

Daily Data

The study day and date will automatically appear on the screen.

Study Day 1 is from ICU admission to the end of your 24 hr flow sheet.
Study Day 2 and subsequent days are the 24 hr period according to your flow sheet.

All daily data should be collected from study day 1 and each day following until day 30 unless ICU discharge (actual) or death occurs before day 30 (except blood sugars, see below).

Use the following rules:

Variable	Description
Heart rate (HR)	Record highest HR.
Blood Pressure (BP)	Record the lowest systolic BP and the corresponding diastolic pressure.
Temperature (Temp)	Units = °C Record the most aberrant temperature recorded from midline 37.0 °C, not the highest. This means the temperature that deviates either above or below the midline the most. Rectal, tympanic, temporal, and bladder temperatures are considered as core temperatures. <u>For manual calculations:</u> To obtain the core temperature: if oral temperature is reported, add 0.5 °C to oral temperature; if axilla temperature is reported, add 1.0 °C.
Urine Output (U/O)	Units = mL Record total volume in 24 hours using the drop-down menu. <ul style="list-style-type: none"> • 0-199 mL/day • 200-499 mL/day • ≥ 500 mL/day <p>For study day 1, record the volume from ICU admission until the end of your 24 hr flow sheet.</p>
Dialysis	Record if the patient received any type of dialysis, Yes or No. If 'yes', on the first day, you will be prompted to answer the question, "Did dialysis start due to acute renal failure?" Yes or No.
Respiratory rate (RR)	Record highest RR, either mechanical/spontaneous or both.
Mechanically Ventilated	Yes or No. Select 'yes' if patient was mechanically ventilated at any point during the course of the study day.
PF ratio (PaO ₂ /FiO ₂) worst	From the patient's arterial blood gases (ABGs), record the <u>worst</u> P/F ratio <i>regardless of ventilation status</i> . Click on the See Table for help with determining the worst value.
†White Blood Count (WBC)	Units = x10 ⁹ /L Record the highest and lowest WBC. If there is only one value for the day, record this as both the highest and the lowest.
†Platelets	Units = x10 ⁹ /L Record the lowest platelets.

†Blood Sugar (BS)	<p>Units = mmol/L</p> <p>Record first blood sugar reading <u>closest to 08:00 hrs.</u> This can be either serum or capillary.</p> <p><i>**Daily data is collected for the 24 hr period according to your flow sheet. The exception to this requirement is blood sugar reading. We ask you to record the first blood sugar reading closest to 08:00. We would like to clarify that the reading can be 08:00 ± 6 hours. A reading between 02:00 and 14:00 is acceptable regardless of study day.</i></p>
†Creatinine (Cr)	<p>Units = µmol/L</p> <p>Record the highest creatinine.</p>
†Urea	<p>Units = mmol/L</p> <p>Record the highest urea.</p> <p><i>**For US sites, BUN should be converted to urea:</i></p> <ul style="list-style-type: none"> • BUN mg/dL → urea mmol/L multiply by 0.357 • BUN g/L → urea mmol/L multiply by 35.7
†Bilirubin (Bili)	<p>Units = µmol/L</p> <p>Record the highest total bilirubin.</p>
†Albumin	<p>Units = g/L</p> <p>Record the highest albumin.</p>
Gastric residual volume	<p>Units = mL</p> <p>Record total gastric residual volume (GRV) and the total volume of gastric residuals discarded.</p> <p>GRV discarded can be equal to but can never be greater than the total gastric residual volume (i.e. volume measured).</p> <p>GRV are to be recorded even if the patient is not being tube feed; but if they are <u>not</u> measured click 'N/A'.</p> <p>For NG drainage (to low gomco/drainage tube), do not record as gastric residual volumes. GRVs are recorded when you are actually aspirating and checking to see how much residual is left in the stomach. Emesis is not captured as GRV, please add as a comment.</p>
Location of feeding tube	<p>Pick one of the options from the drop down box to indicate the location of feeding tube (refers to any oro/naso-gastric or feeding tube):</p> <ul style="list-style-type: none"> • “Gastric confirmed” if placement was confirmed by an X-ray on <u>that</u> day • “Gastric presumed” if placement was confirmed by an X-ray earlier but <u>not</u> on that day • “Post-pyloric duodenal confirmed” if placement was confirmed by an X-ray on <u>that</u> day • “Post-pyloric duodenal presumed” if placement was confirmed by an X-ray earlier but <u>not</u> on that day • “Post-pyloric jejunal confirmed” if placement was confirmed by an X-Ray on <u>that</u> day • “Post-pyloric jejunal presumed” if placement was confirmed by an X-ray earlier but <u>not</u> on that day • No tube in place on that day <p><i>Remember that you are recording the location of the feeding tube (confirmed/presumed) rather than the type of feeding tube used.</i></p> <p>Record the location of the feeding tube according to the location of the tip of the tube. E.g. you may be using a small bowel feeding tube but the actual location of the tip of the tube may be coiled in the stomach and hence the location should be recorded as gastric.</p> <p>If the location of the feeding tube changes within the day, please choose the location that was used for the majority of the day. If gastric was used for half</p>

	the day and post-pyloric for the other half, choose post-pyloric.
Diarrhea	Indicate by choosing Yes or No if patient has diarrhea. Note: Definition of diarrhea is >5 bowel movements/day or >750ml/day.

† Refer to the Unit Conversions Calculator to convert results reported in units different than those outlined above. (Worksheet found at www.criticalcarenutrition.com > REDOXS© Study > Resources > Study Procedures Manual).

Click on '**save**' to save the form and return to the patient status page, or click on '**New Day**' to save the form and continue entering daily data for this patient for the next consecutive day.