-

ICU stay (days)

Hospital stay (days) * Dead (N=322)

15.0

18.5

9

3-20

0

Mean

Median

Q1-Q3

Missing

SD

^{*} Statistics computed on patients admitted in months with % of patients in status 4 over the threshold (readmissions excluded) (N=748).

Patients (N): 704

Sex	N	%
Male	444	63.1
Female	260	36.9
Missing	0	
Age (years)	N	%
17-45	142	20.2
46-65	225	32.0
66-75	164	23.3
>75	173	24.6
Missing	0	
Mean	6	1.9
SD	17	7.7
Median	6	35
Q1-Q3	51	-75
Min-Max	17-	-99
Pody mass Indox (PMI)	N.I.	07
Body mass Index (BMI) Underweight	N 35	5.0
Normal	253	35.9
Overweight	239	33.9
Obese	177	25.1
Missing	0	20.1
Wildeling	O	
Pregnancy status		
Females (N=260)	N	%
Not fertile	103	39.6
Not pregnant/Unknown	147	56.5
Currently pregnant	3 7	1.2
Post partum	0	2.7
Missing	U	
Comorbidities	N	%
No	90	12.8
Yes	614	87.2
Missing	0	
Comorbidities (top 10)	N	%
Hypertension	350	49.7
NYHA class II-III	198	28.1
Arrhythmia	158	22.4
Myocardial infarction	104	14.8
Diabetes Type II with insulin treatment	97	13.8
Alcohol addiction	97	13.8
Peripheral vascular disease	91	12.9
Moderate or severe renal disease	88	12.5
Cerebrovascular disease	65	9.2
Diabetes Type II without insulin tr.	65	9.2
Missing	0	

Mean 4.4 SD 8.5 Median 1 Q1-Q3 0-4 Missing 0			
SD Median 1 Q1—Q3 O-4 Missing O			
Median			
N	_	٤	
Missing		0	•
Source of admission		_	
Same hospital Other hospital Other hospital I 144	Missing		U
Other hospital 144 20.5	Source of admission	N	%
Long-term chronic care hospital Directly from the community	Same hospital	559	79.4
Name	•	144	20.5
Missing 0 Ward of admission Hospital (N=703) N % Medical ward 206 29.3 Surgical ward 265 37.7 Emergency room 205 29.2 Other ICU 24 3.4 High dependency care unit 3 0.4 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 Missing 0 M	· · · · · · · · · · · · · · · · · · ·	=	_
Mard of admission			0.0
Medical ward 206 29.3 Surgical ward 265 37.7 Emergency room 205 29.2 Other ICU 24 3.4 High dependency care unit 3 0.4 Missing 0 0 Reason for transfer from Other ICU (N=24) N % Specialist expertise 4 16.7 Step-up care 1 4.2 Logistical/organizational reasons 19 79.2 Step-down care 0 0.0 Missing 0 0 Ward of admission Same hospital (N=559) N % Emergency room 161 28.8 Surgical ward 239 42.8 Emergency room 161 28.8 Other ICU 8 1.4 High dependency care unit 1 0.2 Missing 0 0 Ward of admission Other hospital (N=144) N % Medical ward 56 38.9 Surgical ward 26 18.1 Emergency room 44 30.6 Other ICU 16 11.1 High dependency care unit 2 1.4 Missing 0 Scheduled admission N % No 669 95.0	Missing	0	
Medical ward 206 29.3 Surgical ward 265 37.7 Emergency room 205 29.2 Other ICU 24 3.4 High dependency care unit 3 0.4 Missing 0	Ward of admission		
Medical ward 206 29.3 Surgical ward 265 37.7 Emergency room 205 29.2 Other ICU 24 3.4 High dependency care unit 3 0.4 Missing 0	Hospital (N=703)	Ν	%
Surgical ward 265 37.7		206	
Emergency room		265	
High dependency care unit Missing Missing	•	205	29.2
Missing 0	<u> </u>	24	3.4
N	High dependency care unit	3	0.4
Other ICU (N=24) N % Specialist expertise 4 16.7 Step-up care 1 4.2 Logistical/organizational reasons 19 79.2 Step-down care 0 0.0 Missing 0 0 Ward of admission N % Surgical ward 239 42.8 Emergency room 161 28.8 Other ICU 8 1.4 High dependency care unit 1 0.2 Missing 0 0 Ward of admission N % Surgical ward 56 38.9 Surgical ward 26 18.1 Emergency room 44 30.6 Other ICU 16 11.1 High dependency care unit 2 1.4 Missing 0 Scheduled admission N %	Missing	0	
Other ICU (N=24) N % Specialist expertise 4 16.7 Step-up care 1 4.2 Logistical/organizational reasons 19 79.2 Step-down care 0 0.0 Missing 0 0 Ward of admission N % Surgical ward 239 42.8 Emergency room 161 28.8 Other ICU 8 1.4 High dependency care unit 1 0.2 Missing 0 0 Ward of admission N % Surgical ward 56 38.9 Surgical ward 26 18.1 Emergency room 44 30.6 Other ICU 16 11.1 High dependency care unit 2 1.4 Missing 0 Scheduled admission N %	Pageon for transfer from		
Specialist expertise		N	0%
Step-up care			
Logistical/organizational reasons 19 79.2 Step-down care 0 0.0 Missing 0 Ward of admission Same hospital (N=559) N % Medical ward 150 26.8 Surgical ward 239 42.8 Emergency room 161 28.8 Other ICU 8 1.4 High dependency care unit 1 0.2 Missing 0 Ward of admission Other hospital (N=144) N % Medical ward 56 38.9 Surgical ward 26 18.1 Emergency room 44 30.6 Other ICU 16 11.1 High dependency care unit 2 1.4 Missing 0 Scheduled admission N % No 669 95.0	·	-	
Step-down care 0	·		
Ward of admission N % Same hospital (N=559) N % Medical ward surgical ward su			
Ward of admission Medical ward 150 26.8 Surgical ward 239 42.8 Emergency room 161 28.8 Other ICU 8 1.4 High dependency care unit 1 0.2 Missing 0 Ward of admission N % Other hospital (N=144) N % Surgical ward 26 38.9 Surgical ward 26 18.1 Emergency room 44 30.6 Other ICU 16 11.1 High dependency care unit 2 1.4 Missing 0 0 Scheduled admission N % No 669 95.0	•		
Same hospital (N=559) N % Medical ward Surgical ward 239 42.8 Emergency room 161 28.8 Other ICU 8 1.4 High dependency care unit 1 Missing 0 0.2 Ward of admission Other hospital (N=144) N % Medical ward 56 Surgical ward 26 I8.1 38.9 Surgical ward 26 I8.1 Emergency room 44 30.6 Other ICU 16 I1.1 High dependency care unit 2 I.4 1.4 Missing 0 N % Scheduled admission No 669 95.0 N %			
Medical ward 150 26.8 Surgical ward 239 42.8 Emergency room 161 28.8 Other ICU 8 1.4 High dependency care unit 1 0.2 Missing 0 Medical ward 56 38.9 Surgical ward 26 18.1 Emergency room 44 30.6 Other ICU 16 11.1 High dependency care unit 2 1.4 Missing 0 Scheduled admission N % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % %		NI	07
Surgical ward 239 42.8 Emergency room 161 28.8 Other ICU 8 1.4 High dependency care unit 1 0.2 Missing 0			
Emergency room 161 28.8 Other ICU 8 1.4 High dependency care unit 1 0.2 Missing 0 Other hospital (N=144) N % Medical ward 56 38.9 Surgical ward 26 18.1 Emergency room 44 30.6 Other ICU 16 11.1 High dependency care unit 2 1.4 Missing 0 Scheduled admission N % % No 669 95.0			
Other ICU 8 1.4 High dependency care unit 1 0.2 Missing 0 Ward of admission Other hospital (N=144) N % Medical ward 56 38.9 Surgical ward 26 18.1 Emergency room 44 30.6 Other ICU 16 11.1 High dependency care unit 2 1.4 Missing 0 Scheduled admission N % No 669 95.0	•		
High dependency care unit 1 0.2 Missing 0	0 ,		
Ward of admission N % Other hospital (N=144) N % Medical ward 56 Surgical ward 26 18.1 38.9 Surgical ward 26 18.1 14 Emergency room 44 30.6 30.6 Other ICU 16 11.1 11.1 High dependency care unit 2 Missing 0 1.4 Scheduled admission N % No 669 95.0 95.0			
Ward of admission Other hospital (N=144) N % Medical ward 56 38.9 Surgical ward 26 18.1 Emergency room 44 30.6 Other ICU 16 11.1 High dependency care unit 2 1.4 Missing 0 0 Scheduled admission N % No 669 95.0	. ,		0.2
Other hospital (N=144) N % Medical ward 56 38.9 Surgical ward 26 18.1 Emergency room 44 30.6 Other ICU 16 11.1 High dependency care unit 2 1.4 Missing 0 0 Scheduled admission N % No 669 95.0			
Medical ward 56 38.9 Surgical ward 26 18.1 Emergency room 44 30.6 Other ICU 16 11.1 High dependency care unit 2 1.4 Missing 0 Scheduled admission N % No 669 95.0			
Surgical ward 26 18.1 Emergency room 44 30.6 Other ICU 16 11.1 High dependency care unit 2 1.4 Missing 0 Scheduled admission N % No 669 95.0	<u> </u>		
Emergency room			
Other ICU 16 11.1 High dependency care unit 2 1.4 Missing 0 Scheduled admission N % No 669 95.0	<u> </u>		
$\begin{tabular}{lll} High dependency care unit & 2 & 1.4 \\ \hline Missing & 0 & \\ \hline Scheduled admission & N & \% \\ \hline \hline & No & 669 & 95.0 \\ \hline \end{tabular}$. .		
Missing 0 Scheduled admission N % No 669 95.0			
Scheduled admission N % No 669 95.0			1.4
No 669 95.0	Missing	U	
	Scheduled admission	N	%
	No	669	95.0
Yes 35 5.0	Yes	35	5.0
Missing 0	Missing	0	

Characteristics on admission - Adult patients evaluated in the GiViTI model

Trauma		N	%
	No	622	88.4
	Yes	82	11.6
	Multiple trauma	18	2.6
	Missing	0	
Surgical status		N	%
			, 0
	Non surgical	470	66.8
	Non surgical Elective surgical	470 59	

Surgical status

Missing

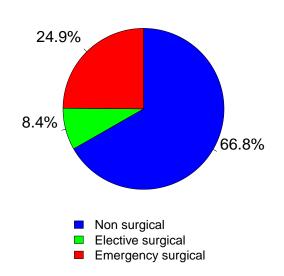
0

Ν

0

Missing

%



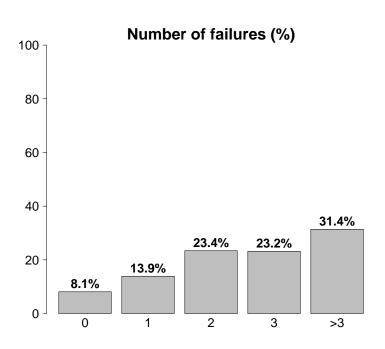
9 1 - (-)		, ,
Operating theatre of surgical ward	165	70.5
Operating theatre of emergency room	3	1.3
Surgical ward	41	17.5
Other	25	10.7
Missing	0	
Surgical interventions (top 10)		
Elective surgical (N=59)	N	%
Gastrointestinal surgery	15	25.4
Neurosurgery	14	23.7
Pancreatic surgery	9	15.3
Gynaecological surgery	5	8.5
Biliary tract surgery	5	8.5
Nephro/Urological surgery	3	5.1
Orthopaedic surgery	3	5.1
Other surgery	3	5.1
Abdominal vascular surgery	2	3.4
Esophageal surgery	2	3.4

Timing	۸.	0-4
Elective surgical (N=59)	N	%
From -7 to -3 days	4	6.8
From -2 to -1 days	7	11.9
On ICU admission day	51	86.4
The day after ICU admission	3	5.1
Missing	0	
Surgical interventions (top 10)		
Emergency surgical (N=175)	Ν	%
Gastrointestinal surgery	65	37.1
Neurosurgery	39	22.3
Orthopaedic surgery	16	9.1
Other surgery	13	7.4
Peripheral vascular surgery	12	6.9
Biliary tract surgery	8	4.6
Obstetric surgery	7	4.0
Abdominal vascular surgery	7	4.0
Gynaecological surgery	4	2.3
Splenectomy	4	2.3
Missing	0	۷.5
wissing	U	
Timing		0.4
Emergency surgical (N=175)	N	%
From -7 to -3 days	22	12.6
From -2 to -1 days	23	13.1
On ICU admission day	131	74.9
The day after ICU admission	11	6.3
Missing	0	
Non surgical interventions	N	%
None	643	91.3
Elective	8	1.1
Emergency	53	7.5
Missing	0	
Non surgical interventions		
Elective (N=8)	N	%
Interventional neuroradiology	5	62.5
Interventional endoscopy	2	25.0
Interventional radiology	0	0.0
Interventional cardiology	0	0.0
Missing	1	
Non surgical interventions		
Emergency (N=53)	Ν	%
Interventional endoscopy	19	35.8
Interventional cardiology	17	32.1
Interventional neuroradiology	10	18.9
Interventional radiology	4	7.5
Missing	3	, .0
iviissing	J	

Source of admission Surgical pt. (N=234)

Characteristics on admission - Adult patients evaluated in the GiViTI model

Ν	%
71	10.1
19	2.7
7	1.0
4	0.6
6	0.9
34	4.8
1	
0	0.0
633	89.9
179	25.4
31	4.4
423	60.1
0	
0	0.0
0	0.0
0	
	71 19 7 4 6 34 1 0 633 179 31 423 0



Failures on admission	N	%
No	57	8.1
Yes	647	91.9
A: Respiratory failure	602	85.5
B: Cardiovascular failure	454	64.5
C: Neurological failure	170	24.1
D: Hepatic failure	25	3.6
E: Renal failure	297	42.2
F: Acute skin failure	2	0.3
G: Metabolic failure	313	44.5
H: Coagulation failure	19	2.7
Missing	0	

Failures on admission (top 10)	N	%
ABEG	106	15.1
AB	87	12.4
A	77	10.9
ABCEG	49	7.0
ABE	43	6.1
ABC	41	5.8
ABG	40	5.7
AC	26	3.7
ARCC	23	3.3
ABCG	21 0	3.0
Missing	U	
Respiratory failure	N	%
None	102	14.5
Only hypoxic failure	371	52.7
Only hypercapnic failure	34	4.8
Hypoxic-hypercapnic failure	109	15.5
Intubation for airway maint.	88	12.5
Missing	0	
Cardiovascular failure	N	%
None	250	35.5
Without shock	206	29.3
Cardiogenic shock	64	9.1
Septic shock	99	14.1
Haemorrhagic/hypovolemic shock	35	5.0
Hypovolemic shock	12	1.7
Anaphylactic shock	1	0.1
Neurogenic shock	8	1.1
Other shock	20	2.8
Mixed shock	9	1.3
Missing	0	
Neurologic failure	N	%
None	255	60.0
Cerebral coma	65	15.3
Metabolic coma	22	5.2
Postanoxic coma	73	17.2
Toxic coma	10	2.4
Missing or not evaluable	279	
Renal failure (AKIN)	N	%
None	407	57.8
Mild	93	13.2
Moderate	88	12.5
Severe	116	16.5
Missing	0	
Metabolic failure	N	%
None	391	55.5
pH <= 7.3, PaCO2 < 45 mmHg	71	10.1
Base deficit >= 5 mmol/L, lactate >1.5x	242	34.4
Missing	0	
9		

Characteristics on admission - Adult patients evaluated in the GiViTI model

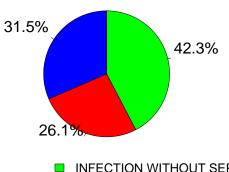
Characteristics on admission - Addit	•	
Clinical conditions on admission	N	%
Respiratory	159	22.6
Acute exacerbation of COPD	45	6.4
Mild ARDS	34	4.8
Aspiration pneumonia	33	4.7
Pleural effusion	19	2.7
Moderate ARDS	15	2.1
Cardiovascular	230	32.7
Cardiac arrest	89 73	12.6 10.4
Left heart failure without pulm. edema Left heart failure with pulmonary edema	73 41	5.8
Acute myocardial infarction	23	3.3
Right heart failure	18	2.6
Neurological	157	22.3
Metabolic/postanoxic encephalopathy	33	4.7
Seizures	25	3.6
Cerebral Aneurysm	24	3.4
Intracranial hypertension	22	3.1
Spontaneous Subarachnoid haemorrhage	20	2.8
Gastrointestinal and hepatic	126	17.9
Acute pancreatitis	21	3.0
Gastrointestinal perforation	19	2.7
Gastrointestinal bleeding: upper tract	16	2.3
Acute on chronic liver disease	15	2.1
Intestinal occlusion	12	1.7
Trauma (anatomical districts)	82	11.6
Head	51	7.2
Chest	24	3.4
Pelvis/bone/joint & muscle	18	2.6
Spine	8	1.1
Abdomen	5	0.7
Major vessels injury	2	0.3
-	0	0.0
Other	139	19.7
Nephrourologic disease	38	5.4
Acute intoxication	34	4.8
Metabolic disorder	31 19	4.4 2.7
Coagulation disorder Other disease	19	2.7
Post transplantation	0	0.0
1 Ost transplantation	0	0.0
	0	0.0
Infections	335	47.6
Pneumonia	193	27.4
NON-surgical urinary tract infection	24	3.4
Post-surgical peritonitis	22	3.1
NON-surgical secondary peritonitis	20	2.8
L.R.T.I. other than pneumonia	16	2.3
NON-surgical skin/soft tissue infection	13	1.8
Cholecystitis/cholangitis	11	1.6
Primary peritonitis	10	1.4
Gastroenteritis	8	1.1
Primary bacteraemia of unknown origin	6	0.9
Missing	0	

		~ .
Trauma (anatomical districts)	N	%
Head	51	7.2
Traumatic Subdural haematoma	20	2.8
Skull fracture	20	2.8
Traumatic intraparenchymal bleeding	11	1.6
Traumatic subarachnoid haemorrhage	11	1.6
Cerebral contusion/laceration	9	1.3
Spine	8	1.1
Cervical injury, incomplete deficit	3	0.4
Vertebral fracture, without deficit	2	0.3
Dorsal injury, incomplete deficit	2	0.3
Chest	24	3.4
Traum. haemothorax/pneumothorax	13	1.8
Other injuries of the chest	9	1.3
Severe lung contusion/laceration	6	0.9
Abdomen	5	0.7
Bowel transection/perforation	3	0.4
Spleen: Massive rupture	2	0.3
Stomach: Rupture or perforation	1	0.1
Pelvis/bone/joint & muscle	18	2.6
Long bone fracture	16	2.3
Multiple fracture of the pelvis	4	0.6
Massive crush/amputation	1	0.1
Major vessels injury	2	0.3
Aorta: rupture/dissection	1	0.1
Proximal limbs vessels: transection	1	0.1
-	0	0.0
Miscellaneous	0	0.0
-	0	0.0
-	0	0.0
Missing	0	
Infection severity on admission	N	%

ction severity on admission	Ν	%
None	369	52.6
INFECTION WITHOUT SEPSIS	141	20.1
SEPSIS	87	12.4
SEPTIC SHOCK	105	15.0
Missing	2	

Infection severity on admission

Patients infected (N=333)

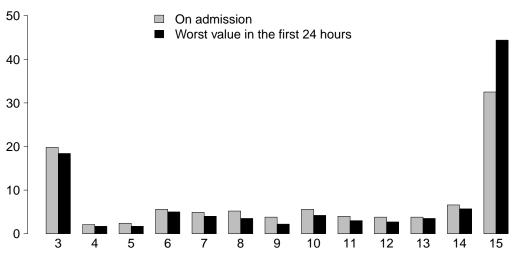


■ INFECTION WITHOUT SEPSIS

■ SEPSIS

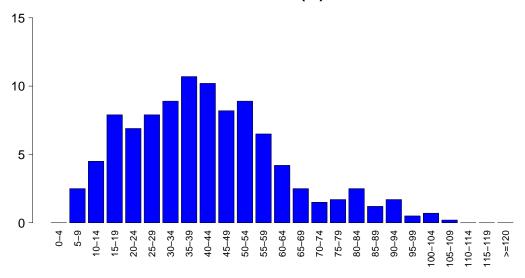
■ SEPTIC SHOCK

Glasgow Coma Scale (%)

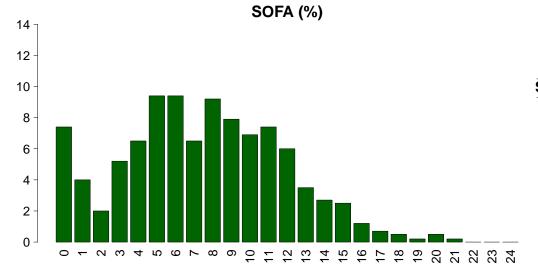


GCS (admission)	
Median	11
Q1-Q3	6 - 15
Not evaluable	279
Missing	0
GCS (first 24 hour	s)
GCS (first 24 hour Median	s)
Median	14

SAPS II (%)



SAPSII	
Mean	42.0
SD	20.7
Median	40
Q1-Q3	27 - 53
Not evaluable	301
Missing	0



SOFA		
Mea	ın 7.5	
SI	D 4.4	
Media	n 7	
Q1-Q	3 4.5-11	
Not evaluabl	le 301	
Missin	ng 0	

Characteristics during the stay - Adult patients evaluated in the GiViTI model

% 91.1 0.4 2.1 6.4

% 6.1 1.8 0.9 0.7 0.6 0.6 19.9 8.1 4.8 3.3 2.8 1.3 15.3 6.1 6.0 4.4 2.8 1.7 6.4 2.1 1.1 0.9 0.9 0.7 7.5 3.0 2.8 0.6 0.6 0.4 0.3 0.3 17.3 6.5 4.4 3.3 1.1 1.0 0.9 0.6 0.6 0.3 0.3

Complications during the stay	N	%	Renal failure occured (AKIN)	N
No	334	47.4	None	641
Yes	370	52.6	Mild	3
Missing	0		Moderate	15
			Severe	45
Failures during the stay	N	%	Missing	0
No	591	83.9		
Yes	113	16.1	Complications during the stay	N
A: Respiratory failure B: Cardiovascular failure	24 35	3.4 5.0	Respiratory	43
C: Neurological failure	3	0.4	Pleural effusion	13
D: Hepatic failure	5	0.4	Severe ARDS	6
E: Renal failure (AKIN)	63	8.9	Pneumothorax/Pneumomediastinum	5
F: Acute skin failure	2	0.3	Mild ARDS	4
G: Metabolic failure	20	2.8	Moderate ARDS	4
H: Coagulation failure	0	0.0	Cardiovascular	140
Missing	0		Cardiac arrest	57
	•		Left heart failure w/o pulm. edema	34
Failures during the stay (top 10)	N	%	Acute severe arrhythmia: tachycardias	23 20
E	37	5.3	Pulmonary edema Deep venous thrombosis	9
В	19	2.7	Neurological	108
G	14	2.0	Brain edema	43
Α	8	1.1	Intracranial hypertension	42
AE	7	1.0	Drowsiness/agitation/delirium	31
BE	6	0.9	Seizures	20
AB	5	0.7	New ischaemic stroke	12
EG	5	0.7	Gastrointestinal and hepatic	45
D	3	0.4	Gastrointestinal bleeding: upper tract	15
ABCE	2	0.3	Anastomotic dehiscence	8
Missing	U		Bowel ischaemia	6
Respiratory failure occured	N	%	Gastrointestinal bleeding: lower tract	6
None	680	96.6	Acute on chronic liver disease	5
Intubation for airway maint.	6	0.9	Other	53
Hypoxic failure	18	2.6	Nephrourologic disease	21
Hypercapnic failure	7	1.0	Metabolic disorder	20
Missing	0		Category/Stage III: Full Thickness Skin Loss	4
			Other disease	4
Cardiovascular failure occured	N	%	Category/Stage II: Partial Thickness Skin Loss	3
None	669	95.0	Extremity compartment syndrome (severe)	2
Cardiogenic shock	6	0.9	Other skin and/or soft tissue pathology	2
Hypovolemic shock	6	0.9	Infections	122
Haemorrhagic/hypovolemic shock	4	0.6	Pneumonia	46
Septic shock	15	2.1	NON-surgical urinary tract infection	31
Anaphylactic shock	0	0.0	L.R.T.I. other than pneumonia	23
Neurogenic shock	2	0.3	Primary bacteraemia of unknown origin	8 7
Other shock	2	0.3	Clinical sepsis	
Missing	0		Post-surgical peritonitis Gastroenteritis	6 4
Neurological failure occured	N	%	Post-surgical skin/soft tissue infection	4
None	701	99.6	Post-surgical skin/soft tissue injection	2
Cerebral coma	0	0.0	Catheter-related bacteremia (CR-BSI)	2
Metabolic coma	1	0.1	Missing	0
Postanoxic coma	2	0.3	wiissing	J
Missing	0			
•				

National report for general ICUs - Year 2018 Characteristics during the stay - Adult patients evaluated in the GiViTI model

Infections	N	%	Maximum severity of infection	N	%
None	285	40.5	None	285	40.8
Only on admission	297	42.2	INFECTION WITHOUT SEPSIS	156	22.3
On admission and during ICU stay	38	5.4	SEPSIS	138	19.8
Only during ICU stay	84	11.9	SEPTIC SHOCK	119	17.0
Missing	0		Missing	6	

Seve	rity evolution		Du	ring the stay		
	N (R %)	None	INFECTION WITHOUT SEPSIS	SEPSIS	SEPTIC SHOCK	тот
	None	285 (77.9%)	38 (10.4%)	34 (9.3%)	9 (2.5%)	366
Admission	INFECTION WITHOUT SEPSIS	-	118 (83.7%)	20 (14.2%)	3 (2.1%)	141
Adn	SEPSIS	-	-	84 (96.6%)	3 (3.4%)	87
	SEPTIC SHOCK	-	-	-	104 (100.0%)	104
	TOT	285	156	138	119	698

Ventil. Associat. Pneumonia (VAP)	N	%	Catheter Bacteraemia (CR-BSI)	N	%
No	662	94.0	No	702	99.7
Yes	42	6.0	Yes	2	0.3
Missing	0		Missing	0	
Incidence of VAP			Incidence of CR-BSI		
(Pts. with VAP/1000 days of VM pre-VAP)			(Pts. with CR-BSI/1000 days of CVC pre-CR-BS	SI)	
Estimate	9	0.6	Estimate	C).3
CI (95%)	6.9-	-13.0	CI (95%)	0.0	-1.1
Incidence of VAP			Incidence of CR-BSI		
(Pts. with VAP/pts. ventilated for 8 days)			(Pts. with CR-BSI/pts. catheterized for 12 days)		
Estimate	7.	7%	Estimate	0.	4%
CI (95%)	5.5-	-10.4	CI (95%)	0.0	-1.4

	١
	7
m	_
~	
\approx	•
. 4	
Year 2018	
a	
ď	
\sim	
S	
$\boldsymbol{\pi}$	•
O	Ī
_	
=	
ίΩ	2
r general ICUs	:
\simeq	-
<u></u>	
<u>•</u>	
ರಾ	
_	
ᅙ	
¥	
ن	٠
エ	
0	
ŏ	:
~	
Ψ.	
	•
$\overline{}$	
~	
=	
0	
≔	
ā	
National report for	
_	•

Process Indicators - Adult patients evaluated in the GIVIII model Use	n the GIV	IIVIII mode Use	On admission	nission	On discharge	charge		Length (davs)	(8)	Davs	Davs from admission	sion
Procedures and/or treatments (Missing=0)	z	%	z	%	z	%	Median	Q1-Q3	Missing	Median	Q1-Q3	Missing
Procedures (antibiotics excluded)	669	99.3										
Invasive ventilation	611	86.8	439	62.4	148	21	က	1–9	0	0	0-0	0
Non invasive ventilation	43	6.1	10	1.4	6	1.3	7	1–5	0	0	0-2	0
Tracheostomy	112	15.9	=	1.6	65	9.5	15	7–26	0	8	6-10	0
iNO (inhaled nitric oxide)	_	0.1	_	0.1	0	0	7	2–2	0			
Central Venous Catheter	628	89.2	253	35.9	240	34.1	9	2-12	0	0	0-0	0
PICC	_	0.1	0	0	0	0	0	0-0	0	0	0-0	0
Arterial Catheter	929	93.2	175	24.9	220	31.2	2	2–11	0	0	0-0	0
Vasoactive drugs	531	75.4	308	43.8	155	22	က	1–9	0	0	0-0	0
Antiarrhythmics	155	22.0	47	6.7	22	8.1	က	1–8	0	0	0-1	0
IABP	9	6.0	2	0.7	2	0.3	4	2–6	0	0	0-0	0
Invasive monitoring of C.O.	281	39.9	47	6.7	32	4.5	9	2-10	0	0	0-0	0
Continous monitoring of ScVO2	0	0.0										
Temporary pacing	4	9.0	က	0.4	_	0.1	2	9-0	0	∞	8-8	0
Ventricular assistance	0	0.0										
DC-shock	23	3.3								-	0-4	0
CPR	69	9.8								-	0-4	0
Massive blood transfusion	4	9.0								0	0-5	0
ICP monitoring without CSF drainage	က	0.4	0	0	0	0	4	3–4	0	0	0-0	0
ICP monitoring with CSF drainage	0	0.0										
External ventricular drainage without ICP	0	0.0										
Haemofiltration	24	7.7	4	9.0	7	0.3	4	2–8	0	0	0-5	0
Haemodialysis	98	12.2	27	3.8	36	5.1	က	2–8	0	_		0
ECMO	7	0.3	7	0.3	0	0	9	2-9	0			
Hepatic clearance techniques	0	0.0										
Clearance techniques during sepsis	-	0.1	0	0	0	0	0	0-0	0	2	2-2	0
IAP (intra-abdominal pressure)	7	1.0										
Hypothermia	-	0.1	_	0.1	0	0	က	3–3	0			
Enteral nutrition	410	58.2	51	7.2	124	17.6	7	3–13	0		0-1	0
Parenteral nutrition	308	43.8	31	4.4	116	16.5	2	2-10	0	0	0-1	0
SDD (Topical, Topical and systemic)	129	18.3										
Patient restraint	0	0.0					,					
Peridural catheter	-	0.1	0	0	-	0.1	9	9-9	0	Ψ	-	0
Electrical cardioversion	15	2.1								-	0-5	0
Vacuum therapy	2	0.7										
Antibiotics	522	74.1										
Antibiotic prophylaxis	116	16.5	22	7.8	48	8.9	2	1–5	0	0	0-0	0
Empirical antibiotic therapy	290	41.2	26	11.2	89	9.7	က	2–2	0	0	0-0	0
Empirical antibiotic therapy in unconfirmed	62	8.8	6	1.3	9	6.0	4	2–5	0	0	0-0	0
Targeted antibiotic therapy	204	29.0	28	4	20	6.6	7	4-13	0	က	2-6	0

Process indicators -	Adult n	atients	evaluated	in the	GiViTI	model
FIUCESS IIIUICALUIS -	Auuii D	alienis	evalualeu	111 1111	GIVIII	model

Invasive ventilation (N=611)	N	%	Mean	SD	ength (days Median	Q1-(Q 3	Missing
Due to pulmonary failure	495	81.0	8.6	13.3	4	1-1		0
For airway mainteinance	84	13.7	7.6	14.4	3	1-		0
In weaning	26	4.3	0.2	0.4	0	0-		0
Not evaluable	6	1.0	3.7	4.5	2	0.2-		0
Reintubation within 48 hours	3	0.5	2.7	1.5	3	2–3		0
Non invasive ventilation (N=43)	N	%	Number	of surgical	interventio	ns	N	%
Non invasive ventilation only	25	58.1				0	668	94.9
Non invasive ventilation failed	4	9.3				1	27	3.8
For weaning	11	25.6				2	6	0.9
Other	3	7.0				3	3	0.4
Missing	0					>3	0	0.0
Tracheostomy not present on	N	%			M	issing	0	
admission (N=101)			_	interventio				
Surgical	15	14.9	Days 1	from admis	sion			
Percutwist	0	0.0				Mean		9.1
Ciaglia	0	0.0			_	SD		8.6
Monodil. Ciaglia	1	1.0				ledian		6.5
Fantoni	0	0.0				1-Q3	3-	-10.5
Griggs	56	55.4			M	issing		0
Other Kind	3	3.0	Surgical	intervention	ons (top 10))	N	%
Unknown	26	25.7			astrointestinal :		20	2.8
Missing	0					surgery	10	1.4
Tracheostomy - Days after the beginn	ing of	inv. vent.				surgery	9	1.3
Not present on admission (N=101)					Orthopaedic :	surgery	4	0.6
Mean	8	3.0			Organ d	onation	2	0.3
SD	4	4.7		Periph	neral vascular :	surgery	1	0.1
Median		8			Biliary tract	surgery	1	0.1
Q1-Q3	6-	–10			Esophageal	surgery	1	0.1
Missing		0				-	0	0.0
Invasive monitoring of C.O. (N=281)	N	%				-	0	0.0
Swan Ganz	9	3.2			1	Missing	0	
PICCO	43	15.3	Non surc	gical interv	entions		N	%
LIDCO	166	59.1	11011 041 9	gioui iiitoi v	011110110	No	668	94.9
Vigileo-PRAM	16	5.7				Yes	36	5.1
Other	47	16.7			M	issing	0	0.1
Missing	0					9		
SDD (N=129)	N	%	-	gical interv				
Topical	80	62.0	Days	from admis				100
Topical and systemic	49	38.0				Mean		19.0
Missing	0	30.0				SD		18.4
						ledian		15.5
Antibiotic therapy						1-Q3	6-	-24.2
Pt. infected in ICU only (N=84)	N	%			IVI	issing		0
Only empirical	19	23.8	Non surg	gical interv	entions		N	%
Only targeted	22	27.5			rventional end	oscopy	43	6.1
Targeted after empirical	31	38.8			terventional ra		1	0.1
Other	8	10.0			erventional car		0	0.0
Missing	4				ntional neurora		0	0.0
iviissirig		~						
	Ν	%				Missing	0	
Surgical interventions No	N 668	94.9				Missing	U	
Surgical interventions						Missing	U	

Outcome indicators - Adult patients evaluated in the GiViTI model

ICU outcome	N	%
Dead	286	41.1
Transferred to same hospital	264	37.9
Transferred to other hospital	111	15.9
Discharged home	35	5.0
Disch. terminally ill	0	0.0
Missing	8	
Transferred to (N=375)	N	%
Ward	351	93.6
Other ICU	21	5.6
High dependency care unit	3	8.0
Rehabilitation	0	0.0
Day hospital or Long-term care	0	0.0
Missing	0	
Reason of transfer to	N 1	~
Other ICU (N=21)	N	<u>%</u>
Specialist expertise	4	19.0
Step-up care	10	47.6
Logistical/organizational reasons	7	33.3
Step-down care	0	0.0
Missing	0	
Transferred to		~
Same hospital (N=264)	N	<u>%</u>
Ward	262	99.2
Other ICU	0	0.0
High dependency care unit	2	0.8
Rehabilitation	0	0.0
Day hospital or Long-term care	0	0.0
Missing	0	
Transferred to	N.I.	04
Other hospital (N=111)	N	<u>%</u>
Ward	89	80.2
Other ICU	21	18.9
High dependency care unit	1	0.9
Rehabilitation	0	0.0
Day hospital or Long-term care	0	0.0
Missing	0	
CU mortality	N	%
Alive	410	58.9
Dead	286	41.1
Missing	8	
Timing of ICU mortality (N=286)	N	%
Daytime (08:00AM - 07:59PM)	150	52.4
Nighttime (08:00PM - 07:59AM)	136	47.6
Weekdays (Monday - Friday)	208	72.7
		~- ~
Weekend (Saturday - Sunday)	78	27.3

Hospital mortality	N	%
Alive	392	55.7
Dead	312	44.3
Missing	0	
Timing of hosp. mortality (N=312)	N	%
In ICU	286	91.7
Within 24 hours after ICU	1	0.3
24-47 hours after ICU	4	1.3
48-71 hours after ICU	3	1.0
72-95 hours after ICU	0	0.0
After 95 hours after ICU	18	5.8
Missing	0	

Timing of hosp. mortality (days from ICU disch.) Discharged alive from ICU (N=26) Mean 12.5 SD 12.7 Median 9.5 Q1-Q3 2 - 17.5Missing

0

National report for general ICUs - Year 2018 Outcome indicators - Adult patients evaluated in the GiViTI model

Last hospital mortality		N	%	ICU stay (days)		
· · · · · · · · · · · · · · · · · · ·	Alive	389	55.3		Mean	9.6
	Dead	315	44.7		SD	13.2
	Missing	0			Median	5
					Q1-Q3	2–11
					Missing	0
				ICU stay (days)		
				Alive (N=410)		
					Mean SD	9.1 11.5
					Median	5
					Q1-Q3	2–11
					Missing	0
				ICU stay (days) Dead (N=286)		
					Mean	9.3
					SD	13.6
					Median	5
					Q1-Q3	1–10
					Missing	0
				Stay after ICU (days) Alive (N=410)		
				71110 (11-110)	Mean	8.3
					SD	12.2
					Median	4
					Q1-Q3	0-11
					Missing	0
				Hospital stay (days)		
				inopital otaly (aayo)	Mean	17.7
					SD	19.5
					Median	11
					Q1-Q3	5-24
					Missing	0
				Hospital stay (days) Alive (N=392)		
				, (14–60 <i>L</i>)	Mean	19.7
					SD	20.0
					Median	13
					Q1-Q3	6-27.2
					Missing	0
				Hospital stay (days) Dead (N=312)		
					Mean	15.3
					SD	18.7
					Median	9
					Q1-Q3	3-20
					Miccina	Λ

0

Missing

National report for general ICUs - Year 2018 Characteristics on admission - Adult non surgical patients evaluated in the GiViTI model

Patients (N): 470

Sex	N	%
Male	313	66.6
Female	157	33.4
Missing	0	
Age (years)	N	%
17-45	93	19.8
46-65	154	32.8
66-75	114	24.3
>75	109	23.2
Missing	0	
Mean	6	1.5
SD	17	7.7
Median	6	35
Q1-Q3	51	–75
Min-Max	17-	-99
Body mass Index (BMI)	N	%
Underweight	23	4.9
Normal	178	37.9
Overweight	162	34.5
Obese	107	22.8
Missing	0	
Pregnancy status		
Females (N=157)	Ν	%
Not fertile	62	39.5
Not pregnant/Unknown	93	59.2
Currently pregnant	1	0.6
Post partum	1	0.6
Missing	0	
Comorbidities	N	%
No	55	11.7
Yes	415	88.3
Missing	0	
Comorbidities (top 10)	N	%
Hypertension	229	48.7
NYHA class II-III	134	28.5
Arrhythmia	109	23.2
Myocardial infarction	81	17.2
Alcohol addiction	75	16.0
Moderate or severe renal disease	67	14.3
Diabetes Type II with insulin treatment	62	13.2
Peripheral vascular disease	54	11.5
Cerebrovascular disease	51	10.9
Diabetes Type II without insulin tr.	50	10.6
Missing	0	

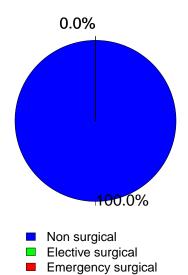
Charles and IOII (description)		
Stay before ICU (days) Mean	1	.1
SD		.0
Median		1
Q1-Q3	0-	-4
Missing	(0
Source of admission	N	%
Same hospital	353	75.1
Other hospital	116	24.7
Long-term chronic care hospital	1	0.2
Directly from the community	0	0.0
Missing	0	
Ward of admission		
Hospital (N=469)	N	%
Medical ward	192	40.9
Surgical ward	59	12.6
Emergency room	196	41.8
Other ICU	20	4.3
High dependency care unit	2	0.4
Missing	0	
Reason for transfer from Other ICU (N=20)	N	%
Specialist expertise	2	10.0
Step-up care	0	0.0
Logistical/organizational reasons	18	90.0
Step-down care	0	0.0
Missing	0	
Ward of admission		
Same hospital (N=353)	Ν	%
Medical ward	140	39.7
Surgical ward	50	14.2
Emergency room	155	43.9
Other ICU	8	2.3
High dependency care unit	0	0.0
Missing	0	
Ward of admission		
Other hospital (N=116)	N	%
Medical ward	52	44.8
Surgical ward	9	7.8
Emergency room	41	35.3
Other ICU	12	10.3
High dependency care unit	2	1.7
Missing	0	
Scheduled admission	N	%
No	467	99.4
Yes	3	0.6
Missing	0	

Characteristics on admission - Adult non surgical patients evaluated in the GiViTI model

Ν	%
431	91.7
39	8.3
6	1.3
0	

Surgical status		Ν	%
	Non surgical	470	100.0
	Elective surgical	0	0.0
	Emergency surgical	0	0.0
	Missing	0	

Surgical status



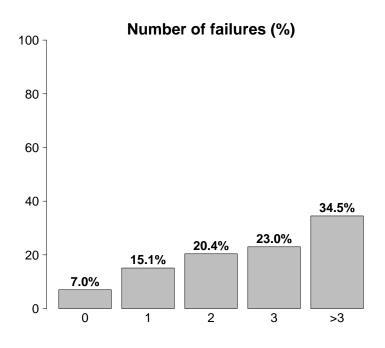
N	%
0	0.0
0	0.0
0	0.0
0	0.0
0	
	N 0 0 0

Surgica	al ward	0	0.0
	Other	0	0.0
N	/lissing	0	
Surgical interventions (top 10))		
Elective surgical (N=0)		N	%
	-	0	0.0
	_	0	0.0
	-	0	0.0
	-	0	0.0
	-	0	0.0
	_	0	0.0
	_	0	0.0
	_	0	0.0
	_	0	0.0
	_	0	0.0
	Missing	0	

Timing		
Elective surgical (N=0)	Ν	%
From -7 to -3 days	0	0.0
From -2 to -1 days	0	0.0
On ICU admission day	0	0.0
The day after ICU admission	0	0.0
Missing	0	
Surgical interventions (top 10)		
Emergency surgical (N=0)	Ν	%
Emorgonoy Sargroat (11–5)	0	0.0
	0	0.0
	0	0.0
	0	0.0
	0	0.0
	0	0.0
-	0	0.0
-	0	0.0
-	0	0.0
-	0	0.0
Missing	0	0.0
iviissing	U	
Timing		
Emergency surgical (N=0)	N	%
From -7 to -3 days	0	0.0
From -2 to -1 days	0	0.0
On ICU admission day	0	0.0
The day after ICU admission	0	0.0
Missing	0	
Non surgical interventions	N	%
None	427	90.9
None Elective	427 6	90.9 1.3
Elective	6	1.3
Elective Emergency Missing	6 37	1.3
Elective Emergency Missing	6 37	1.3
Elective Emergency Missing Non surgical interventions	6 37 0	1.3 7.9
Elective Emergency Missing Non surgical interventions Elective (N=6)	6 37 0	1.3 7.9
Elective Emergency Missing Non surgical interventions Elective (N=6) Interventional neuroradiology	6 37 0 N	1.3 7.9 % 66.7
Elective Emergency Missing Non surgical interventions Elective (N=6) Interventional neuroradiology Interventional endoscopy	6 37 0 N 4 2	1.3 7.9 % 66.7 33.3
Elective Emergency Missing Non surgical interventions Elective (N=6) Interventional neuroradiology Interventional endoscopy Interventional radiology	6 37 0 N 4 2 0	1.3 7.9 % 66.7 33.3 0.0
Elective Emergency Missing Non surgical interventions Elective (N=6) Interventional neuroradiology Interventional endoscopy Interventional radiology Interventional cardiology Missing	6 37 0 N 4 2 0 0	1.3 7.9 % 66.7 33.3 0.0
Elective Emergency Missing Non surgical interventions Elective (N=6) Interventional neuroradiology Interventional endoscopy Interventional radiology Interventional cardiology Missing	6 37 0 N 4 2 0 0	1.3 7.9 % 66.7 33.3 0.0
Elective Emergency Missing Non surgical interventions Elective (N=6) Interventional neuroradiology Interventional radiology Interventional cardiology Interventional cardiology Missing Non surgical interventions	6 37 0 N 4 2 0 0	1.3 7.9 % 66.7 33.3 0.0 0.0
Non surgical interventions Elective (N=6) Interventional neuroradiology Interventional radiology Interventional cardiology Interventional cardiology Missing Non surgical interventions Emergency (N=37)	6 37 0 N 4 2 0 0 0	1.3 7.9 % 66.7 33.3 0.0 0.0
Ron surgical interventions Elective (N=6) Interventional neuroradiology Interventional radiology Interventional cardiology Interventional cardiology Missing Non surgical interventions Emergency (N=37) Interventional endoscopy	6 37 0 N 4 2 0 0 0 0	1.3 7.9 % 66.7 33.3 0.0 0.0
Ron surgical interventions Elective (N=6) Interventional neuroradiology Interventional radiology Interventional cardiology Interventional cardiology Missing Non surgical interventions Emergency (N=37) Interventional endoscopy Interventional endoscopy Interventional cardiology	6 37 0 N 4 2 0 0 0 0 N 14 13	1.3 7.9 % 66.7 33.3 0.0 0.0 \$ 37.8 35.1

Characteristics on admission - Adult non surgical patients evaluated in the GiViTI model

Reason for admission	Ν	%
Monitoring/Weaning	45	9.6
Post surgical weaning	0	0.0
Surgical monitoring	0	0.0
Post interventional weaning	4	0.9
Interventional monitoring	6	1.3
Non surgical monitoring	34	7.2
Missing	1	
Admission for procedures/treatments	0	0.0
Intensive Treatment	425	90.4
Only ventilatory support	142	30.2
Only cardiovascular support	18	3.8
Ventilatory and cardiovascular support	265	56.4
Missing	0	
Palliative Sedation	0	0.0
Diagnosis of death/Organ donation	0	0.0
Missing	0	



Failures on admission	N	%
No	33	7.0
Yes	437	93.0
A: Respiratory failure	407	86.6
B: Cardiovascular failure	283	60.2
C: Neurological failure	142	30.2
D: Hepatic failure	21	4.5
E: Renal failure	208	44.3
F: Acute skin failure	1	0.2
G: Metabolic failure	230	48.9
H: Coagulation failure	13	2.8
Missing	0	

Failures on admission (top 10)	N	%
ABEG	66	14.0
A ABCEG	58 42	12.3 8.9
AB	42 34	6.9 7.2
ABC	26	5.5
ABE	26	5.5
ABG	24	5.1
AC	23	4.9
ABCG	20	4.3
AG	20	4.3
Missing	0	
Respiratory failure	N	%
None	63	13.4
Only hypoxic failure	245	52.1
Only hypercapnic failure	27	5.7
Hypoxic-hypercapnic failure	80	17.0
Intubation for airway maint.	55	11.7
Missing	0	
Cardiovascular failure	N	%
None	187	39.8
Without shock	131	27.9
Cardiogenic shock	56	11.9
Septic shock	63	13.4
Haemorrhagic/hypovolemic shock	7	1.5
Hypovolemic shock	3	0.6
Anaphylactic shock	1 6	0.2 1.3
Neurogenic shock Other shock	12	2.6
Mixed shock	4	0.9
Missing	0	0.9
Neurologic failure	N	%
None	184	56.4
Cerebral coma	45	13.8
Metabolic coma	19	5.8
Postanoxic coma	68	20.9
Toxic coma	10	3.1
Missing or not evaluable	144	
Renal failure (AKIN)	N	%
None	262	55.7
Mild	69	14.7
Moderate	56	11.9
Severe	83	17.7
Missing	0	
Metabolic failure	N	%
None	240	51.1
pH <= 7.3, PaCO2 < 45 mmHg	56	11.9
Base deficit >= 5 mmol/L, lactate >1.5x	174	37.0
Missing	0	

Characteristics on admission - Adult non surgical patients evaluated in the GiViTI model

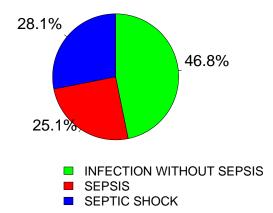
- Additional of the state of th		
Clinical conditions on admission	N	%
Respiratory	141	30.0
Acute exacerbation of COPD	42	8.9
Aspiration pneumonia	31	6.6
Mild ARDS	27	5.7
Pleural effusion	17	3.6
Moderate ARDS	14	3.0
Cardiovascular	186	39.6
Cardiac arrest	83	17.7
Left heart failure without pulm. edema	51	10.9
Left heart failure with pulmonary edema	36	7.7
Acute myocardial infarction	20	4.3
Right heart failure	14	3.0
Neurological	114	24.3
Metabolic/postanoxic encephalopathy	31	6.6
Seizures	23	4.9
Cerebral artery stroke	14	3.0
Intracranial hypertension	13	2.8
Cerebral Aneurysm	11	2.3
Gastrointestinal and hepatic	52	11.1
Acute pancreatitis	17	3.6
Acute on chronic liver disease	14	3.0
Liver Dysfunction Syndrome	9	1.9
Gastrointestinal bleeding: upper tract	7	1.5
Ascites	6	1.3
Trauma (anatomical districts)	39	8.3
Head	25	5.3
Chest	15	3.2
Spine	4	0.9
Pelvis/bone/joint & muscle	3	0.6
-	0	0.0
-	0	0.0
-	0	0.0
Other	103	21.9
Acute intoxication	34	7.2
Metabolic disorder	27	5.7
Nephrourologic disease	25	5.3
Other disease	17	3.6
Coagulation disorder	13	2.8
Post transplantation	0	0.0
-	0	0.0
-	0	0.0
Infections	237	50.4
Pneumonia	167	35.5
NON-surgical urinary tract infection	22	4.7
L.R.T.I. other than pneumonia	14	3.0
NON-surgical secondary peritonitis	8	1.7
Primary bacteraemia of unknown origin	5	1.1
Gastroenteritis	5	1.1
NON-surgical CNS infection	4	0.9
NON-surgical skin/soft tissue infection	4	0.9
NON-surgical bone and joint infection	2	0.4
Cholecystitis/cholangitis	2	0.4
Missing	0	

		04
Trauma (anatomical districts)	N	%
Head	25	5.3
Skull fracture	13	2.8
Traumatic intraparenchymal bleeding	10	2.1
Cerebral contusion/laceration	8	1.7
Traumatic subarachnoid haemorrhage	6	1.3
Traumatic diffuse injury with oedema	5	1.1
Spine	4	0.9
Vertebral fracture, without deficit	1	0.2
Cervical injury, incomplete deficit	1	0.2
Dorsal injury, incomplete deficit	1	0.2
Chest	15	3.2
Traum. haemothorax/pneumothorax	7	1.5
Other injuries of the chest	7	1.5
Flail chest	5	1.1
Abdomen	0	0.0
-	0	0.0
-	0	0.0
-	0	0.0
Pelvis/bone/joint & muscle	3	0.6
Long bone fracture	2	0.4
Multiple fracture of the pelvis	1	0.2
-	0	0.0
Major vessels injury	0	0.0
-	0	0.0
-	0	0.0
-	0	0.0
Miscellaneous	0	0.0
	0	0.0
_	0	0.0
Missing	0	
	N.I.	04

Infection severity on admission	Ν	%
None	233	49.8
INFECTION WITHOUT SEPSIS	110	23.5
SEPSIS	59	12.6
SEPTIC SHOCK	66	14.1
Missing	2	

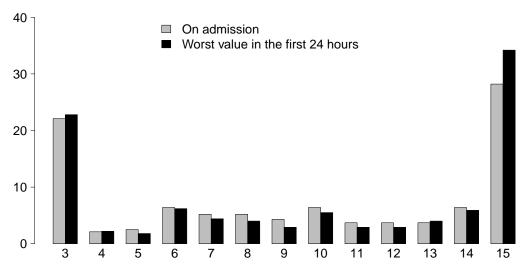
Infection severity on admission

Patients infected (N=235)



Severity scores - Adult non surgical patients evaluated in the GiViTI model

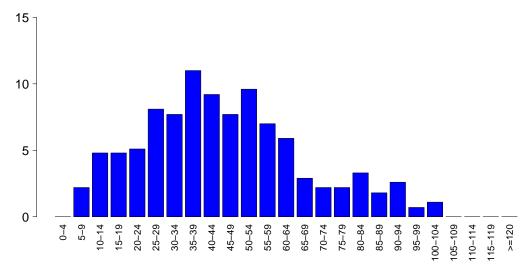
Glasgow Coma Scale (%)



GCS (admission)							
Median	10						
Q1-Q3	5-15						
Not evaluable	144						
Missing	0						
GCS (first 24 hours)							
Median	10.5						

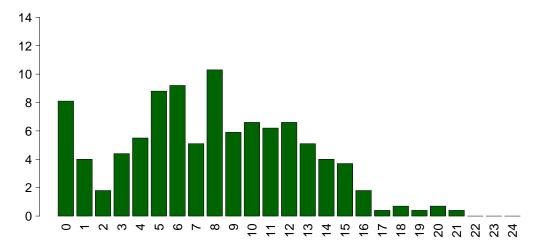
Median 10.5 Q1-Q3 4.8-15 Not evaluable 198 Missing 0

SAPS II (%)



SAPSII	
Mean	45.4
SD	21.7
Median	43
Q1-Q3	29.8 - 58
Not evaluable	198
Missing	0

SOFA (%)



SOFA	
Mean	7.8
SD	4.7
Median	8
Q1-Q3	5-11
Not evaluable	198
Missing	0

National report for general ICUs - Year 2018 Characteristics during the stay - Adult non surgical patients evaluated in the GiViTI model

Complications during the stay	Ν	%	Renal failure occured (AKIN)	Ν	%
No	218	46.4	None	425	90.4
Yes	252	53.6	Mild	2	0.4
Missing	0		Moderate	8	1.7
		0.4	Severe	35	7.4
Failures during the stay	N	%	Missing	0	
No	387	82.3			
Yes	83	17.7	Complications during the stay	N	%
A: Respiratory failure	13	2.8	Respiratory	31	6.6
B: Cardiovascular failure	28	6.0	Pleural effusion	8	1.7
C: Neurological failure	2	0.4	Severe ARDS	4	0.9
D: Hepatic failure	4	0.9	Aspiration pneumonia	4	0.9
E: Renal failure (AKIN)	45	9.6	Pneumothorax/Pneumomediastinum	4	0.9
F: Acute skin failure	0	0.0	Mild ARDS	3	0.6
G: Metabolic failure	16	3.4	Cardiovascular	100	21.3
H: Coagulation failure	0	0.0	Cardiac arrest	39	8.3
Missing	0		Left heart failure w/o pulm. edema	23	4.9
			Acute severe arrhythmia: tachycardias	18	3.8
Failures during the stay (top 10)	N	%	Pulmonary edema	15	3.2
E	27	5.7	Deep venous thrombosis	6	1.3
В	18	3.8	Neurological	64	13.6
G	11	2.3			
BE	5	1.1	Drowsiness/agitation/delirium	22	4.7
A	4	0.9	Brain edema	19	4.0
AE	4	0.9	Intracranial hypertension	17	3.6
EG	4	0.9	Seizures	14	3.0
AB	2	0.4	New ischaemic stroke	7	1.5
ABE	2	0.4	Gastrointestinal and hepatic	24	5.1
D	2	0.4	Gastrointestinal bleeding: upper tract	8	1.7
Missing	0		Acute on chronic liver disease	4	0.9
-			Bowel ischaemia	4	0.9
Respiratory failure occured	Ν	%	Gastrointestinal bleeding: lower tract	4	0.9
None	457	97.2	Paralytic Ileus	4	0.9
Intubation for airway maint.	4	0.9	Other	35	7.4
Hypoxic failure	9	1.9	Metabolic disorder	16	3.4
Hypercapnic failure	4	0.9	Nephrourologic disease	14	3.0
Missing	0		Category/Stage II: Partial Thickness Skin Loss	3	0.6
			Category/Stage III: Full Thickness Skin Loss	3	0.6
Cardiovascular failure occured	Ν	%	Other disease	2	0.4
None	442	94.0	-	0	0.0
Cardiogenic shock	5	1.1	-	0	0.0
Hypovolemic shock	5	1.1	Infections	76	16.2
Haemorrhagic/hypovolemic shock	3	0.6	Pneumonia	31	6.6
Septic shock	12	2.6	L.R.T.I. other than pneumonia	20	4.3
Anaphylactic shock	0	0.0	NON-surgical urinary tract infection	19	4.0
Neurogenic shock	2	0.4	Primary bacteraemia of unknown origin	6	1.3
Other shock	1	0.2	Gastroenteritis	4	0.9
Missing	0		Clinical sepsis	3	0.6
_			Upper respiratory tract infection	2	0.4
Neurological failure occured	N	%	Catheter-related bacteremia (CR-BSI)	1	0.2
None	468	99.6	Cholecystitis/cholangitis	1	0.2
Cerebral coma	0	0.0	F.U.O. fever of unknown origin	1	0.2
Metabolic coma	1	0.2	Missing	0	
Postanoxic coma	1	0.2	9	-	
Missing	0				

Characteristics during the stay - Adult non surgical patients evaluated in the GiViTI model

Infections	N	%	Maximum severity of infection	N	%
None	180	38.3	None	180	38.6
Only on admission	214	45.5	INFECTION WITHOUT SEPSIS	122	26.2
On admission and during ICU stay	23	4.9	SEPSIS	87	18.7
Only during ICU stay	53	11.3	SEPTIC SHOCK	77	16.5
Missing	0		Missing	4	

Seve	rity evolution		Du	ring the stay		
	N (R %)	None	INFECTION WITHOUT SEPSIS	SEPSIS	SEPTIC SHOCK	тот
	None	180 (77.6%)	28 (12.1%)	16 (6.9%)	8 (3.4%)	232
Admission	INFECTION WITHOUT SEPSIS	-	94 (85.5%)	14 (12.7%)	2 (1.8%)	110
Adn	SEPSIS	-	-	57 (96.6%)	2 (3.4%)	59
	SEPTIC SHOCK	-	-	-	65 (100.0%)	65
	TOT	180	122	87	77	466

Ventil. Associat. Pneumonia (VAP)	N	%	Catheter Bacteraemia (CR-BSI)	Ν	%
No	442	94.0	No	469	99.8
Yes	28	6.0	Yes	1	0.2
Missing	0		Missing	0	
Incidence of VAP			Incidence of CR-BSI		
(Pts. with VAP/1000 days of VM pre-VAP)			(Pts. with CR-BSI/1000 days of CVC pre-CR-BS	SI)	
Estimate	8	3.7	Estimate	0	.2
CI (95%)	5.8-	-12.6	CI (95%)	0.0	-1.2
Incidence of VAP			Incidence of CR-BSI		
(Pts. with VAP/pts. ventilated for 8 days)			(Pts. with CR-BSI/pts. catheterized for 12 days)		
Estimate	7.	0%	Estimate	0.	3%
CI (95%)	4.6-	-10.1	CI (95%)	0.0	-1.5

National report for general ICUs - Year 2018

Process indicators - Adult non surgical patients evaluated in the GIVITI model

Process Indicators - Adult non surgical patients evaluated in the GIVIII model Use On admission	is evalua U	led III IIIe Se	On adn	nission	On discharge	harge		Lenath (davs)	(8)	Davs	Davs from admission	ssion
Procedures and/or treatments (Missing=0)	Z	%	z	%	z	%	Median	Q1-Q3	Missing	Median	Q1-Q3	Missing
Procedures (antibiotics excluded)	465	6.86										
Invasive ventilation	396	84.3	260	55.3	118	25.1	4	1–9	0	0	0-0	0
Non invasive ventilation	34	7.2	ω	1.7	œ	1.7	7	1–5	0	0	0-3	0
Tracheostomy	82	17.4	Ξ	2.3	20	10.6	16	7–28	0	∞	5-10	0
iNO (inhaled nitric oxide)	-	0.2	-	0.2	0	0	7	2-5	0			
Central Venous Catheter	410	87.2	129	27.4	167	35.5	7	2-13	0	0	0-0	0
PICC	0	0.0										
Arterial Catheter	432	91.9	118	25.1	160	34	9	2–11	0	0	0-0	0
Vasoactive drugs	333	6.07	169	36	109	23.2	4	5–9	0	0	0-0	0
Antiarrhythmics	107	22.8	31	9.9	42	8.9	4	2–9	0	0	0-1	0
IABP	4	6.0	က	9.0	-	0.2	4	4-7	0	0	0-0	0
Invasive monitoring of C.O.	163	34.7	31	9.9	22	4.7	9	2-10	0	0	0-0	0
Continous monitoring of ScVO2	0	0.0										
Temporary pacing	က	9.0	က	9.0	_	0.2	က	2–9	0			
Ventricular assistance	0	0.0										
DC-shock	17	3.6								-	0-3	0
CPR	25	11.1								_		0
Massive blood transfusion	0	0.0										
ICP monitoring without CSF drainage	7	0.4	0	0	0	0	4	4-4	0	0	0-0	0
ICP monitoring with CSF drainage	0	0.0										
External ventricular drainage without ICP	0	0.0										
Haemofiltration	38	8.1	က	9.0	_	0.2	2	3–8	0	0	0-5	0
Haemodialysis	09	12.8	21	4.5	30	6.4	7	1-7	0	-		0
ECMO	-	0.2	_	0.2	0	0	7	7-7	0			
Hepatic clearance techniques	0	0.0										
Clearance techniques during sepsis	-	0.2	0	0	0	0	0	0-0	0	2	2-2	0
IAP (intra-abdominal pressure)	2	-										
Hypothermia	-	0.2	_	0.2	0	0	က	3–3	0			
Enteral nutrition	310	0.99	43	9.1	86	20.9	7	3–13	0	0	0-1	0
Parenteral nutrition	166	35.3	50	4.3	80	17	9	2-10	0	0	0-1	0
SUD (Topical, Topical and Systemic)	.N c	9.6										
Peridiral catheter	o c	9 0										
Electrical cardioversion	÷ =	23								•	0-2	0
Vacuum therapy	0	0.4										
Antibiotics	335	71.3										
Antibiotic prophylaxis	52	11.1	22	4.7	28	9	2	1–6	0	0	0-0	0
Empirical antibiotic therapy	506	43.8	26	11.9	24	11.5	က	2–2	0	0	0-0	0
Empirical antibiotic therapy in unconfirmed	37	7.9	∞	1.7	5	1.1	4	2–5	0	0	0-0	0
Targeted antibiotic therapy	136	28.9	20	4.3	49	10.4	7	4-13	C	œ	2-5	C
	2		P I	2	2				•	•)	•

National report for general ICUs - Year 2018

Process indicators - Adult non surgical patients evaluated in the GiViTI model ength (days)

Invasive ventilation (N=396)	N	%	Mean	SD	ength (days Median	Q1-(Q3	Missing
Due to pulmonary failure	335	84.6	10.1	15.3	5	1-10		0
For airway mainteinance	54	13.6	4.6	9.3	2	1-		0
In weaning	5	1.3	0.4	0.5	0	0-	1	0
Not evaluable	2	0.5	5.0	2.8	5	4-	6	0
Reintubation within 48 hours	3	0.8	2.7	1.5	3	2–3	.5	0
Non invasive ventilation (N=34)	N	%	Number	of surgical	interventio	ns	N	%
Non invasive ventilation only	21	61.8				0	459	97.7
Non invasive ventilation failed	3	8.8				1	9	1.9
For weaning	9	26.5				2	0	0.0
Other	1	2.9				3	2	0.4
Missing	0					>3	0	0.0
Tracheostomy not present on	N	%				issing	0	
admission (N=71)		45.5	_	intervention				
Surgical	11	15.5	Days	from admis		N 4 = = :=		1.0
Percutwist	0	0.0 0.0				Mean		1.9
Ciaglia Monodil. Ciaglia	0 1	0.0 1.4			N /	SD ledian		9.0 10
Monodii. Glagiia Fantoni	0	0.0				iedian 1–Q3	1	10 5–19
Griggs	35	49.3				i=Q3 issing	4.	0 0
Other Kind	2	2.8						
Unknown	22	31.0	Surgical	intervention	ons (top 10)		N	%
Missing	0					surgery	5	1.1
Tracheostomy - Days after the beginn		finy vont				surgery	5	1.1
Not present on admission (N=71)	iiig o	ı iliv. velit.			Orthopaedic s		1	0.2
Mean		7.8			astrointestinal s		1	0.2
SD		4.3		Peripr	neral vascular s		1 1	0.2 0.2
Median		8			Biliary tract s Esophageal s		1	0.2
Q1-Q3	5	_10			Loophagears	-	0	0.0
Missing		0				_	0	0.0
Invasive monitoring of C.O. (N=163)	N	%				-	0	0.0
Swan Ganz	6	3.7			ľ	Missing	0	
PICCO	32	19.6	Non sur	gical interv	entione		N	%
LIDCO	85	52.1	ivon sur	gicai iiitei v	entions	No	443	94.3
Vigileo-PRAM	9	5.5				Yes	27	5.7
Other	31	19.0			М	issing	0	0.7
Missing	0							
SDD (N=92)	N	%	•	gical interv				
Topical	53	57.6	Days	from admis		Maan		00.4
Topical and systemic	39	42.4				Mean SD		22.4 9.5
Missing	0				N	اطاق ledian		18
						1–Q3	a i	5–26
Antibiotic therapy Pt. infected in ICU only (N=53)	N	%				issing	0.	0
Only empirical	15	30.0	N					
Only targeted	11	22.0	Non sur	gical interv			N	%
Targeted after empirical	22	44.0			rventional end		33	7.0
Other	2	4.0			terventional ra		1	0.2
Missing	3				erventional car		0	0.0 0.0
	N	07		interver	ntional neurora 1	alology Missing	0 0	0.0
Surgical interventions No	459	97.7			ı	viiooii iy	U	
Yes	459 11	97.7 2.3						
Missing	0	۷.۵						
iviissirig	U							

Outcome indicators - Adult non surgical patients evaluated in the GiViTI model

ICU outcome	N	%
Dead	202	43.7
Transferred to same hospital	147	31.8
Transferred to other hospital	85	18.4
Discharged home	28	6.1
Disch. terminally ill	0	0.0
Missing	8	
Transferred to (N=232)	N	%
Ward	215	92.7
Other ICU	15	6.5
High dependency care unit	2	0.9
Rehabilitation	0	0.0
Day hospital or Long-term care	0	0.0
Missing	0	
Reason of transfer to		04
Other ICU (N=15)	N	<u>%</u>
Specialist expertise	2	13.3
Step-up care	7	46.7
Logistical/organizational reasons	6	40.0
Step-down care	0	0.0
Missing	0	
Transferred to	N.I.	04
Same hospital (N=147)	N	<u>%</u>
Ward	145	98.6
Other ICU	0	0.0
High dependency care unit	2	1.4
Rehabilitation	0	0.0
Day hospital or Long-term care	0	0.0
Missing	0	
Transferred to	NI	04
Other hospital (N=85)	N 70	92.4
Ward Other ICL	70 15	82.4
Other ICU	15	17.6
High dependency care unit	0	0.0
Rehabilitation	0	0.0
Day hospital or Long-term care	0	0.0
Missing	0	
ICU mortality	N	%
Alive	260	56.3
Dead	202	43.7
Missing	8	
Timing of ICU mortality (N=202)	N	%
Daytime (08:00AM - 07:59PM)	104	51.5
Nighttime (08:00PM - 07:59AM)	98	48.5
Weekdays (Monday - Friday)	145	71.8
Weekend (Saturday - Sunday)	57	28.2
` ,	_	
Missing	0	

Hospital mortality	N	%
Alive	255	54.3
Dead	215	45.7
Missing	0	
Timing of hosp. mortality (N=215)	N	%
In ICU	202	94.0
Within 24 hours after ICU	1	0.5
24-47 hours after ICU	2	0.9
48-71 hours after ICU	2	0.9
72-95 hours after ICU	0	0.0
After 95 hours after ICU	8	3.7
Missing	0	
Timing of hosp, mortality (days from	ICU d	isch.)

Discharged alive from ICU (N=13)			
Mean	10.7		
SD	13.4		
Median	8		
Q1-Q3	2-13		
Missing	0		

National report for general ICUs - Year 2018 Outcome indicators - Adult non surgical patients evaluated in the GiViTI model

st hospital mortality		N	%	ICU stay (days)		
	Alive	253	53.8		Mean	10.3
	Dead	217	46.2		SD	14.2
	Missing	0			Median	6
					Q1-Q3	2-11
					Missing	0
				ICU stay (days)		
				Alive (N=260)	Mean	9.9
					SD	9.9 12.2
					Median	6
					Q1-Q3	2.8-11
					Missing	0
				ICU stay (days) Dead (N=202)		
					Mean	9.5
					SD	14.2
					Median	5
					Q1-Q3	1-10
					Missing	0
				Stay after ICU (days) Alive (N=260)		
				· · · · · · · · · · · · · · · · · · ·	Mean	6.7
					SD	10.9
					Median	2
					Q1-Q3	0-9
					Missing	0
				Hospital stay (days)		
					Mean	17.0
					SD	19.7
					Median	10
					Q1-Q3	4-23
					Missing	0
				Hospital stay (days) Alive (N=255)		
				-	Mean	18.5
					SD Maralliana	19.9
					Median	12
					Q1-Q3	5–26
					Missing	0
				Hospital stay (days) Dead (N=215)		
					Mean	15.3
					SD	19.4
					Median	9
					Q1-Q3	2 - 19.5
					Missing	0

Characteristics on admission - Adult elective surgical patients evaluated in the GiViTI model

Patients (N): 59

Sex	N	%
Male	35	59.3
Female	24	40.7
Missing	0	
Age (years)	N	%
17-45	14	23.7
46-65	17	28.8
66-75	16	27.1
>75	12	20.3
Missing	0	
Mean	6	0.4
SD		6.7
Median		64
Q1-Q3		-72.5
Min-Max	26	-93
Body mass Index (BMI)	N	%
Underweight	3	5.1
Normal	18	30.5
Overweight	22	37.3
Obese	16	27.1
Missing	0	
Pregnancy status		
Females (N=24)	N	%
Not fertile	5	20.8
Not pregnant/Unknown	19	79.2
Currently pregnant	0	0.0
Post partum	0	0.0
Missing	0	
Comorbidities	N	%
No	8	13.6
Yes	51	86.4
Missing	0	
Comorbidities (top 10)	N	%
Hypertension	32	54.2
NYHA class II-III	14	23.7
Arrhythmia	13	22.0
Any tumour without metastasis	12	20.3
Diabetes Type II with insulin treatment	12	20.3
Peripheral vascular disease	11	18.6
Myocardial infarction	5	8.5
Peptic ulcer disease	5	8.5
End-stage renal disease	4	6.8
Metastatic cancer	4	6.8
Missing	0	

Stay before ICU (days)		
Mean		6.5
SD	7	7.1
Median		4
Q1-Q3	1.	5–9
Missing		0
Source of admission	N	%
Same hospital	55	93.2
Other hospital	4	6.8
Long-term chronic care hospital	0	0.0
Directly from the community	0	0.0
Missing	0	
Ward of admission		
Hospital (N=59)	Ν	%
Medical ward	0	0.0
Surgical ward	59	100.0
Emergency room	0	0.0
Other ICU	0	0.0
High dependency care unit	0	0.0
Missing	0	
Reason for transfer from		
Other ICU (N=0)	Ν	%
Specialist expertise	0	0.0
Step-up care	0	0.0
Logistical/organizational reasons	0	0.0
Step-down care	0	0.0
Missing	0	
Ward of admission		
Same hospital (N=55)	Ν	%
Medical ward	0	0.0
Surgical ward	55	100.0
Emergency room	0	0.0
Other ICU	0	0.0
High dependency care unit	0	0.0
Missing	0	
Ward of admission		
Other hospital (N=4)	N	%
Medical ward	0	0.0
Surgical ward	4	100.0
Emergency room	0	0.0
Other ICU	0	0.0
High dependency care unit	0	0.0
Missing	0	
Scheduled admission	N	%
No No	28	47.5
Yes	31	52.5
Missing	0	32.0
531119	•	

Characteristics on admission - Adult elective surgical patients evaluated in the GiViTI model

0

0

Ν

%

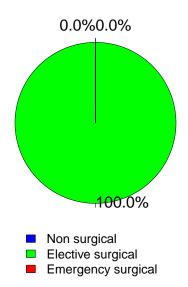
0.0

Trauma		N	%
	No	57	96.6
	Yes	2	3.4
	Multiple trauma	0	0.0
	Missing	0	
Surgical status		N	%
	Non surgical	0	0.0
	Elective surgical	59	100.0

Surgical status

Missing

Emergency surgical



Operating theatre of surgical ward	49	83.1
Operating theatre of emergency room	0	0.0
Surgical ward	10	16.9
Other	0	0.0
Missing	0	
Surgical interventions (top 10)		
Elective surgical (N=59)	Ν	%
Gastrointestinal surgery	15	25.4
Neurosurgery	14	23.7
Pancreatic surgery	9	15.3
Gynaecological surgery	5	8.5
Biliary tract surgery	5	8.5
Nephro/Urological surgery	3	5.1
Orthopaedic surgery	3	5.1
Other surgery	3	5.1
Abdominal vascular surgery	2	3.4
Esophageal surgery	2	3.4
Missing	0	

Fiming Elective surgical (N=59)	Ν	%
From -7 to -3 days	4	6.8
From -2 to -1 days	7	11.9
On ICU admission day	51	86.4
The day after ICU admission	3	5.1
Missing	0	
Surgical interventions (top 10)		
Emergency surgical (N=0)	N	%
-	0	0.0
-	0	0.0
-	0	0.0
-	0	0.0
-	0	0.0
-	0	0.0
-	0	0.0
-	0	0.0
-	0	0.0
- A A I I	0	0.0
Missing	U	
Timing Experimental (N 0)	p. I	\sim
Emergency surgical (N=0)	N	%
From -7 to -3 days	0	0.0
From -2 to -1 days On ICU admission day	0	0.0
The day after ICU admission	0	0.0
Missing	0	0.0
Wilsonig	0	
Non surgical interventions	N	%
None	57	96.6
Elective	0	0.0
Emergency Missing	2 0	3.4
Non curainal interventions		
Non surgical interventions Elective (N=0)	Ν	%
Interventional radiology	0	0.0
Interventional cardiology	0	0.0
Interventional neuroradiology	0	0.0
Interventional endoscopy	0	0.0
Missing	0	
Non surgical interventions		
Emergency (N=2)	N	% FO 0
Interventional radiology	1 1	50.0 50.0
التاليب والمستان والمستان والمساوية		5U U
Interventional cardiology	-	
Interventional cardiology Interventional endoscopy Interventional neuroradiology	1 0	50.0 0.0

Source of admission Surgical pt. (N=59)

Characteristics on admission - Adult elective surgical patients evaluated in the GiViTI model

Reason for admission	N	%
Monitoring/Weaning	17	28.8
Post surgical weaning	14	23.7
Surgical monitoring	3	5.1
Post interventional weaning	0	0.0
Interventional monitoring	0	0.0
Non surgical monitoring	0	0.0
Missing	0	
Admission for procedures/treatments	0	0.0
Intensive Treatment	42	71.2
Only ventilatory support	7	11.9
Only cardiovascular support	2	3.4
Ventilatory and cardiovascular support	33	55.9
Missing	0	
Palliative Sedation	0	0.0
Diagnosis of death/Organ donation	0	0.0
Missing	0	

Number of failures (%)

32.2%

2

18.6%

3

100

80

60

40

20

0

27.1%

0

8.5%

1



Failures on admission	N	%
No	16	27.1
Yes	43	72.9
A: Respiratory failure	40	67.8
B: Cardiovascular failure	35	59.3
C: Neurological failure	5	8.5
D: Hepatic failure	1	1.7
E: Renal failure	15	25.4
F: Acute skin failure	0	0.0
G: Metabolic failure	12	20.3
H: Coagulation failure	1	1.7
Missing	0	

Failures on admission (top 10)	N	
AB	17	28.8
ABEG	5	8.5
ABC	4	6.8
A	3	5.1
ABE	3	5.1
ABG	2	3.4
AEG	2	3.4
ABCEG	1	1.7
ABEH	1	1.7
ADEG	1	1.7
Missing	0	
Respiratory failure	N	
None	19	32.2
Only hypoxic failure	32	54.2
Only hypercapnic failure	0	0.0
Hypoxic-hypercapnic failure	5	8.5
Intubation for airway maint.	3	5.1
Missing	0	0.1
Cardiovascular failure	N	%
None	24	40.7
Without shock	26	44.1
Cardiogenic shock	1	1.7
Septic shock	1	1.7
Haemorrhagic/hypovolemic shock	3	5.1
Hypovolemic shock	1	1.7
Anaphylactic shock	0	0.0
Neurogenic shock	1	1.7
Other shock	1	1.7
Mixed shock	1	1.7
Missing	0	
Neurologic failure	N	%
None	19	79.2
Cerebral coma	4	16.7
Metabolic coma	1	4.2
Postanoxic coma	0	0.0
Toxic coma	0	0.0
Missing or not evaluable	35	
Renal failure (AKIN)	N	%
None	44	74.6
Mild	2	3.4
Moderate	5	8.5
Severe	8	13.6
Missing	0	
Metabolic failure	N	 %
None	47	79.7
pH <= 7.3, PaCO2 < 45 mmHg	2	3.4
Base deficit >= 5 mmol/L, lactate >1.5x	10	16.9
Missing	0	

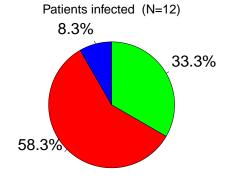
Characteristics on admission - Adult elective surgical patients evaluated in the GiViTI model

Characteristics on admission - Addit		•
Clinical conditions on admission	N	%
Respiratory	5	8.5
Mild ARDS	2	3.4
Acute asthma/bronchospasm	1	1.7
Pneumothorax/Pneumomediastinum	1	1.7
Moderate ARDS	1	1.7
-	0	0.0
Cardiovascular	9	15.3
Left heart failure without pulm. edema	6	10.2
Non-ruptured aneurysm	3	5.1
Left heart failure with pulmonary edema	2	3.4
Cardiac arrest	2	3.4
Right heart failure	1	1.7
Neurological	16	27.1
Brain tumour	12	20.3
Cerebral artery stroke	2	3.4
Non traumatic cerebral oedema	2	3.4
Cerebral Aneurysm	2	3.4
Intracranial hypertension	1	1.7
Gastrointestinal and hepatic	23	39.0
Digestive tract malignancy	8	13.6
Pancreatic malignancy	7	11.9
Intestinal occlusion	2	3.4
Acute pancreatitis	2	3.4
Gastrointestinal perforation	1	1.7
Trauma (anatomical districts)	2	3.4
Pelvis/bone/joint & muscle	2	3.4
-	0	0.0
-	0	0.0
-	0	0.0
-	0	0.0
-	0	0.0
-	0	0.0
Other	11	18.6
Gynaecological disease	7	11.9
Nephrourologic disease	4	6.8
Coagulation disorder	1	1.7
-	0	0.0
	0	0.0
Post transplantation	0	0.0
i oot transplantation	0	0.0
•	0	0.0
Infections	12	20.3
Pneumonia	5	8.5
Primary bacteragina of unknown origin	3	5.1 1.7
Primary bacteraemia of unknown origin	1	
Cholecystitis/cholangitis	1	1.7
Post-surgical skin/soft tissue infection	1	1.7
Tertiary peritonitis	1	1.7
	0	0.0
	0	0.0
	0	0.0
h A:	0	0.0
Missing	0	

Trauma (anatomical districts)	N	%
Head	0	0.0
пеаи	0	0.0
-	0	0.0
-		0.0
-	0	0.0
-	0	
China	0	0.0
Spine	0	0.0
•	0	0.0
•	0	0.0
-	0	0.0
Chest	0	0.0
-	0	0.0
-	0	0.0
-	0	0.0
Abdomen	0	0.0
-	0	0.0
-	0	0.0
-	0	0.0
Pelvis/bone/joint & muscle	2	3.4
Long bone fracture	2	3.4
-	0	0.0
-	0	0.0
Major vessels injury	0	0.0
-	0	0.0
-	0	0.0
-	0	0.0
Miscellaneous	0	0.0
-	0	0.0
_	0	0.0
Missing	0	
la facilitar a consultar a manda al antico	N.I.	04

Infection severity on admission	N	%
None	47	79.7
INFECTION WITHOUT SEPSIS	4	6.8
SEPSIS	7	11.9
SEPTIC SHOCK	1	1.7
Missing	0	

Infection severity on admission



INFECTION WITHOUT SEPSIS

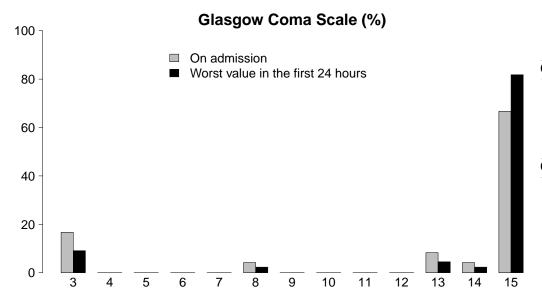
SEPSIS

SEPTIC SHOCK

0

National report for general ICUs - Year 2018

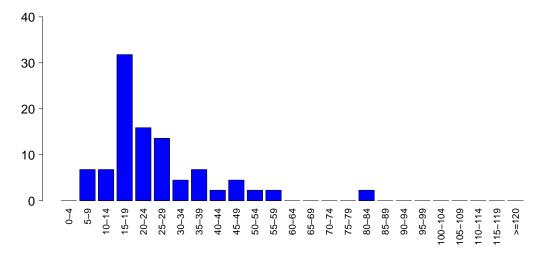
Severity scores - Adult elective surgical patients evaluated in the GiViTI model



GCS (admission)	
Median	15
Q1-Q3	13-15
Not evaluable	35
Missing	0
GCS (first 24 hour	s)
Median	15
Q1-Q3	15-15
Not evaluable	15

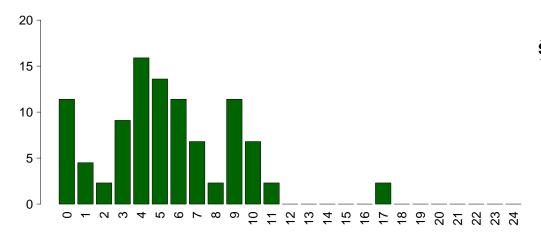
Missing

SAPS II (%)



SAPSII	
Mean	25.5
SD	14.8
Median	21
Q1-Q3	16-29
Not evaluable	15
Missing	0

SOFA (%)



SOFA	
Mean	5.4
SD	3.6
Median	5
Q1-Q3	3 - 7.2
Not evaluable	15
Missing	0

National report for general ICUs - Year 2018 Characteristics during the stay - Adult elective surgical patients evaluated in the GiViTI model

Complications during the stay	N	%	Renal failure occured (AKIN)	N	%
No	40	67.8	None	59	100.0
Yes	19	32.2	Mild	0	0.0
Missing	0		Moderate	0	0.0
			Severe	0	0.0
Failures during the stay	N	%	Missing	0	
No	59	100.0			
Yes	0	0.0	Complications during the stay	N	%
A: Respiratory failure B: Cardiovascular failure	0	0.0	Respiratory	2	3.4
	0	0.0 0.0	Pleural effusion	1	1.7
C: Neurological failure D: Hepatic failure	0 0	0.0	Pneumothorax/Pneumomediastinum	1	1.7
E: Renal failure (AKIN)	0	0.0		0	0.0
F: Acute skin failure	0	0.0		0	0.0
G: Metabolic failure	0	0.0	-	0	0.0
H: Coagulation failure	0	0.0	Cardiovascular	5	8.5
Missing	0		Acute ischaemia	1	1.7 1.7
3			Cardiac arrest	1 1	1.7
Failures during the stay (top 10)	Ν	%	Deep venous thrombosis Left heart failure w/o pulm. edema	1	1.7
-	0	0.0	Pulmonary edema	1	1.7
-	0	0.0	Neurological	10	16.9
-	0	0.0	Brain edema	5	8.5
-	0	0.0	Drowsiness/agitation/delirium	4	6.8
-	0	0.0	Intracranial hypertension	4	6.8
-	0	0.0	Seizures	3	5.1
-	0	0.0	New ischaemic stroke	2	3.4
-	0	0.0	Gastrointestinal and hepatic	1	1.7
_	0	0.0	Anastomotic dehiscence	1	1.7
Missing	0	0.0	-	0	0.0
			-	0	0.0
Respiratory failure occured	N	%	-	0	0.0
None	59	100.0	- Other	0	0.0
Intubation for airway maint.	0	0.0	Other	3	5.1
Hypoxic failure	0	0.0	Category/Stage III: Full Thickness Skin Loss latrogenic major vessels injury	1 1	1.7 1.7
Hypercapnic failure	0	0.0	Nephrourologic disease	1	1.7
Missing	0		rveprirourologic disease	0	0.0
Cardiovascular failure occured	N	%	_	0	0.0
None	59	100.0	-	0	0.0
Cardiogenic shock	0	0.0	-	0	0.0
Hypovolemic shock	0	0.0	Infections	7	11.9
Haemorrhagic/hypovolemic shock	0	0.0	NON-surgical urinary tract infection	4	6.8
Septic shock	0	0.0	Post-surgical peritonitis	2	3.4
Anaphylactic shock	0	0.0	Post-surgical bone and joint infection	1	1.7
Neurogenic shock	0	0.0	Pneumonia	1	1.7
Other shock	0	0.0	Sinusitis	1	1.7
Missing	0		-	0	0.0
Nouvelegical failure assured	N I	04	-	0	0.0
Neurological failure occured	N	%	-	0	0.0
None Corobral comp	59 0	100.0	-	0	0.0
Cerebral coma Metabolic coma	0	0.0 0.0	-	0	0.0
Postanoxic coma	0 0	0.0	Missing	0	
Missing	0	0.0			
wiissing	U				

Characteristics during the stay - Adult elective surgical patients evaluated in the GiViTI model

Infections	N	%	Maximum severity of infection	N	%
None	42	71.2	None	42	71.2
Only on admission	10	16.9	INFECTION WITHOUT SEPSIS	3	5.1
On admission and during ICU stay	2	3.4	SEPSIS	13	22.0
Only during ICU stay	5	8.5	SEPTIC SHOCK	1	1.7
Missing	0		Missing	0	

Seve	rity evolution		Du	ring the stay		
	N (R %)	None	INFECTION WITHOUT SEPSIS	SEPSIS	SEPTIC SHOCK	тот
_	None	42 (89.4%)	2 (4.3%)	3 (6.4%)	0 (0.0%)	47
Admission	INFECTION WITHOUT SEPSIS	-	1 (25.0%)	3 (75.0%)	0 (0.0%)	4
Adn	SEPSIS	-	-	7 (100.0%)	0 (0.0%)	7
	SEPTIC SHOCK	-	-	-	1 (100.0%)	1
	TOT	42	3	13	1	59

Ventil. Associat. Pneumonia (VAP)	N	%	Catheter Bacteraemia (CR-BSI)	N	%
No	58	98.3	No	59	100.0
Yes	1	1.7	Yes	0	0.0
Missing	0		Missing	0	
Incidence of VAP			Incidence of CR-BSI		
(Pts. with VAP/1000 days of VM pre-VAP)			(Pts. with CR-BSI/1000 days of CVC pre-CR-BS	SI)	
Estimate	5	5.6	Estimate		0.0
CI (95%)	0.1-	–31.3	CI (95%)	0.0)–12.2
Incidence of VAP			Incidence of CR-BSI		
(Pts. with VAP/pts. ventilated for 8 days)			(Pts. with CR-BSI/pts. catheterized for 12 days)		
Estimate	4.	.5%	Estimate	(0.0%
CI (95%)	0.1-	-25.0	CI (95%)	0.0)-14.6

<u>∞</u>	
r 2018	•
<u>_</u>	
Year	
1	
S	•
ICUs	
╦	
7	
Ĕ	
general I	
₽	
rt for	
Ĕ	
repor	
<u>9</u>	
╦	
ationa	
<u>:</u>	
lati	
_	1

Process indicators - Adult elective surgical patients evaluated in the GiViTI mode	ients eva	aluated in	the GiVi	TI model	On discharge	harde		onoth (dave)		Dave	Dave from admission	doio
Procedures and/or treatments (Missing=0)	z	%	Z	%	52	%	Median	Q1-Q3	Missing	Median	Q1-Q3	Missing
Procedures (antibiotics excluded)	59	100.0										•
Invasive ventilation	54	91.5	49	83.1	2	8.5	-	0-3	0	0	0-0	0
Non invasive ventilation	0	0.0		((,		,	Ó		
Tracheostomy (inhalad nitric oxide)	ဖ င	10.2	0	0	7	9. 4	4	8-16	0	∞	6-10	0
INO (IIIIIaled IIIIIIc Oxide)	> ¦	5. 6	•	7	,	1	ď	7	C	Ć	0	C
Central Venous Catheter	22	93.2	44	74.6	4	23.7	n	9-1	0	0	0-0	0
Arterial Catheter	5.5	94.9	5	20.3	6	15.3	~	ן ק	C	c	0-0	C
Vasoactive drugs	43	72.9	37	62.7	22	8.5		1-4	0	0	0-0	0
Antiarrhythmics	=	18.6	4	6.8	က	5.1	-	1–3	0	0	0-0	0
IABP	0	0.0										
Invasive monitoring of C.O.	38	64.4	က	5.1	7	3.4	7	1–5	0	0	0-0	0
Continous monitoring of ScVO2	0	0.0										
Temporary pacing	0	0.0										
Ventricular assistance	0	0.0										
DC-shock	0	0.0										
CPR	က	5.1								-	0 - 2	0
Massive blood transfusion	0	0.0										
ICP monitoring without CSF drainage	0	0.0										
ICP monitoring with CSF drainage	0	0.0										
External ventricular drainage without ICP	0	0.0										
Haemofiltration	2	8.5	0	0	0	0	က	3-4	0	0	0-0	0
Haemodialysis	2	8.5	-	1.7	2	3.4	2	3–5	0	-	1-1	0
ECMO	0	0.0										
Hepatic clearance techniques	0	0.0										
Clearance techniques during sepsis	0	0.0										
IAP (intra-abdominal pressure)	-	1.7										
Hypothermia	0	0.0										
Enteral nutrition	17	28.8	- (1.7	4 1	8.9	വ	2–15	0	- (0-2	0
Parenteral nutrition	გ 4	57.6	2	4.5	,	ا ئ	T	5-6	0	>		o
SUD (Topical, Topical and Systemic)	ი c	χ Ω C										
Deriding cotheter	> <	0.0										
reridural cameter	> •	O.O.								Ó		(
Electrical cardioversion		1.7								0	0-0	0
vacuulii iiielapy	- 3	1.,										
Antibiotics	31	52.5										
Antibiotic prophylaxis	16	27.1	12	20.3	4	8.9	-	1–3	0	0	0-0	0
Empirical antibiotic therapy	2	8.5	0	0	0	0	7	1–3	0	0	0-0	0
Empirical antibiotic therapy in unconfirmed	7	11.9	0	0	0	0	4	2–5	0	0	0-0	0
Targeted antibiotic therapy	6	15.3	•	17	cr.	τς: -	Ç	3-11	C	4	4-6	C
(dr. in the same of the same o	•				•	;	•		•			•

Process indicators - Adult elective surgical patients evaluated in the GiViTI model

Invasive ventilation (N=54)	Ν	%	Mean	SD	Median	Q1-0		Missing
Due to pulmonary failure	37	68.5	4.7	6.8	2	0-	5	0
For airway mainteinance	3	5.6	7.0	10.4	1	1-1	0	0
In weaning	14	25.9	0.1	0.3	0	0-0	0	0
Not evaluable	0	0.0						
Reintubation within 48 hours	0	0.0						
Non invasive ventilation (N=0)	N	%	Number	of surgical	intervention	ons	N	%
Non invasive ventilation only	0	0.0				0	55	93.2
Non invasive ventilation failed	0	0.0				1	3	5.1
For weaning	0	0.0				2	1	1.7
Other	0	0.0				3	0	0.0
Missing	0				_	>3	0	0.0
Tracheostomy not present on	N	%				lissing	0	
admission (N=6) Surgical	2	33.3	_	intervention intervention in the intervention in the intervention in the intervention in the intervention in term in the intervention in the inter				
Percutwist	0	0.0	Days	IIOIII auiiiis	551011	Mean		4.0
Ciaglia Ciaglia	0	0.0				SD		4.0 2.0
Glaglia Monodil. Ciaglia	0	0.0			N	טפ Nedian		3
Fantoni	0	0.0				1–Q3		3–5
Griggs	3	50.0				lissing		0
Other Kind	0	0.0						
Unknown	1	16.7	Surgical interventions (top 10)		N	%		
Missing	0					surgery	2	3.4
						surgery	2	3.4
Tracheostomy - Days after the beginn	iing o	t inv. vent.	ent. Gastrointestinal surgery		1	1.7		
Not present on admission (N=6)		7.0				-	0	0.0
Mean		7.3				-	0	0.0
SD Median		3.3	-		0	0.0		
Q1-Q3		7.5 -9.8	- -		0	0.0		
Missing	O	_9.6 0			0	0.0		
			- -		0	0.0		
Invasive monitoring of C.O. (N=38)	N	%				- Mississ	0	0.0
Swan Ganz	0	0.0				Missing	0	
PICCO	1	2.6	Non sur	gical interv	entions		Ν	%
LIDCO	34	89.5				No	58	98.3
Vigileo-PRAM	0	0.0				Yes	1	1.7
Other	3	7.9			N	lissing	0	
Missing	0		Non sur	gical interv	entions			
SDD (N=5)	Ν	%	-	from admis				
Topical	5	100.0				Mean		6.0
Topical and systemic	0	0.0				SD		
Missing	0				N	/ledian		6
Antibiotic therapy					Q	1-Q3		6–6
Pt. infected in ICU only (N=5)	Ν	%			M	lissing		0
Only empirical	0	0.0	Non sur	gical interv	entions		N	%
Only targeted	5	100.0	11011 341		erventional end	Hascony	1	1.7
Targeted after empirical	0	0.0			nterventional ra		0	0.0
Other	0	0.0			erventional ca		0	0.0
Missing	0				ntional neurora		0	0.0
Surgical interventions	N	%		iiilei ve		Missing	0	0.0
No No	55	93.2				.v.ioonig	J	
Yes	55 4	93.∠ 6.8						
Tes Missing	0	0.0						
iviissiiig	U							

National report for general ICUs - Year 2018 Outcome indicators - Adult elective surgical patients evaluated in the GiViTI model

ICU outcome	N	%
Dead	10	16.9
Transferred to same hospital	43	72.9
Transferred to other hospital	4	6.8
Discharged home	2	3.4
Disch. terminally ill	0	0.0
Missing	0	0.0
Transferred to (N=47)	N	%
Ward	46	97.9
Other ICU	1	2.1
High dependency care unit	0	0.0
Rehabilitation	0	0.0
Day hospital or Long-term care	0	0.0
Day nospital of Long-term care Missing	0	0.0
Reason of transfer to Other ICU (N=1)	N	%
Specialist expertise	0	0.0
Step-up care	0	0.0
Logistical/organizational reasons	1	100.0
Step-down care	0	0.0
Step-down care Missing	0	0.0
เขเธธแญ	U	
Transferred to	N I	∩ →
Same hospital (N=43)	N	<u>%</u>
Ward	43	100.0
Other ICU	0	0.0
High dependency care unit	0	0.0
Rehabilitation	0	0.0
Day hospital or Long-term care	0	0.0
Missing	0	
Transferred to		
Other hospital (N=4)	N	% 75.0
Ward	3	75.0
Other ICU	1	25.0
High dependency care unit	0	0.0
Rehabilitation	0	0.0
Day hospital or Long-term care	0	0.0
Missing	0	
ICU mortality	N	%
Alive	49	83.1
Dead	10	16.9
Missing	0	
Timing of ICU mortality (N=10)	N	%
Daytime (08:00AM - 07:59PM)	9	90.0
Nighttime (08:00PM - 07:59AM)	1	10.0
	Ω	$\Omega \cap \Omega$
Weekdays (Monday - Friday)	8	80.0
	8 2 0	80.0 20.0

Hospital mortality	N	%
Alive	44	74.6
Dead	15	25.4
Missing	0	
Timing of hosp. mortality (N=15)	N	%
In ICU	10	66.7
Within 24 hours after ICU	0	0.0
24-47 hours after ICU	1	6.7
48-71 hours after ICU	0	0.0
72-95 hours after ICU	0	0.0
After 95 hours after ICU	4	26.7
Missing	0	

Timing of hosp. mortality (days from ICU disch.) Discharged alive from ICU (N=5)						
Mean	11.6					
SD	10.4					
Median	9					
Q1-Q3	9-10					
Missing	0					

National report for general ICUs - Year 2018 Outcome indicators - Adult elective surgical patients evaluated in the GiViTI model

Last hospital mortality		N	%	ICU stay (days)		
	Alive	44	74.6		Mean	5.3
	Dead	15	25.4		SD	6.7
	Missing	0			Median	2
					Q1-Q3	1–5.5
					Missing	0
				ICU stay (days) Alive (N=49)		
				All VC (IV=40)	Mean	4.8
					SD	6.4
					Median	2
					Q1-Q3	1-5
					Missing	0
				ICU stay (days) Dead (N=10)		
				· · · · · · · · · · · · · · · · · · ·	Mean	7.5
					SD	7.9
					Median	5
					Q1-Q3	2–8.2
					Missing	0
				Stay after ICU (days) Alive (N=49)		
					Mean	12.9
					SD	12.7
					Median	9
					Q1-Q3 Missing	5–18 0
						-
				Hospital stay (days)	Maan	00.1
					Mean SD	22.1 16.7
					Median	16.7
					Q1–Q3	9–33.5
					Missing	0
				Hospital stay (days) Alive (N=44)		
				- · · · · · · · · · · · · · · · · · · ·	Mean	23.0
					SD	17.5
					Median	16
					Q1-Q3	9 - 34.2
					Missing	0
				Hospital stay (days) Dead (N=15)		
					Mean	19.6
					SD	14.2
					Median	20
					Q1-Q3	7.5–26
					Missing	0

Characteristics on admission - Adult emergency surgical patients evaluated in the GiViTI model

Patients (N): 175

Sex	N	%
Male	96	54.9
Female	79	45.1
Missing	0	
Age (years)	N	%
17-45	35	20.0
46-65	54	30.9
66-75	34	19.4
>75	52	29.7
Missing	0	
Mean	6	3.2
SD	17	7.8
Median	6	35
Q1-Q3	53	-78
Min-Max	20	-96
		~
Body mass Index (BMI)	N	<u>%</u>
Underweight	9	5.1
Normal	57	32.6
Overweight	55	31.4
Obese	54	30.9
Missing	0	
Pregnancy status		
Females (N=79)	Ν	%
Not fertile	36	45.6
Not pregnant/Unknown	35	44.3
Currently pregnant	2	2.5
Post partum	6	7.6
Missing	0	
Comorbidities	N	%
No	27	15.4
Yes	148	84.6
Missing	0	
Comorbidities (top 10)	N	%
Hypertension	89	50.9
NYHA class II-III	50	28.6
Arrhythmia	36	20.6
Peripheral vascular disease	26	14.9
Diabetes Type II with insulin treatment	23	13.1
Alcohol addiction	21	12.0
Moderate or severe renal disease	18	10.3
Myocardial infarction	18	10.3
Diabetes Type II without insulin tr.	15	8.6
Cerebrovascular disease	13	7.4
Missing	0	

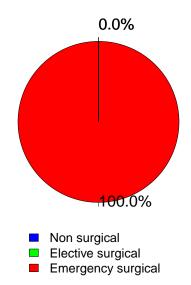
Stay before ICU (days)		
Mean		1.3
SD Median	7	7.4 1
Median Q1-Q3	0	1 -5
Missing	U	_5 0
Source of admission	N	%
Same hospital Other hospital	151 24	86.3 13.7
Long-term chronic care hospital	0	0.0
Directly from the community	0	0.0
Missing	0	0.0
Ward of admission		
Hospital (N=175)	N	%
Medical ward	14	8.0
Surgical ward	147	84.0
Emergency room	9	5.1
Other ICU	4	2.3
High dependency care unit	1	0.6
Missing	0	
Reason for transfer from		
Other ICU (N=4)	Ν	%
Specialist expertise	2	50.0
Step-up care	1	25.0
Logistical/organizational reasons	1	25.0
Step-down care	0	0.0
Missing	0	
Ward of admission		
Same hospital (N=151)	N	%
Medical ward	10	6.6
Surgical ward	134	88.7
Emergency room	6	4.0
Other ICU High dependency care unit	0 1	0.0 0.7
Missing	0	0.7
Ward of admission	N.I.	04
Other hospital (N=24) Medical ward	N 4	[%] 16.7
Surgical ward	13	54.2
Emergency room	3	12.5
Other ICU	4	16.7
High dependency care unit	0	0.0
Missing	0	-
Scheduled admission	N	%
No No	174	99.4
Yes	1	0.6
Missing	0	
ŭ		

National report for general ICUs - Year 2018 Characteristics on admission - Adult emergency surgical patients evaluated in the GiViTI model

Trauma	N	%
No	134	76.6
Yes	41	23.4
Multiple trauma	12	6.9
Missing	0	

Surgical status	N	%
Non surgical	0	0.0
Elective surgical	0	0.0
Emergency surgical	175	100.0
Missing	0	

Surgical status

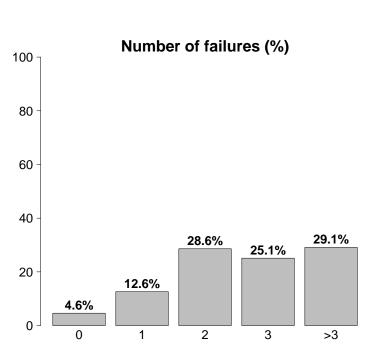


Source of admission		
Surgical pt. (N=175)	Ν	%
Operating theatre of surgical ward Operating theatre of emergency room Surgical ward Other Missing	116 3 31 25 0	66.3 1.7 17.7 14.3
Surgical interventions (top 10)		
Elective surgical (N=0)	N	%
-	0	0.0
-	0	0.0
-	0	0.0
-	0	0.0
-	0	0.0
-	0	0.0
-	0	0.0
-	0	0.0
-	0	0.0
-	0	0.0
Missing	0	

Timing		
Elective surgical (N=0)	N	%
From -7 to -3 days	0	0.0
From -2 to -1 days	0	0.0
On ICU admission day	0	0.0
The day after ICU admission	0	0.0
Missing	0	
Surgical interventions (top 10)		
Emergency surgical (N=175)	Ν	%
Gastrointestinal surgery	65	37.1
Neurosurgery	39	22.3
Orthopaedic surgery	16	9.1
Other surgery	13	7.4
Peripheral vascular surgery	12	6.9
Biliary tract surgery	8	4.6
Obstetric surgery	7	4.0
Abdominal vascular surgery	7	4.0
Gynaecological surgery	4	2.3
Splenectomy	4	2.3
Missing	0	
Timing		
Emergency surgical (N=175)	Ν	%
From -7 to -3 days	22	12.6
From -2 to -1 days	23	13.1
On ICU admission day	131	74.9
The day after ICU admission	11	6.3
Missing	0	
Non surgical interventions	N	%
None	159	90.9
Elective	2	1.1
Emergency	14	8.0
Missing	0	
Non surgical interventions		
Elective (N=2)	Ν	%
Interventional neuroradiology	1	50.0
Interventional radiology	0	0.0
Interventional cardiology	0	0.0
Interventional endoscopy	0	0.0
Missing	1	
Non surgical interventions		
Emergency (N=14)	Ν	%
Interventional endoscopy	4	28.6
Interventional cardiology	3	21.4
Interventional neuroradiology	3	21.4
Interventional radiology	0	0.0
Missing	4	

Characteristics on admission - Adult emergency surgical patients evaluated in the GiViTI model

Reason for admission	Ν	%
Monitoring/Weaning	9	5.1
Post surgical weaning	5	2.9
Surgical monitoring	4	2.3
Post interventional weaning	0	0.0
Interventional monitoring	0	0.0
Non surgical monitoring	0	0.0
Missing	0	
Admission for procedures/treatments	0	0.0
Intensive Treatment	166	94.9
Only ventilatory support	30	17.1
Only cardiovascular support	11	6.3
Ventilatory and cardiovascular support	125	71.4
Missing	0	
Palliative Sedation	0	0.0
Diagnosis of death/Organ donation	0	0.0
Missing	0	



Failures on admission	N	%
No	8	4.6
Yes	167	95.4
A: Respiratory failure	155	88.6
B: Cardiovascular failure	136	77.7
C: Neurological failure	23	13.1
D: Hepatic failure	3	1.7
E: Renal failure	74	42.3
F: Acute skin failure	1	0.6
G: Metabolic failure	71	40.6
H: Coagulation failure	5	2.9
Missing	0	

Failures on admission (top 10)	N	%
AB	36	20.6
ABEG	35	20.0
A	16	9.1
ABE	14	8.0
ABG	14	8.0
ABC	11	6.3
ABCEG	6	3.4
В	5	2.9
AE	4	2.3
AEG	4	2.3
Missing	0	
Respiratory failure	N	%
None	20	11.4
Only hypoxic failure	94	53.7
Only hypercapnic failure	7	4.0
Hypoxic-hypercapnic failure	24	13.7
Intubation for airway maint.	30	17.1
Missing	0	
Cardiovascular failure	N	%
None	39	22.3
Without shock	49	28.0
Cardiogenic shock	7	4.0
Septic shock	35	20.0
Haemorrhagic/hypovolemic shock	25	14.3
Hypovolemic shock	8	4.6
Anaphylactic shock	0	0.0
Neurogenic shock	1	0.6
Other shock	7	4.0
Mixed shock	4	2.3
Missing	0	
Neurologic failure	N	%
None	52	69.3
Cerebral coma	16	21.3
Metabolic coma	2	2.7
Postanoxic coma	5	6.7
Toxic coma	0	0.0
Missing or not evaluable	100	
Renal failure (AKIN)	N	%
None	101	57.7
Mild	22	12.6
Moderate	27	15.4
Severe	25	14.3
Missing	0	
Metabolic failure	N	%
None	104	59.4
pH <= 7.3, PaCO2 < 45 mmHg	13	7.4
Base deficit >= 5 mmol/L, lactate >1.5x	58	33.1
Missing	0	
9	-	

Characteristics on admission - Adult emergency surgical patients evaluated in the GiViTI model

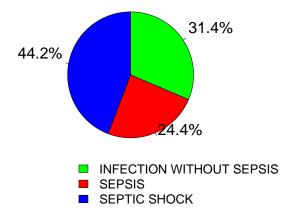
Respiratory	linical conditions on admission	N	%
Mild ARDS 5 2.9 Acute exacerbation of COPD 3 1.7 Pleural effusion 2 1.1 Aspiration pneumonia 2 1.1 Severe ARDS 2 1.1 Cardiovascular 35 20.0 Left heart failure without pulm. edema 16 9.1 Peripheral vascular disease 7 4.0 Cardiac arrest 4 2.3 Non-ruptured aneurysm 4 2.3 Left heart failure with pulmonary edema 3 1.7 Neurological 27 15.4 Cerebral Aneurysm 16 3.1 Spontaneous Subarachnoid haemorrhage 9 5.1 Intracranial hypertension 8 4.6 Spontaneous Hydrocephalus 5 2.9 Non traumatic cerebral oedema 5 2.9 Non traumatic cerebral oedema 5 2.9 Gastrointestinal and hepatic 51 29.1 Gastrointestinal bleeding: upper tract 9 5.1 Intestinal occlusion 9 5.1 Gastrointestinal districts 41 23.4 Head 26 14.9 Pelvis/bone/joint & muscle 13 7.4 Chest 9 5.1 Abdomen 5 2.9 Abdomen 5 2.9 Major vessels injury 2 1.1 Other 25 14.3 Nephrourologic disease 9 5.1 Nephrourologic disease 9 5.1 Coagulation disorder 5 2.9 Metabolic disorder 4 2.3 Orthopaedic disease 2 1.1 Post transplantation 0 0.0 Infections 86 49.1			
Acute exacerbation of COPD 3 1.7			
Pleural effusion			
Aspiration pneumonia 2 1.1 Severe ARDS 2 1.1 Cardiovascular 35 20.0 Left heart failure without pulm. edema 16 9.1 Peripheral vascular disease 7 4.0 Cardiac arrest 4 2.3 Non-ruptured aneurysm 4 2.3 Left heart failure with pulmonary edema 3 1.7 Neurological 27 15.4 Cerebral Aneurysm 11 6.3 Spontaneous Subarachnoid haemorrhage 9 5.1 Intracranial hypertension 8 4.6 Spontaneous Hydrocephalus 5 2.9 Rastrointestinal and hepatic 51 29.1 Gastrointestinal perforation 16 9.1 Gastrointestinal bleeding: upper tract 9 5.1 Intestinal occlusion 9 5.1 Paralytic lleus 5 2.9 Anastomotic dehiscence 4 2.3 Felvis/bone/joint & muscle 13 7.4 Chest 9 5.1 Abdomen 5 2.9 Spine 4 2.3 Major vessels injury 2 1.1 Coagulation disorder 5 2.9 Metabolic disease 9 5.1 Coagulation disorder 5 2.9 Metabolic disease 2 1.1 Onther 25 14.5 Other disease 2 1.1 Post transplantation 0 0.0 Infections 86 49.1			
Severe ARDS 2			
Cardiovascular 35 20.0 Left heart failure without pulm. edema 16 9.1 Peripheral vascular disease 7 4.0 Cardiac arrest 4 2.3 Non-ruptured aneurysm 4 2.3 Left heart failure with pulmonary edema 3 1.7 Neurological 27 15.4 Cerebral Aneurysm 11 6.3 Spontaneous Subarachnoid haemorrhage 9 5.1 Intracranial hypertension 8 4.6 Spontaneous Hydrocephalus 5 2.9 Non traumatic cerebral oedema 5 2.9 Gastrointestinal and hepatic 51 29.1 Gastrointestinal perforation 16 9.1 Head 16 9.1			
Left heart failure without pulm. edema 16 9.1 Peripheral vascular disease 7 4.0 Cardiac arrest 4 2.3 Non-ruptured aneurysm 4 2.3 Left heart failure with pulmonary edema 3 1.7 Neurological 27 15.4 Cerebral Aneurysm 11 6.3 Spontaneous Subarachnoid haemorrhage 9 5.1 Intracranial hypertension 8 4.6 Spontaneous Hydrocephalus 5 2.9 Non traumatic cerebral oedema 5 2.9 Gastrointestinal and hepatic 51 29.1 Gastrointestinal perforation 16 9.1 Gastrointestinal bleeding: upper tract 9 5.1 Intestinal occlusion 9 5.1 Paralytic lleus 5 2.9 Anastomotic dehiscence 4 2.3 Felvis/bone/joint & muscle 13 7.4 Chest 9 5.1 Abdomen 5 2.9 Spine 4 2.3 Major vessels injury 2 1.1 0 0.0 Other 25 14.5 Nephrourologic disease 9 5.1 Coagulation disorder 5 2.9 Metabolic disorder 4 2.3 Orthopaedic disease 2 1.1 Other disease 2 1.1 Post transplantation 0 0.0 Infections 86 49.1			
Peripheral vascular disease			
Cardiac arrest 4 2.3 Non-ruptured aneurysm 4 2.3 Left heart failure with pulmonary edema 3 1.7 Neurological 27 15.4 Cerebral Aneurysm 11 6.3 Spontaneous Subarachnoid haemorrhage 9 5.1 Intracranial hypertension 8 4.6 Spontaneous Hydrocephalus 5 2.9 Non traumatic cerebral oedema 5 2.9 Gastrointestinal and hepatic 51 29.1 Gastrointestinal perforation 16 9.1 Gastrointestinal bleeding: upper tract 9 5.1 Intestinal occlusion 9 5.1 Intestinal occlusion 9 5.1 Paralytic lleus 5 2.9 Anastomotic dehiscence 4 2.3 Trauma (anatomical districts) 41 23.4 Head 26 14.5 Pelvis/bone/joint & muscle 13 7.4 Chest 9 5.1 Abdomen 5 2.9 Spine 4 2.3 Major vessels injury 2 1.1 - 0 0.0 Other 25 14.3 Nephrourologic disease 9 5.1 Coagulation disorder 5 2.9 Metabolic disorder 4 2.3 Orthopaedic disease 2 1.1 Post transplantation 0 0.0 Infections 86 49.5	•		
Non-ruptured aneurysm	•		
Left heart failure with pulmonary edema			
Neurological 27 15.4	·		
Cerebral Aneurysm			
Spontaneous Subarachnoid haemorrhage 9 5.1 Intracranial hypertension 8 4.6 Spontaneous Hydrocephalus 5 2.9 Non traumatic cerebral oedema 5 2.9 Gastrointestinal and hepatic 51 29.1 Gastrointestinal perforation 16 9.1 Gastrointestinal bleeding: upper tract 9 5.1 Intestinal occlusion 9 5.1 Paralytic lleus 5 2.9 Anastomotic dehiscence 4 2.3 Trauma (anatomical districts) 41 23.4 Head 26 14.5 Pelvis/bone/joint & muscle 13 7.4 Chest 9 5.1 Abdomen 5 2.9 Spine 4 2.3 Major vessels injury 2 1.1 - 0 0.0 Other 25 14.5 Nephrourologic disease 9 5.1 Coagulation disorder 5 2.9 Metabolic disorder 4 2.3 Orthopaedic disease 2 1.1 Post transplantation 0 0.0 - 0 0.0 Infections 86 49.1			
Intracranial hypertension 8 4.6 Spontaneous Hydrocephalus 5 2.9 Non traumatic cerebral oedema 5 2.9 Gastrointestinal and hepatic 51 29.1 Gastrointestinal perforation 16 9.1 Gastrointestinal bleeding: upper tract 9 5.1 Intestinal occlusion 9 5.1 Paralytic lleus 5 2.9 Anastomotic dehiscence 4 2.3 Trauma (anatomical districts) 41 23.4 Head 26 14.5 Pelvis/bone/joint & muscle 13 7.4 Chest 9 5.1 Abdomen 5 2.9 Spine 4 2.3 Major vessels injury 2 1.1 - 0 0.0 Other 25 14.5 Nephrourologic disease 9 5.1 Coagulation disorder 5 2.9 Metabolic disorder 4 2.3 Orthopaedic disease 2 1.1 Post transplantation 0 0.0 - 0 0.0 Infections 86 49.1	•		
Spontaneous Hydrocephalus 5 2.9 Non traumatic cerebral oedema 5 2.9 Gastrointestinal and hepatic 51 29.1 Gastrointestinal perforation 16 9.1 Gastrointestinal bleeding: upper tract 9 5.1 Intestinal occlusion 9 5.1 Paralytic lleus 5 2.9 Anastomotic dehiscence 4 2.3 Trauma (anatomical districts) 41 23.4 Head 26 14.5 Pelvis/bone/joint & muscle 13 7.4 Chest 9 5.1 Abdomen 5 2.9 Spine 4 2.3 Major vessels injury 2 1.1 - 0 0.0 Other 25 14.3 Nephrourologic disease 9 5.1 Coagulation disorder 5 2.9 Metabolic disorder 4 2.3 Orthopaedic disease 2 1.1 Other disease 2 1.1 Post transplantation 0 0.0 - 0 0.0 Infections 86 49.1			
Non traumatic cerebral oedema 5 2.9 Gastrointestinal and hepatic 51 29.1 Gastrointestinal perforation 16 9.1 Gastrointestinal bleeding: upper tract 9 5.1 Intestinal occlusion 9 5.1 Paralytic lleus 5 2.9 Anastomotic dehiscence 4 2.3 Trauma (anatomical districts) 41 23.4 Head 26 14.5 Pelvis/bone/joint & muscle 13 7.4 Chest 9 5.1 Abdomen 5 2.9 Spine 4 2.3 Major vessels injury 2 1.1 - 0 0.0 Other 25 14.3 Nephrourologic disease 9 5.1 Coagulation disorder 5 2.9 Metabolic disorder 4 2.3 Orthopaedic disease 2 1.1 Post transplantation 0 0.0 - 0 0.0 Infections 86 49.1			
Gastrointestinal and hepatic 51 29.1 Gastrointestinal perforation 16 9.1 Gastrointestinal bleeding: upper tract 9 5.1 Intestinal occlusion 9 5.1 Paralytic lleus 5 2.9 Anastomotic dehiscence 4 2.3 Trauma (anatomical districts) 41 23.4 Head 26 14.5 Pelvis/bone/joint & muscle 13 7.4 Chest 9 5.1 Abdomen 5 2.9 Spine 4 2.3 Major vessels injury 2 1.1 - 0 0.0 Other 25 14.3 Nephrourologic disease 9 5.1 Coagulation disorder 5 2.9 Metabolic disorder 4 2.3 Orthopaedic disease 2 1.1 Post transplantation 0 0.0 - 0 0.0 - 0 0.0 </td <td></td> <td></td> <td></td>			
Gastrointestinal perforation 16 9.1 Gastrointestinal bleeding: upper tract 9 5.1 Intestinal occlusion 9 5.1 Paralytic lleus 5 2.9 Anastomotic dehiscence 4 2.3 Trauma (anatomical districts) 41 23.4 Head 26 14.5 Pelvis/bone/joint & muscle 13 7.4 Chest 9 5.1 Abdomen 5 2.9 Spine 4 2.3 Major vessels injury 2 1.1 - 0 0.0 Other 25 14.3 Nephrourologic disease 9 5.1 Coagulation disorder 5 2.9 Metabolic disorder 4 2.3 Orthopaedic disease 2 1.1 Other disease 2 1.1 Post transplantation 0 0.0 - 0 0.0 Infections 86 49.1			
Gastrointestinal bleeding: upper tract 9 5.1 Intestinal occlusion 9 5.1 Paralytic lleus 5 2.9 Anastomotic dehiscence 4 2.3 Trauma (anatomical districts) 41 23.4 Head 26 14.5 Pelvis/bone/joint & muscle 13 7.4 Chest 9 5.1 Abdomen 5 2.9 Spine 4 2.3 Major vessels injury 2 1.1 - 0 0.0 Other 25 14.3 Nephrourologic disease 9 5.1 Coagulation disorder 5 2.9 Metabolic disorder 4 2.3 Orthopaedic disease 2 1.1 Post transplantation 0 0.0 - 0 0.0 Infections 86 49.1			
Intestinal occlusion 9 5.1 Paralytic Ileus 5 2.9 Anastomotic dehiscence 4 2.3 Trauma (anatomical districts) 41 23.4 Head 26 14.5 Pelvis/bone/joint & muscle 13 7.4 Chest 9 5.1 Abdomen 5 2.9 Spine 4 2.3 Major vessels injury 2 1.1 - 0 0.0 Other 25 14.3 Nephrourologic disease 9 5.1 Coagulation disorder 5 2.9 Metabolic disorder 4 2.3 Orthopaedic disease 2 1.1 Post transplantation 0 0.0 - 0 0.0 Infections 86 49.1	·		
Paralytic Ileus 5 2.9 Anastomotic dehiscence 4 2.3 Trauma (anatomical districts) 41 23.4 Head 26 14.5 Pelvis/bone/joint & muscle 13 7.4 Chest 9 5.1 Abdomen 5 2.9 Spine 4 2.3 Major vessels injury 2 1.1 - 0 0.0 Other 25 14.3 Nephrourologic disease 9 5.1 Coagulation disorder 5 2.9 Metabolic disorder 4 2.3 Orthopaedic disease 2 1.1 Other disease 2 1.1 Post transplantation 0 0.0 - 0 0.0 - 0 0.0 Infections 86 49.1			
Anastomotic dehiscence 4 2.3 Trauma (anatomical districts) 41 23.4 Head 26 14.9 Pelvis/bone/joint & muscle 13 7.4 Chest 9 5.1 Abdomen 5 2.9 Spine 4 2.3 Major vessels injury 2 1.1 - 0 0.0 Other 25 14.3 Nephrourologic disease 9 5.1 Coagulation disorder 5 2.9 Metabolic disorder 4 2.3 Orthopaedic disease 2 1.1 Other disease 2 1.1 Post transplantation 0 0.0 Infections 86 49.1			
Trauma (anatomical districts) 41 23.4 Head 26 14.9 Pelvis/bone/joint & muscle 13 7.4 Chest 9 5.1 Abdomen 5 2.9 Spine 4 2.3 Major vessels injury 2 1.1 - 0 0.0 Other 25 14.3 Nephrourologic disease 9 5.1 Coagulation disorder 5 2.9 Metabolic disorder 4 2.3 Orthopaedic disease 2 1.1 Other disease 2 1.1 Post transplantation 0 0.0 Infections 86 49.1	·		
Head 26			
Pelvis/bone/joint & muscle 13 7.4 Chest 9 5.1 Abdomen 5 2.9 Spine 4 2.3 Major vessels injury 2 1.1 - 0 0.0 Other 25 14.3 Nephrourologic disease 9 5.1 Coagulation disorder 5 2.9 Metabolic disorder 4 2.3 Orthopaedic disease 2 1.1 Other disease 2 1.1 Post transplantation 0 0.0 Infections 86 49.1			
Chest 9 5.1 Abdomen 5 2.9 Spine 4 2.3 Major vessels injury 2 1.1 - 0 0.0 Other 25 14.3 Nephrourologic disease 9 5.1 Coagulation disorder 5 2.9 Metabolic disorder 4 2.3 Orthopaedic disease 2 1.1 Other disease 2 1.1 Post transplantation 0 0.0 - 0 0.0 - 0 0.0 Infections 86 49.1			
Abdomen 5 2.9 Spine 4 2.3 Major vessels injury 2 1.1 - 0 0.0 Other 25 14.3 Nephrourologic disease 9 5.1 Coagulation disorder 5 2.9 Metabolic disorder 4 2.3 Orthopaedic disease 2 1.1 Other disease 2 1.1 Post transplantation 0 0.0 - 0 0.0 Infections 86 49.1			
Spine 4 2.3 Major vessels injury 2 1.1 - 0 0.0 Other 25 14.3 Nephrourologic disease 9 5.1 Coagulation disorder 5 2.9 Metabolic disorder 4 2.3 Orthopaedic disease 2 1.1 Other disease 2 1.1 Post transplantation 0 0.0 - 0 0.0 - 0 0.0 Infections 86 49.1			
Major vessels injury 2 1.1 - 0 0.0 Other 25 14.3 Nephrourologic disease 9 5.1 Coagulation disorder 5 2.9 Metabolic disorder 4 2.3 Orthopaedic disease 2 1.1 Other disease 2 1.1 Post transplantation 0 0.0 - 0 0.0 Infections 86 49.1			
- 0 0.0 Other 25 14.3 Nephrourologic disease 9 5.1 Coagulation disorder 5 2.9 Metabolic disorder 4 2.3 Orthopaedic disease 2 1.1 Other disease 2 1.1 Post transplantation 0 0.0 - 0 0.0 Infections 86 49.1	•		
Other 25 14.3 Nephrourologic disease 9 5.1 Coagulation disorder 5 2.9 Metabolic disorder 4 2.3 Orthopaedic disease 2 1.1 Other disease 2 1.1 Post transplantation 0 0.0 - 0 0.0 - 0 0.0 Infections 86 49.1	-	0	0.0
Nephrourologic disease 9 5.1 Coagulation disorder 5 2.9 Metabolic disorder 4 2.3 Orthopaedic disease 2 1.1 Other disease 2 1.1 Post transplantation 0 0.0 -	Other	25	14.3
Coagulation disorder 5 2.9 Metabolic disorder 4 2.3 Orthopaedic disease 2 1.1 Other disease 2 1.1 Post transplantation 0 0.0 - 0 0.0 Infections 86 49.1			
Metabolic disorder 4 2.3 Orthopaedic disease 2 1.1 Other disease 2 1.1 Post transplantation 0 0.0 - 0 0.0 - 0 0.0 Infections 86 49.1	•		
Orthopaedic disease 2 1.1 Other disease 2 1.1 Post transplantation 0 0.0 - 0 0.0 - 0 0.0 Infections 86 49.1			
Other disease 2 1.1 Post transplantation 0 0.0 - 0 0.0 - 0 0.0 Infections 86 49.1			
- 0 0.0 - 0 0.0 Infections 86 49.1	•		1.1
- 0 0.0 - 0 0.0 Infections 86 49.1			0.0
- 0 0.0 Infections 86 49.1			0.0
Infections 86 49.1	_		
	Infections		
	Pneumonia	21	12.0
Post-surgical peritonitis 17 9.7			
NON-surgical secondary peritonitis 12 6.9			
Primary peritonitis 10 5.7			
NON-surgical skin/soft tissue infection 9 5.1			
Cholecystitis/cholangitis 8 4.6			
Gastroenteritis 3 1.7			
NON-surg. gynecological inf. 3 1.7			
Post-surgical skin/soft tissue infection 3 1.7			1.7
L.R.T.I. other than pneumonia 2 1.1			1.1
Missing 0	Missing	0	

rauma (anatomical districts)	N	%
Head	26	14.9
Traumatic Subdural haematoma	15	8.6
Skull fracture	7	4.0
Extradural/epidural haematoma	5	2.9
Traumatic subarachnoid haemorrhage	5	2.9
Traumatic diffuse injury with oedema	4	2.3
Spine	4	2.3
Cervical injury, incomplete deficit	2	1.1
Vertebral fracture, without deficit	1	0.6
Dorsal injury, incomplete deficit	1	0.6
Chest	9	5.1
Traum. haemothorax/pneumothorax	6	3.4
Severe lung contusion/laceration	4	2.3
Diaphragmatic rupture	4	2.3
Abdomen	5	2.9
Bowel transection/perforation	3	1.7
Spleen: Massive rupture	2	1.1
Stomach: Rupture or perforation	1	0.6
Pelvis/bone/joint & muscle	13	7.4
Long bone fracture	12	6.9
Multiple fracture of the pelvis	3	1.7
Massive crush/amputation	1	0.6
Major vessels injury	2	1.1
Aorta: rupture/dissection	1	0.6
Proximal limbs vessels: transection	1	0.6
-	0	0.0
Miscellaneous	0	0.0
	0	0.0
_	0	0.0
Missing	0	
fection severity on admission	N	%
None	89	50.9
INFECTION WITHOUT SEPSIS	27	15.4

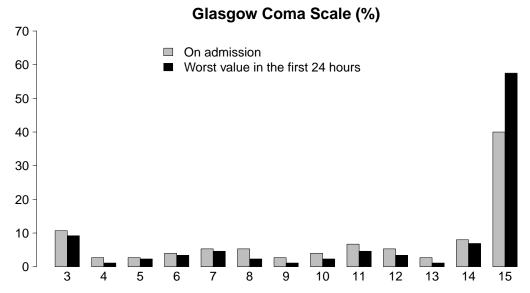
ection severity on admission	Ν	%
None	89	50.9
INFECTION WITHOUT SEPSIS	27	15.4
SEPSIS	21	12.0
SEPTIC SHOCK	38	21.7
Missing	0	

Infection severity on admission

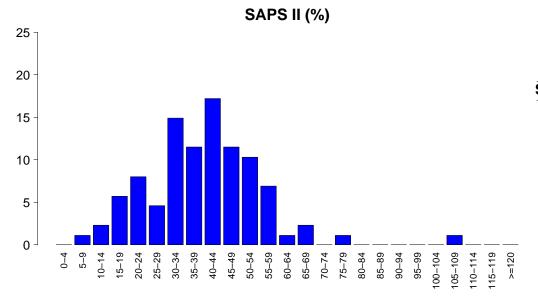
Patients infected (N=86)



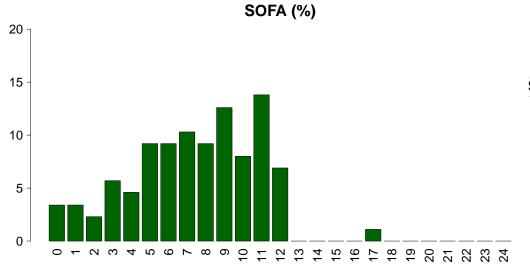
Severity scores - Adult emergency surgical patients evaluated in the GiViTI model



GCS (admission)	
Median	13
Q1-Q3	7.5 - 15
Not evaluable	100
Missing	0
GCS (first 24 hour	rs)
GCS (first 24 hour Median	r s) 15
Median	15
Median Q1-Q3	15 10–15



SAPSII		
	Mean	39.6
	SD	15.3
	Median	40
	Q1-Q3	30.5 - 48.5
Not ev	/aluable	88
	Missing	0



SOFA	
Mean	7.4
SD	3.4
Median	8
Q1-Q3	5 - 10
Not evaluable	88
Missing	0

National report for general ICUs - Year 2018 Characteristics during the stay - Adult emergency surgical patients evaluated in the GiViTI model

Complications during the stay	N	%	Renal failure occured (AKIN)	N	%
No	76	43.4	None	157	89.7
Yes	99	56.6	Mild	1	0.6
Missing	0		Moderate	7	4.0
			Severe	10	5.7
Failures during the stay	N	%	Missing	0	
No	145	82.9			
Yes	30	17.1	Complications during the stay	N	%
A: Respiratory failure	11	6.3	Respiratory	10	5.7
B: Cardiovascular failure	7	4.0	Pleural effusion	4	2.3
C: Neurological failure	1	0.6	Moderate ARDS	2	1.1
D: Hepatic failure	1	0.6	Severe ARDS	2	1.1
E: Renal failure (AKIN)	18	10.3	Mild ARDS	1	0.6
F: Acute skin failure	2	1.1	Pulmonary embolism	1	0.6
G: Metabolic failure	4	2.3	Cardiovascular	35	20.
H: Coagulation failure	0	0.0	Cardiac arrest	17	9.7
Missing	0		Left heart failure w/o pulm. edema	10	5.7 5.7
_			Acute severe arrhythmia: tachycardias	5	2.9
Failures during the stay (top 10)	Ν	%	•	4	2.3
E	10	5.7	Pulmonary edema	3	1.7
A	4	2.3	Right heart failure		
AB	3	1.7	Neurological	34	19.4
AE	3	1.7	Intracranial hypertension	21	12.0
G	3	1.7	Brain edema	19	10.
ABCE	1	0.6	Drowsiness/agitation/delirium	5	2.9
В	1	0.6	Haemorrhagic transformation (stroke)	5	2.9
BE	1	0.6	Hydrocephalus	3	1.7
BEF	1	0.6	Gastrointestinal and hepatic	20	11.4
D	1	0.6	Gastrointestinal bleeding: upper tract	7	4.0
Missing	0		Anastomotic dehiscence	6	3.4
G			Bowel ischaemia	2	1.1
Respiratory failure occured	N	%	Gastrointestinal bleeding: lower tract	2	1.1
None	164	93.7	Gastrointestinal perforation	2	1.1
Intubation for airway maint.	2	1.1	Other	15	8.6
Hypoxic failure	9	5.1	Nephrourologic disease	6	3.4
Hypercapnic failure	3	1.7	Metabolic disorder	4	2.3
Missing	0		Extremity compartment syndrome (severe)	2	1.1
			Other disease	2	1.1
Cardiovascular failure occured	N	%	Other skin and/or soft tissue pathology	2	1.1
None	168	96.0	Category/Stage IV: Full Thickness Tissue Loss	1	0.6
Cardiogenic shock	1	0.6	HELLP syndrome	1	0.6
Hypovolemic shock	1	0.6	Infections	39	22.
Haemorrhagic/hypovolemic shock	1	0.6	Pneumonia	14	8.0
Septic shock	3	1.7	NON-surgical urinary tract infection	8	4.6
Anaphylactic shock	0	0.0	Clinical sepsis	4	2.3
Neurogenic shock	0	0.0	Post-surgical peritonitis	4	2.3
Other shock	1	0.6	Post-surgical skin/soft tissue infection	4	2.3
Missing	0	-	L.R.T.I. other than pneumonia	3	1.7
5511.9	-		Primary bacteraemia of unknown origin	2	1.1
Neurological failure occured	N	%	Post-surgical bone and joint infection	1	0.6
None	174	99.4	Burn infection	1	0.6
Cerebral coma	0	0.0	Catheter-related bacteremia (CR-BSI)	1	0.6
Metabolic coma	0	0.0	Missing	0	
Postanoxic coma	1	0.6	ivii35iiig	J	
Missing	0	=			

Characteristics during the stay - Adult emergency surgical patients evaluated in the GiViTI model

Infections	N	%	Maximum severity of infection	N	%
None	63	36.0	None	63	36.4
Only on admission	73	41.7	INFECTION WITHOUT SEPSIS	31	17.9
On admission and during ICU stay	13	7.4	SEPSIS	38	22.0
Only during ICU stay	26	14.9	SEPTIC SHOCK	41	23.7
Missing	0		Missing	2	

Seve	rity evolution	During the stay						
	N (R %)	None	INFECTION WITHOUT SEPSIS	SEPSIS	SEPTIC SHOCK	тот		
_	None	63 (72.4%)	8 (9.2%)	15 (17.2%)	1 (1.1%)	87		
Admission	INFECTION WITHOUT SEPSIS	-	23 (85.2%)	3 (11.1%)	1 (3.7%)	27		
Adn	SEPSIS	-	-	20 (95.2%)	1 (4.8%)	21		
	SEPTIC SHOCK	-	-	-	38 (100.0%)	38		
	ТОТ	63	31	38	41	173		

Ventil. Associat. Pneumonia (VAP)	N	%	Catheter Bacteraemia (CR-BSI)	N	%
No	162	92.6	No	174	99.4
Yes	13	7.4	Yes	1	0.6
Missing	0		Missing	0	
Incidence of VAP			Incidence of CR-BSI		
(Pts. with VAP/1000 days of VM pre-VAP)			(Pts. with CR-BSI/1000 days of CVC pre-CR-BS	SI)	
Estimate	1:	3.1	Estimate	C).7
CI (95%)	7.0-	-22.4	CI (95%)	0.0	-3.7
Incidence of VAP			Incidence of CR-BSI		
(Pts. with VAP/pts. ventilated for 8 days)			(Pts. with CR-BSI/pts. catheterized for 12 days)		
Estimate	10	.5%	Estimate	0.	8%
CI (95%)	5.6-	-17.9	CI (95%)	0.0	-4.4

Year 2018	
general ICUs -	
ā	
ē	
gen	
ρ	
Ĭ	
ebo	
_	
National report for o	

Process indicators - Adult emergency surgical patients evaluated	patients	ts evaluate		in the GiViTI model	del) (I) (I+000)		2		9
Procedures and/or treatments (Missing-0)	2	% Do	2 2	SSIU %	Oll discrining	ilalye %	Median	Lengin (days)	Missing	Median	Days II OII I adi IIIssion Iian 01-03 Mis	Missing
Procedures (antibiotics excluded)	175	100.0	2	2	:	2	5	3		5	3	
Invasive ventilation	161	92.0	130	74.3	25	14.3	က	1-10	0	0	0-0	0
Non invasive ventilation	တ	5.1	7	- -	-	9.0	7	1–3	0	-	0-2	0
Tracheostomy	24	13.7	0	0	<u>1</u>	7.4	∞	5-17	0	∞	7-10	0
iNO (inhaled nitric oxide)	0	0.0										
Central Venous Catheter	163	93.1	80	45.7	29	33.7	വ	2–13	0	0	0-0	0
PICC	-	9.0	0	0	0	0	0	0-0	0	0	0-0	0
Arterial Catheter	168	96.0	45	25.7	21	29.1	Ŋ	2–11	0	0	0-0	0
Vasoactive drugs	155	9.88	102	58.3	4	23.4	4	1-9	0	0	0-0	0
Antiarrhythmics	37	21.1	12	6.9	12	6.9	က	2-7	0	0	0-1	0
IABP	7	1.	7	1.1	_	9.0	4	3–6	0			
Invasive monitoring of C.O.	80	45.7	13	7.4	∞	4.6	7	2-12	0	0	0-0	0
Continous monitoring of ScVO2	0	0.0										
Temporary pacing	_	9.0	0	0	0	0	0	0-0	0	∞	8-8	0
Ventricular assistance	0	0.0										
DC-shock	9	3.4								_	1-7	0
CPR	14	8.0								-	0-4	0
Massive blood transfusion	4	2.3								0	0-2	0
ICP monitoring without CSF drainage	-	9.0	0	0	0	0	8	2-2	0	0	0-0	0
ICP monitoring with CSF drainage	0	0.0										
External ventricular drainage without ICP	0	0.0										
Haemofiltration	Ξ	6.3	_	9.0	_	9.0	4	2–9	0	0		0
Haemodialysis	21	12.0	2	2.9	4	2.3	∞	3–13	0	-	1–2	0
ECMO	-	9.0	-	9.0	0	0	9	9-9	0			
Hepatic clearance techniques	0	0.0										
Clearance techniques during sepsis	0	0.0										
IAP (intra-abdominal pressure)	-	9.0										
Hypothermia	0	0.0										
Enteral nutrition	83	47.4	7	4	22	12.6	9	2-12	0	.	0-2	0
Parenteral nutrition	108	61.7	တ	5.1	53	16.6	9	2-10	0	0	0-1	0
SUD (Topical, Topical and systemic)	35	18.3										
Patient restraint	o ·	0.0					•		•			
Peridural catheter	_	0.6	0	0	_	0.6	9	9-9	5	_)
Electrical cardioversion	က	1.7								Ψ	0-2	0
Vacuum therapy	7	1.1										
Antibiotics	156	89.1										
Antibiotic prophylaxis	48	27.4	21	12	16	9.1	2	1–3	0	0	0-0	0
Empirical antibiotic therapy	79	45.1	23	13.1	4	∞	7	2-4	0	0	0-0	0
Empirical antibiotic therapy in unconfirmed diagnosis	18	10.3	-	9.0	-	9.0	4	2–6	0	0	0-0	0
Targeted antibiotic therapy	29	33.7	7	4	81	10.3	7	4–12	0	က	2-7	0

Process indicators - Adult emergency surgical patients evaluated in the GiViTI model Length (days)

Due to pulmonary failure 123 76.4 For airway mainteinance 27 16.8 For airway mainteinance 27 16.8 13.6 20.6 6 2-12.5 0 0.0	- Addit officially								
For airway mainteinance	Invasive ventilation (N=161)	N	%	Mean	SD	Median			Missing
Not evaluable 4 2.5 3.0 5.4 0.5 0.0 0.5 0	• • •								
Not evaluable 4 2.5 3.0 5.4 0.5 0-3.5 0 0.0	•								
Non invasive ventilation (N=9)	•								
Number of surgical interventions N				3.0	5.4	0.5	0-3	3.5	0
Non invasive ventilation only	Reintubation within 48 hours	0	0.0						
Non invasive ventilation failed 1	Non invasive ventilation (N=9)	N	%	Number	of surgical	l intervention	ons	N	%
For weaning	Non invasive ventilation only	4	44.4				0	154	88.0
Cher Missing	Non invasive ventilation failed	1	11.1				1	15	8.6
Tracheostomy not present on admission (N=24)	For weaning	2	22.2				2	5	2.9
Tracheostomy not present on admission (N=24)	Other	2	22.2				3	1	0.6
Surgical	Missing	0					>3		0.0
Surgical Surgical 2 8.3 Perculwist 0 0.0 Ciaglia 0 0.0 Monodil. Ciaglia 0 0.0 Fantoni 0 0.0 Griggs 18 75.0 Other Kind 1 4.2 Unknown 3 12.5 Missing 0 Unknown 10 10.5 Unknown 10	Tracheostomy not present on	N	%			M	lissing	0	
Surgical 2 8.3 Percutwist 0 0.0 Clagifia 0 0.0 0.0 SD 8.7 SD SD SD SD SD SD SD S		.,	70	Surgical	interventio	ons			
Percutwist O O O O O O O O O		2	8.3						
No. Signature	_						Mean		8.6
Monodil. Claglia 0 0.0 0.0 Grantoni 0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.									
Fantoni	_					N			
Missing 1	-								
Cither Kind Missing								· ·	
Unknown Missing 12.5 Missing 0 12.5 Gastroitestinal surgery 3 1.7 Tracheostomy - Days after the beginning of inv. vent. Not present on admission (N=24)									
Missing Name				Surgical		• •			
Tracheostomy - Days after the beginning of inv. vent. Not present on admission (N=24) Orthopaedic surgery 3 1.7 Neurosurgery 3 1.7 Neurosurgery 3 1.7 Neurosurgery 2 1.1 Neurosurgery 3 1.7 Neurosurgery 3 1.7 Neurosurgery 2 1.1 Neurosurgery 2 1.1 Neurosurgery 2 1.1 Neurosurgery 3 1.7 Neurosurgery 3 1.7 Neurosurgery 2 1.1 Neurosurgery 2 1.1 Neurosurgery 2 1.1 Neurosurgery 3 1.7 Neurosurgery 3 1.7 Neurosurgery 3 1.7 Neurosurgery 2 1.1					G				
Not present on admission (N=24)						•			
Mean SD 6.0 Nedian 8.9 Organ donation 2 1.1	, ,	ning of	r inv. vent.						
SD 6.0 Median 8.5									
Median Q1 - Q3 6.8 - 10.2						Organ d	lonation		
Non surgical interventions Non surgical i							-		
Missing N N N N N N N N N							-		
Invasive monitoring of C.O. (N=80)		6.8					-		
Swan Ganz 3 3.8 Nissing 0	Missing		0				-		
PICCO 10 12.5	Invasive monitoring of C.O. (N=80)	N	%				-		0.0
LIDCO 47 58.8 No 167 95.4	Swan Ganz	3	3.8				Missing	0	
Vigileo-PRAM 7 8.8 Yes 8 4.6	PICCO	10	12.5	Non surg	gical interv	entions		N	%
Vigileo-PRAM 7 8.8 New Yes 8 4.6	LIDCO	47	58.8				No	167	
Non surgical interventions N Missing O	Vigileo-PRAM	7	8.8				Yes		
SDD (N=32) Topical 22 68.8 Topical and systemic 10 31.2 Missing 0 Antibiotic therapy Pt. infected in ICU only (N=26) Only targeted 6 24.0 Targeted after empirical 9 36.0 Other 6 24.0 Missing 1 Surgical interventions N % No 154 88.0 Yes 21 12.0 Non surgical interventions Days from admission Mean 7.4 SD 6.1 Median 7 Q1-Q3 2-8 Missing 0 Non surgical interventions Nean 7.4 No 1.4 SD 6.1 Median 7 Q1-Q3 2-8 Missing 0 Non surgical interventions Nean 7.4 Nean 9 Nean 7.4 Nean 9 Nean 7.4 Nean 9 Nean 7.4 Nean 9 Neal 9 Nean 9	Other	13	16.2			N	lissing		
Topical 22 68.8 Topical and systemic 10 31.2 SD 6.1 Median 7	Missing	0		Non our	vical interv	·ontions			
Topical 22 68.8	SDD (N=32)	N		•	•				
Topical and systemic 10 Missing 0 Missing 0 Median 7 Antibiotic therapy Pt. infected in ICU only (N=26) N % Only empirical 4 16.0 Only targeted 6 24.0 Targeted after empirical 9 36.0 Other 6 24.0 Missing 1 Mon surgical interventional endoscopy 9 5.1 Interventional radiology 0 0.0 Interventional cardiology 0 0.0 Interventional cardiology 0 0.0 Surgical interventional neuroradiology 0 0.0 Missing 0 Surgical interventions N % No 154 88.0 Yes 21 12.0				Days	irom admis	SSION	Maan		7 /
Missing 0 Antibiotic therapy Pt. infected in ICU only (N=26) N % Only empirical 4 16.0 Only targeted 6 24.0 Targeted after empirical 9 36.0 Other 6 24.0 Missing 1 Surgical interventions N % Surgical interventions N % Interventional radiology 0 0.0 Interventional cardiology 0 0.0 Interventional neuroradiology 0 0.0	•								
Antibiotic therapy Pt. infected in ICU only (N=26) Only empirical Only targeted 6 24.0 Targeted after empirical Other 6 24.0 Missing 1 Other 6 24.0 Missing 1 Surgical interventions N Missing 0 No 154 88.0 Yes 21 12.0	,		0=						
Pt. infected in ICU only (N=26) N % Only empirical 4 16.0 Only targeted 6 24.0 Targeted after empirical 9 36.0 Other 6 24.0 Missing 1 Interventional radiology 0 0.0 Interventional cardiology 0 0.0 Interventional cardiology 0 0.0 Interventional neuroradiology 0 0.0 Interventional neuroradiology 0 0.0 Interventional neuroradiology 0 0.0 Interventional neuroradiology 0 0.0 Missing 0									
Only empirical 4 16.0 Only targeted 6 24.0 Targeted after empirical 9 36.0 Other 6 24.0 Missing 1 Interventional radiology 0 0.0 Missing 1 Interventional neuroradiology 0 0.0 Surgical interventions N % No 154 88.0 Yes 21 12.0	• •		~					•	
Only targeted 6 24.0 Targeted after empirical 9 36.0 Other 6 24.0 Missing 1 Interventional endoscopy 9 5.1 Interventional radiology 0 0.0 Interventional cardiology 0 0.0 Interventional neuroradiology 0 0.0 Interventional neuroradiology 0 0.0 Missing 0 Missing 0						IV	lissing		U
Targeted after empirical 9 36.0 Interventional radiology 0 0.0 Other 6 24.0 Interventional cardiology 0 0.0 Interventional cardiology 0 0.0 Interventional neuroradiology 0 0.0 Interventional neuroradiology 0 0.0 Interventional neuroradiology 0 0.0 Missing 0 Ves 21 12.0				Non sur	gical interv	entions/		Ν	%
Other Missing 6 Missing 24.0 Interventional cardiology 0 0.0 Surgical interventions N % Missing 0 No 154 88.0 Missing 0 Yes 21 12.0 12.0					Inte	erventional end	doscopy	9	5.1
Other Missing 6 Missing 24.0 Interventional cardiology 0 0.0 Interventional neuroradiology 0 0.0 O.0 Interventional neuroradiology Surgical interventions N % Missing 0 No 154 88.0 Yes 21 12.0 12.0 Missing 0					Ir	nterventional ra	adiology	0	0.0
Missing 1 Interventional neuroradiology 0 0.0 Surgical interventions N % Missing 0 No 154 88.0 88.0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			24.0						
No 154 88.0 Yes 21 12.0	Missing	1			Interve	ntional neurora	adiology	0	0.0
No 154 88.0 Yes 21 12.0	Surgical interventions	N	%				Missing	0	
Yes 21 12.0		154	88.0						
	Missing	0							

Outcome indicators - Adult emergency surgical patients evaluated in the GiViTI model

ICU outcome	N	%
Dead	74	42.3
Transferred to same hospital	74	42.3
Transferred to other hospital	22	12.6
Discharged home	5	2.9
Disch. terminally ill	0	0.0
Missing	0	
Transferred to (N=96)	N	%
Ward	90	93.8
Other ICU	5	5.2
High dependency care unit	1	1.0
Rehabilitation	0	0.0
Day hospital or Long-term care	0	0.0
Missing	0	
Reason of transfer to		
Other ICU (N=5)	N	%
Specialist expertise	2	40.0
Step-up care	3	60.0
Logistical/organizational reasons	0	0.0
Step-down care	0	0.0
Missing	0	
Transferred to		
Same hospital (N=74)	N	%
Ward	74	100.0
Other ICU	0	0.0
High dependency care unit	0	0.0
Rehabilitation	0	0.0
Day hospital or Long-term care	0	0.0
Missing	0	
Transferred to		
Other hospital (N=22)	N	<u>%</u>
Ward	16	72.7
Other ICU	5	22.7
High dependency care unit	1	4.5
Rehabilitation	0	0.0
Day hospital or Long-term care	0	0.0
Missing	0	
CU mortality	N	%
Alive	101	57.7
Dead	74	42.3
Missing	0	
Timing of ICU mortality (N=74)	N	%
Daytime (08:00AM - 07:59PM)	37	50.0
	37	50.0
Nighttime (08:00PM - 07:59AM)	_	
,	55	74.3
Nighttime (08:00PM - 07:59AM)		74.3 25.7
Nighttime (08:00PM - 07:59AM) Weekdays (Monday - Friday)	55	

Hospital mortality	N	%
Alive	93	53.1
Dead	82	46.9
Missing	0	
Timing of hosp. mortality (N=82)	N	%
In ICU	74	90.2
Within 24 hours after ICU	0	0.0
24-47 hours after ICU	1	1.2
48-71 hours after ICU	1	1.2
72-95 hours after ICU	0	0.0
After 95 hours after ICU	6	7.3
Missing	0	

Timing of hosp. mortality (days from ICU disch.) Discharged alive from ICU (N=8) Mean 15.9 SD 13.8 Median 15 Q1-Q3 3.5-23 Missing 0

Outcome indicators - Adult emergency surgical patients evaluated in the GiViTI model

Last hospital mortality		N	%	ICU stay (days)		
	Alive	92	52.6		Mean	9.0
	Dead	83	47.4		SD	11.7
	Missing	0			Median	5
					Q1-Q3	2–12
					Missing	0
				ICU stay (days)		
				Alive (N=101)	Mean	9.2
					SD	11.0
					Median	5
					Q1-Q3	2–12
					Missing	0
				ICU stay (days)		
				Dead (N=74)	Mana	0.0
					Mean SD	8.8
					Median	12.7 4
					Q1–Q3	1–12
					Missing	0
					eeg	ŭ
				Stay after ICU (days) Alive (N=101)		
					Mean	10.1
					SD	14.1
					Median	6
					Q1-Q3 Missing	0-14 0
					iviissirig	U
				Hospital stay (days)		
					Mean	18.2
					SD	19.7
					Median	13
					Q1-Q3	6-22 0
					Missing	U
				Hospital stay (days) Alive (N=93)		
				· · · · · · · · · · · · · · · · · · ·	Mean	21.4
					SD	21.0
					Median	17
					Q1-Q3	8–27
					Missing	0
				Hospital stay (days) Dead (N=82)		
					Mean	14.5
					SD	17.4
					Median	9.5
					Q1-Q3	4-18
					Missing	0

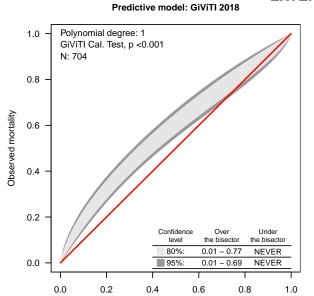
National report for general ICUs - Year 2018 Validity of the models - Calibration belts

The calibration belt is designed to compare actually observed mortality with expected mortality according to a given prediction model. Expected mortality is plotted on the x axis while observed mortality is plotted on the y-axis. Two overlapping belts are presented in each graph: the first, in light grey, with a confidence level of 80%, and the second, in dark grey, with a confidence level of 95%. The belt lying above the bisector indicates that observed mortality is higher than expected mortality; vice versa, the belt lying below the bisector indicates that observed mortality is lower than expected mortality. The belt is plotted in the range of expected mortality values actually present in the sample under study. The higher the polynomial, the more complex the relationship between expected and observed mortality. A significant test (p<0.05) indicates poor calibration.

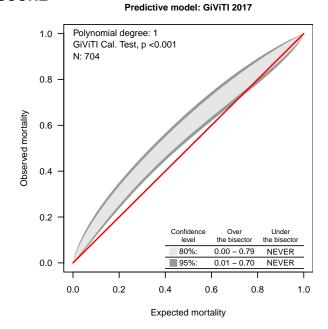
These pages show the calibration belts built on 2018 data using PIM 2, PIM 3, PELOD, SAPSII, GiViTI 2017 and GiViTI 2018 prognostic models. For further informations please look at [PLoS ONE 6(2): e16110].

National report for general ICUs - Year 2018 Validity of the models - Calibration belts

EXTERNAL SCORE



Expected mortality



Appendix

Coauthors

DUDA IZABELA (KATOWICE), KAPIAS MACIEJ (CIESZYN), MIZAK WIKTORIA (LIPSKO), PIASECKA EWELINA (POZNAN), REKAS ANNA (LUBLIN), SULKOWSKI WIKTOR (OSTRÓW MAZOWIECKA), SWIDER MAGDALENA (RZESZÓW), TREJNOWSKA EWA (ZABRZE).

Coauthors

89