

PICA



Net

PICANet Referral and Transport Dataset Definitions

Version 1 (October 2011)

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Introduction

Background

In collaboration with Allan Wardaugh at Cardiff PICU and the Paediatric Intensive Care Society (PICS)¹, PICANet has developed a referrals and transport dataset to supplement the present clinical database of paediatric intensive care activity. The extended dataset includes information about referral calls and associated retrieval or transfer activities, and will provide evidence on standards of service across PICU.

The dataset forms an integral part of **PICANet Web**, a secure, centralised database application accessed using a web browser. PICANet Web permits PICUs and centralised transport services to submit and interrogate referral, transport and admission details for their own patients regardless of their physical location.

Events

PICANet has introduced the term *event* to describe a single instance of paediatric intensive care activity, such as a referral, retrieval, transfer or admission. So referrals are **Referral events**, admissions are **Admission events**, while transfers and retrievals are collectively known as **Transport events**.

Organisations

We use the term *organisation* to represent any unit or service involved in the provision of paediatric intensive care (PIC). The key organisation types are **Paediatric Intensive Care Unit (PICU)**, **Centralised Transport Service (CTS)** and **District General Hospital (DGH)**, although the term also includes other locations from or to which PIC patients are retrieved or transferred, such as **airports** and **hospices**. Note that for our purposes, District General Hospital includes any non-PIC hospital ward or department.

Data collection method

The typical data collection process is as follows:

1. A **referral call is made** from a DGH/unit to a PICU/CTS requesting a PICU bed and/or transport within the PIC service
2. The **clinicians agree that a PICU bed and/or transport is necessary**
3. A **Referral form is completed** by the PICU/CTS taking the referral call. (Details are required for all PICANet-eligible referrals, whether or not the referral results in an admission.)
4. A **Transport form is completed** by the PICU/CTS providing transport. If the transport is by a team other than a PICU retrieval team (e.g. DGH), the Transport form is completed as far as possible by the admitting PICU
5. If the patient is accepted for retrieval or admission to a PICU, the **Admission form is completed** by the admitting PICU
6. PICU/CTS **enters or uploads to PICANet Web** the completed data collection forms

¹ PICANet's work is based on Allan Wardaugh's original document, **PROPOSAL FOR COLLECTING RETRIEVAL DATA BY PICANET** (available from www.picanet.org.uk) and includes the PICS's **STANDARDS FOR THE CARE OF CRITICALLY ILL CHILDREN (4TH EDITION) JUNE 2010** (see www.ukpics.org.uk).

Referral and Transport events and data collection forms

Referral form

Transport form (page 1 of 2)

Transport form (page 2 of 2)

The Referral form is titled 'PICANet Referral form' and includes a header with the PICANet logo and the text 'Please complete this form for all requests for transport within the PICU service and for all requests for a PICU admission when clinicians agree that a PICU bed is necessary'. It is divided into several sections: 'Patient details for hospital unit', 'Referral details (complete only when clinicians agree that a PICU bed is necessary)', and 'Comments'. The 'Patient details' section includes fields for family name, first name, address, postcode, and date of birth. The 'Referral details' section includes checkboxes for 'When patient receiving invasive ventilation at time of referral?' and 'Referring unit (from where patient will be transferred?)', along with a 'Grade of referring doctor or nurse' and 'Destination unit (or location)'. A contact information table is at the bottom.

The Transport form (page 1 of 2) is titled 'PICANet Transport form' and includes a header with the PICANet logo and the text 'Please complete this form for all requests for transport within the PICU service and for all requests for a PICU admission when clinicians agree that a PICU bed is necessary'. It is divided into several sections: 'Patient details for hospital unit', 'Transport details', 'Critical incidents', and 'Comments'. The 'Patient details' section includes fields for family name, first name, address, postcode, and date of birth. The 'Transport details' section includes checkboxes for 'Collection area' and 'Destination of this transport event', along with a 'Grade of clinical team leader' and 'Destination unit (or location)'. A contact information table is at the bottom.

The Transport form (page 2 of 2) is titled 'PICANet Transport form' and includes a header with the PICANet logo and the text 'Please complete this form for all requests for transport within the PICU service and for all requests for a PICU admission when clinicians agree that a PICU bed is necessary'. It is divided into several sections: 'Transport team', 'Patient journey', 'Destination unit to base', 'Patient history', 'Patient history', and 'Comments'. The 'Transport team' section includes checkboxes for 'Mode of transport' and 'Destination unit to base'. The 'Patient journey' section includes checkboxes for 'Active collection unit or location' and 'Active destination unit or location'. The 'Patient history' section includes checkboxes for 'Systolic blood pressure' and 'Respiratory status'. A contact information table is at the bottom.

Referral events

A PICANet Referral event should be completed for all requests for transport and all requests for a PICU admission **when clinicians agree that a paediatric intensive care bed is required**. An event should also be completed for other transport requests where the child will be **receiving intensive care during the journey**, e.g. transportation to a secondary transport service, hospice or home.

Referral data items include patient demographic information, basic details about the referring unit, whether the patient was receiving invasive ventilation, and the decision of the referral call. The dataset caters for scenarios appropriate to both PICUs and CTs (and PICUs acting as transport teams only).

Data on admissions refused for organisational reasons (lack of beds, staff etc) permits epidemiological analysis of service organisation and geographical variation.

Transport events

A PICANet Transport event is completed by the PICU team or CTS providing the transport for a retrieval or transfer. If the child is transported to PICU by another team (e.g. the referring DGH) the event is completed as far as possible by the admitting PICU.

Transport data items include patient demographic information, basic details about the transport team and collection unit, critical incidents during transit, transport times, interventions received by the patient both prior to the arrival of the transport team and while the transport team is in attendance (including PIM/PIM2), and the outcome of the transport event.

Responsibility for data collection

The following table illustrates, for a number of different scenarios, the responsibility for data collection of PICANet Referral, Transport and Admission events.

| Example scenario | Organisation role | | | Responsibility for completing event | | |
|--|-------------------|----------------|------------------|-------------------------------------|-----------------|-----------------|
| | Referring unit | Transport team | Destination unit | Referral event | Transport event | Admission event |
| Gloucester transfers to Cardiff PICU | DGH | DGH | PICU | PICU | PICU | PICU |
| Cardiff PICU retrieves from Gloucester | DGH | PICU | PICU | PICU | PICU | PICU |
| Bristol PICU retrieves from Gloucester to Cardiff PICU | DGH | PICU A | PICU B | PICU A + PICU B | PICU A | PICU B |
| CATS retrieves from Gloucester to GOSH | DGH | CTS | PICU | CTS + PICU | CTS | PICU |
| Bristol PICU retrieves from Gloucester to Frenchay ICU | DGH | PICU | Non-PIC† | PICU | PICU | - |
| CATS transports from Hillingdon to Heathrow airport | DGH | CTS | Non-PIC | CTS | CTS | - |
| Bristol PICU transfers to Cardiff PICU | PICU A | PICU A | PICU B | PICU B | PICU A | PICU B |
| Cardiff PICU retrieves from Bristol PICU | PICU A | PICU B | PICU B | PICU B | PICU B | PICU B |
| CATS transfers from GOSH to Cardiff PICU | PICU A | CTS | PICU B | CTS + PICU B | CTS | PICU B |
| Bristol PICU transfers to Frenchay ICU | PICU A | PICU A | Non-PIC | - | PICU A | - |
| Bristol PICU retrieves from Cardiff to Frenchay ICU | PICU A | PICU B | Non-PIC | PICU B | PICU B | - |
| CATS transfers from GOSH to Heathrow airport | PICU A | CTS | Non-PIC | CTS | CTS | - |

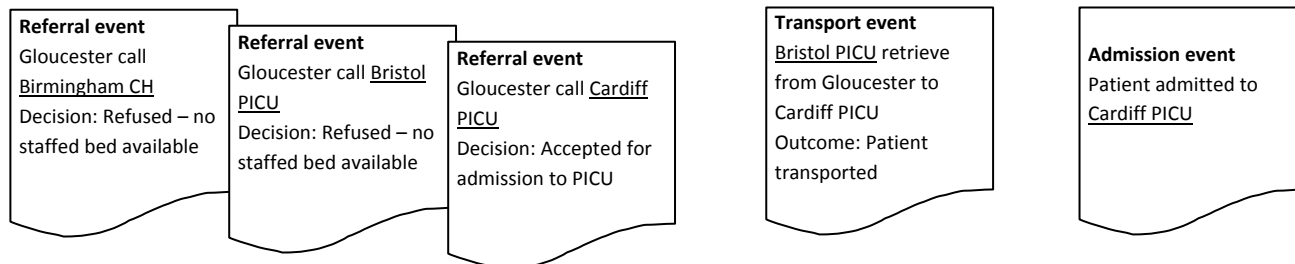
† Non-PIC includes ICUs, hospices, residential addresses and airports (for onward transport)

Worked example

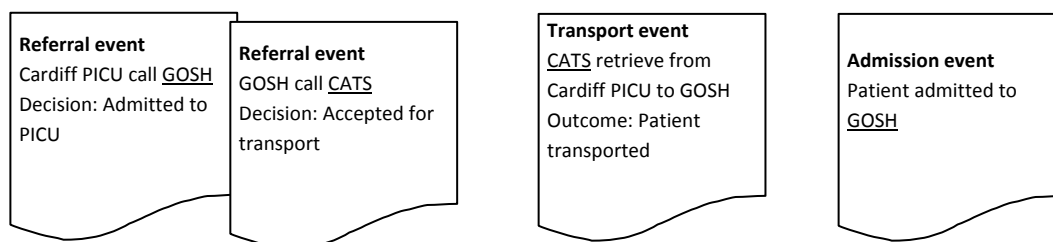
The illustrations below are based on a worked example from Allan Wardaugh's document, **PROPOSAL FOR COLLECTING RETRIEVAL DATA BY PICANET**. Each sequence shows the PICANet events relevant to each spell of activity; responsibility for data collection (and entry/upload to PICANet Web) is designated by underlined type.

Gareth Jones is a 2 month old with bronchiolitis admitted to Gloucester Royal Infirmary.

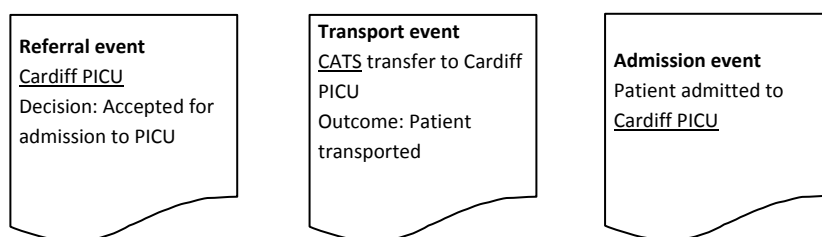
He deteriorates and requires intubation and ventilation. The consultant paediatrician refers him to Birmingham Children's Hospital; they are full. Bristol PICU are contacted; they are full, but could retrieve. Cardiff PICU is contacted, and accepts the patient, with the Bristol team retrieving:



On day 2 in Cardiff PICU he deteriorates further and is referred to GOSH for ECMO. They have a bed, and ask CATS to retrieve him:



He comes off ECMO and is referred back to Cardiff, still ventilated, on day 14. He is repatriated by CATS:



He is discharged from Cardiff on day 18 to his local hospital spontaneously ventilating.

In total, 5 different PICANet organisations contribute 12 separate events (6 referral; 3 transport; 3 admission) to the centralised database.

Referral dataset

Patient details

Family name or Surname

| | |
|-------------------|--|
| Definition | The last or family name or surname given to the child as it would appear on the child's birth certificate or other appropriate document. |
| Reason | Family name provides an additional identifier that can aid patient tracking throughout the hospital. Can help identify individuals who may have had multiple admissions to one or more PICUs. |
| Format | Free text (e.g. Brown). If no family name available record as UNKNOWN and indicate why not available in the comments section. |

First name

| | |
|-------------------|--|
| Definition | The first name given to the child as it would appear on the child's birth certificate or other appropriate document. |
| Reason | First name provides an additional identifier that can aid patient tracking throughout the hospital and PICANet DE. Can help identify individuals who may have had multiple referrals and /or admissions to one or more PICUs. |
| Format | Free text (e.g. John). If no first name available record as UNKNOWN and indicate why not available in the comments section. |

Postcode

| | |
|-------------------|---|
| Definition | The postcode for the child's normal place of residence. |
| Reason | Postcode provides an additional identifier that can aid patient tracking throughout the hospital. Can help identify individuals who may have had multiple admissions to one or more PICUs. Postcode provides a means of linkage to geographic and demographic information for effective audit and assessment of health services delivery. |
| Format | Text (e.g. S10 8NN). Foreign postcodes will be accepted by the software, although a warning will be generated in the case of non UK standard postcodes to ensure that the user checks the data. If postcode is unobtainable, record as UNKNOWN |

NHS or CHI number

| | |
|-------------------|---|
| Definition | Unique identifying number enabling tracing of a patient through the NHS system in England, Wales and Northern Ireland. For Scottish patients the CHI number is used as a unique numeric identifier. |
| Reason | NHS or CHI number gives a unique, identifiable variable that will allow other identifiable data items to be removed from the database. Can identify individuals who may have had multiple admissions to one or more PICUs. |
| Format | Free text (e.g. 1463788990). |

NHS number eligibility

| | |
|-------------------|---|
| Definition | The patient is not eligible for NHS or a CHI number, he or she is an overseas national who is not ordinarily a resident in the UK and therefore does not have an allocated NHS or CHI number. |
| Reason | To enable effective audit of availability of NHS number and assessment of health services delivery. |
| Format | Tick box ONLY if patient is not eligible for an NHS number |

Date of birth

| | |
|-------------------|---|
| Definition | The child's date of birth as recorded on the child's birth certificate or other appropriate document. |
| Reason | Date of birth and Date of admission are used to calculate age at admission to your unit. Date of birth provides an additional identifier that can aid patient tracking throughout the hospital and PICANet DE. Can help identify individuals who may have had multiple referrals and/or admissions to one or more PICUs. |
| Format | Date; dd/mm/yyyy. Date of birth should be between 01/01/1980 and Date of admission. If the child's date of birth is unobtainable, but the child is on your unit, use your judgement to estimate year of birth and record as 1 January of estimated year (e.g. 01/01/YYYY). If information is being extracted from notes and the child's date of birth is not recorded, or recorded as unavailable, leave the field blank and enter NK ('9') in the Date of birth estimated/missing field. If it is necessary for Date of birth to be partly anonymised, enter the correct month and year and record 01 for the day (e.g. 01/MM/YYYY). Then tick Anonymised in the Date of birth Estimated/Anonymised/Not known. |

Indicate if date of birth is...

| | |
|-------------------|--|
| Definition | Specifies whether the date of birth is not estimated, estimated, missing (and cannot be estimated) or partly anonymised. |
| Reason | Date of birth and Date of admission to your unit are used to calculate age at admission to your unit. |
| Format | Choose from one of the following: Not estimated Estimated Anonymised DOB not known (and cannot be estimated) |

Sex

| | |
|-------------------|--|
| Definition | Identifies the genotypical sex of the child at admission to your unit. |
| Reason | Sex is important for reporting demographic statistics for admissions to your unit. Sex provides an additional identifier that can aid patient tracking throughout the hospital. |
| Format | Choose from one of the following: Male Female Ambiguous Unknown |

Referral details

Date and time of referral call

| | |
|-------------------|--|
| Definition | The actual date and time that the referral was accepted when the clinicians agreed that a PICU bed was needed. This may not be the date of the first telephone call to the PICU or transport service as this may have been for advice or discussion only. |
| Reason | Date of the accepted referral call will be used to calculate the total number of referral calls for each individual patient. Accurate recording of date and time will allow analysis of organisational delays e.g. due to lack of availability of staffed beds or transport teams. To enable effective audit and assessment of health services delivery. |
| Format | Date: dd/mm/yyyy Time: hh:mm (24 hour clock) |

Referring Unit

| | |
|-------------------|---|
| Definition | Identifies the referring hospital, DGH or PICU where patient is located at the time of the referral call. |
| Reason | Required for effective audit and assessment of geographical distribution of referring population to individual units/transport services. |
| Format | Name of hospital and specialist unit or the DGH. Select the name of the PICU or DGH from the organisation coder. If the name is not available in the given list, but known select 'Other organisation' and enter the name in the 'Other' box, using free text. If the name of the organisation is not known select 'Unknown organisation'. |

Referring speciality

| | |
|-------------------|--|
| Definition | Specialty from which this request for admission is made. Record the parent speciality of the doctor who made this call resulting in a transfer. Examples: - A patient has elective surgery in a DGH; the operation is complicated and the anaesthetist decides the patient needs PICU for post-op recovery – code Anaesthetics. The transport team call the PICU to request a bed and arrange admission – code Paediatric Intensive Care Transport Service. |
| Reason | Describes the process by which patients are referred for effective audit and assessment of health services delivery. |
| Format | Choose from one of the following: General paediatrics Sub-specialty paediatrics Neonates PICU Anaesthetics General ITU Neurosurgery General surgery Accident and Emergency Burns and plastics ENT Paediatric Intensive Care Transport Service Other Unknown |

Grade of referring doctor/nurse

| | |
|-------------------|--|
| Definition | Most senior grade of doctor or nurse making the initial referral call. |
| Reason | Required for effective audit of service organisation and geographical variation. |
| Format | Choose from one of the following: Consultant/ Associate Specialist/Staff Grade ST 4-8 ST 1-3 F1/F2 GP Nurse Practitioner Nurse Unknown |

Invasive ventilation at time of referral call

| | |
|-------------------|--|
| Definition | Patient receiving invasive ventilation or in the process of being intubated at the time the referral is accepted. |
| Reason | Used to describe the different clinical 'thresholds' at which different services operate. An easily defined variable which discriminates those patients who require intensive care and those who may only require high dependency care. |
| Format | Choose from one of the following: Yes No – not indicated No – advised to intubate Unknown |

Decision of this referral call

| | |
|-------------------|--|
| Definition | <p>Final outcome of this event after it has been agreed that a patient requires a PICU bed.</p> <p>The purpose of this field is to collect data on admissions refused for organisational reasons (e.g. lack of beds, transport).</p> <p>In the circumstance where a PICU has no staffed bed available but can provide transport this should be recorded as 'Refused – no staffed bed available'. Add 'accepted for transport only' in comments box.</p> <p>Accepted for transport and/or admission to PICU –patient accepted for transport and/or admission to the named PICU accepting referral call</p> <p>Accepted for transport and/or admission to other ICU –patient accepted for transport and admission to other ICU (<i>e.g. burns, neuro, adult ICU</i>)- elsewhere</p> <p>Accepted for transport and/or admission to other destination –patient transported to destination not included above e.g. secondary transport service to continue journey at airport, hospice or normal place of residence.</p> <p>Refused-no staffed bed available-admission refused because no staffed bed available</p> <p>Refused- no transport team available- admission refused because a transport team was not available</p> <p>Refused-no staffed bed or transport team available- admission refused no staffed bed available and no transport team available</p> <p>Refused-time critical transfer- the referring DGH/unit are advised to expedite own transport due to the acute condition of patient</p> |
| Reason | To enable effective audit and assessment of health services delivery. |
| Format | Choose from one of the following: <ul style="list-style-type: none">Admitted to PICU taking this referral callAccepted for transport and/or admission to PICUAccepted for transport and/or admission to other ICUAccepted for transport and/or admission to other destinationRefused-no staffed bed availableRefused- no transport team availableRefused-no staffed bed nor transport team availableRefused-time critical transferUnknown |

Transport team

| | |
|-------------------|---|
| Definition | The name of the PICU or centralised transport service, other hospital or other specialised team undertaking this episode of transport. |
| Reason | To enable effective audit and assessment of health services delivery. |
| Format | Name of individual PICU, hospital, centralised or specialised transport service Select the name of the PICU, DGH or transport service from the organisation coder. If the name of the organisation is not available in the given list, but known select 'Other organisation' and enter the name in the 'Other' box, using free text. If the name of the organisation is not known select 'Unknown organisation'. |

Destination unit (or location)

| | |
|-------------------|---|
| Definition | The destination unit / admitting PICU/location identifies the exact destination that the patient was taken to at the end of the transport episode. Enter postcode if child has been transferred to normal residence or hospice. |
| Reason | Required for geographic information to be linked to assessment of health services delivery. |
| Format | Name of the destination unit (or location) Select the name of the destination unit (or location) from the organisation coder. If the name is not available in the given list, but known select 'Other organisation' and enter the name in the 'Other' box, using free text. If the name is not known select 'Unknown organisation'. |

Comments

| | |
|-------------------|---|
| Definition | <p>Any additional information considered relevant to the admission.</p> <p>Text entered in this field may provide extra information about data entered elsewhere in a specific field in the dataset, or may provide extra information on the admission, which is not collected as part of the dataset.</p> <p>No identifiers (patient, nurse, doctor, ICU, hospital) should be included in text data entered into this field.</p> <p>As there is limited space in this field all text data should be kept to a minimum and be as concise as possible. Text data must not contain any punctuation except a period (full-stop) at the end of each data point.</p> |
| Reason | <p>No dataset specification covers all eventualities: to deal with this a text field has been included for comments/additional information.</p> |
| Format | <p>Free text</p> |

Transport dataset

Patient details

Family name or Surname

| | |
|-------------------|--|
| Definition | The last or family name or surname given to the child as it would appear on the child's birth certificate or other appropriate document. |
| Reason | Family name provides an additional identifier that can aid patient tracking throughout the hospital. Can help identify individuals who may have had multiple admissions to one or more PICUs. |
| Format | Free text (e.g. Brown). If no family name available record as UNKNOWN and indicate why not available in the comments section. |

First name

| | |
|-------------------|--|
| Definition | The first name given to the child as it would appear on the child's birth certificate or other appropriate document. |
| Reason | First name provides an additional identifier that can aid patient tracking throughout the hospital and PICANet DE. Can help identify individuals who may have had multiple referrals and /or admissions to one or more PICUs. |
| Format | Free text (e.g. John). If no first name available record as UNKNOWN and indicate why not available in the comments section. |

Address (1-5)

| | |
|-------------------|---|
| Definition | The normal place of residence for the child |
| Reason | <p>Address provides an additional identifier that can aid patient tracking throughout the hospital.</p> <p>Can help identify individuals who may have had multiple referrals and/or admissions to one or more PICUs.</p> <p>A full residential address is required to enable geographic and demographic information to be linked to the patient for effective audit and assessment of health services delivery. A full residential address will allow validation of postcode.</p> |
| Format | <p>5 free text fields, e.g.</p> <p>ADDRESS1: 83 Green Street ADDRESS2: Brownley ADDRESS3: Sheffield ADDRESS4: South Yorkshire ADDRESS5:</p> <p>At least part of the address should be entered in ADDRESS1. If no information is available, please state UNKNOWN and indicate reason in the comments section.</p> <p>Note that not all fields need to be completed for short addresses, and very long addresses may require locality and town to be combined.</p> |

Postcode

| | |
|-------------------|--|
| Definition | The postcode for the child's normal place of residence. |
| Reason | <p>Postcode provides an additional identifier that can aid patient tracking throughout the hospital.</p> <p>Can help identify individuals who may have had multiple admissions to one or more PICUs.</p> <p>Postcode provides a means of linkage to geographic and demographic information for effective audit and assessment of health services delivery.</p> |
| Format | <p>Text (e.g. S10 8NN).</p> <p>Foreign postcodes will be accepted by the software, although a warning will be generated in the case of non UK standard postcodes to ensure that the user checks the data.</p> <p>If postcode is unobtainable, record as UNKNOWN</p> |

NHS or CHI number

| | |
|-------------------|---|
| Definition | Unique identifying number enabling tracing of a patient through the NHS system in England, Wales and Northern Ireland. For Scottish patients the CHI number is used as a unique numeric identifier. |
| Reason | NHS or CHI number gives a unique, identifiable variable that will allow other identifiable data items to be removed from the database. Can identify individuals who may have had multiple admissions to one or more PICUs. |
| Format | Free text (e.g. 1463788990). |

NHS number eligibility

| | |
|-------------------|---|
| Definition | The patient is not eligible for NHS or a CHI number, he or she is an overseas national who is not ordinarily a resident in the UK and therefore does not have an allocated NHS or CHI number. |
| Reason | To enable effective audit of availability of NHS number and assessment of health services delivery. |
| Format | Tick box if patient is not eligible for an NHS or CHI number. |

Case note number

| | |
|-------------------|--|
| Definition | Unique identifying number for an individual's hospital records at the destination unit. Allocated on first admission to hospital. |
| Reason | Case note number provides a unique identifier that can aid patient tracking throughout the hospital. |
| Format | Free text (e.g. AB145C). |

Date of birth

| | |
|-------------------|--|
| Definition | The child's date of birth as recorded on the child's birth certificate or other appropriate document. |
| Reason | <p>Date of birth and Date of admission are used to calculate age at admission to this paediatric intensive care service.</p> <p>Date of birth provides an additional identifier that can aid patient tracking throughout the hospital and PICANet.</p> <p>Can help identify individuals who may have had multiple referrals and/or admissions to one or more PICUs.</p> |
| Format | <p>Date: dd/mm/yyyy.</p> <p>Date of birth should be between 01/01/1980 and Date of admission.</p> <p>If the child's date of birth is unobtainable, use your judgement to estimate year of birth and record as 1 January of estimated year (e.g. 01/01/YYYY). Then tick 'Estimated' in the section 'Indicate if date of birth is' Estimated/Anonymised/Unknown section below.</p> <p>If information is being extracted from notes and the child's date of birth is not recorded, or recorded as unavailable, leave the field blank and enter NK ('9') in the Date of birth estimated/missing field. Then tick 'Unknown' below.</p> <p>If it is necessary for Date of birth to be partly anonymised, enter the correct month and year and record 01 for the day (e.g. 01/MM/YYYY). Then tick 'Anonymised' below.</p> |

Indicate if date of birth is...

| | |
|-------------------|---|
| Definition | Specifies whether the date of birth is not estimated, estimated, unknown (and cannot be estimated) or partly anonymised. |
| Reason | Date of birth and Date of admission to your unit are used to calculate age at admission to this paediatric intensive care service. |
| Format | <p>Choose from one of the following:</p> <ul style="list-style-type: none">Not estimatedEstimatedAnonymisedDOB not known (and cannot be estimated) |

Sex

| | |
|-------------------|---|
| Definition | Identifies the genotypical sex of the child at referral to this paediatric intensive care service. |
| Reason | Sex is important for reporting demographic statistics for admissions to your transport service or unit. Sex provides an additional identifier that can aid patient tracking throughout the hospital and PICANet. |
| Format | Choose from one of the following: Male Female Ambiguous Unknown |

Transport details

Date and time accepted for transport

| | |
|-------------------|---|
| Definition | The date and time that the referral call was received, when it was agreed that specialist paediatric intensive care transport services are required. This may not be the date of the first telephone call to the PICU or transport service as this may have been for advice or discussion only. |
| Reason | Date and time of the referral call will be used to calculate the total number of referral calls for each individual patient. Accurate recording of date and time will enable analysis of organisational delays e.g. due to lack of availability of staffed beds or transport teams. To enable effective audit and assessment of health services delivery. |
| Format | Date: dd/mm/yyyy Time: hh:mm (24 hour clock) |

Transport number

| | |
|-------------------|---|
| Definition | Unique identifier assigned to each consecutive transport event. As recorded within your organisation to identify each transport episode. |
| Reason | To enable effective audit and assessment of health services delivery. The transport number gives a unique, identifiable variable that will allow other identifiable data items to be removed from the database. Can identify individual transport events for patients who may have had multiple transport events. |
| Format | Free text (e.g. 146378). |

Type of transport team

| | |
|-------------------|--|
| Definition | <p>Specifies the type of transport team and identifies whether the team is a specialist PICU team or not.</p> <p>PICU identifies that a specialised PICU team transferred the child.</p> <p>Centralised transport service identifies that a transport team from a centralised transport service transferred the child.</p> <p>Transport team from neonates identifies that a specialist neonatal transport team transferred the child.</p> <p>Other specialist team identifies that another specialist team (not a specialist PICU or neonatal transport team), transported the child to your unit. This could be A&E or theatre staff transferring the child.</p> <p>Other non-specialist team identifies that another non-specialist team transported the child to your unit.</p> |
| Reason | To enable effective audit and assessment of health services delivery. |
| Format | Choose from one of the following: <ul style="list-style-type: none">PICUCentralised transport serviceTransport team from neonatesOther specialist teamOther non-specialist teamUnknown |

Transport team

| | |
|-------------------|---|
| Definition | Unique name for each PICU transport team or centralised transport service undertaking this episode of transport. |
| Reason | <p>The unique name allows identification of one transport services data from another.</p> <p>To enable effective audit of availability of NHS number and assessment of health services delivery.</p> |
| Format | <p>Name of individual PICU or of centralised transport service</p> <p>Select the name of the PICU or transport service from the organisation coder.</p> <p>If the name of the organisation is not available in the given list, but known select 'Other organisation' and enter the name in the 'Other' box, using free text.</p> <p>If the name of the organisation is not known select 'Unknown organisation'.</p> |

Grade of clinical team leader

| | |
|-------------------|---|
| Definition | The most senior doctor or nurse practitioner who transfers the patient, and is present for the whole journey. |
| Reason | To enable effective audit and assessment of health services delivery. |
| Format | Choose from one of the following: Consultant/ Associate Specialist /Staff Grade ST 4-8 ST 1-3 Nurse practitioner Unknown |

Speciality of clinical team leader

| | |
|-------------------|--|
| Definition | The speciality of the most senior doctor or nurse practitioner who transfers the patient, and is present for the whole journey, as defined by their current post. |
| Reason | To enable effective audit and assessment of health services delivery. |
| Format | Choose from one of the following: General paediatrics Sub-specialty paediatrics Neonates PICU Anaesthetics General ITU Neurosurgery General surgery Accident and Emergency Burns and plastics ENT Other Unknown |

Grade of most senior nurse undertaking retrieval

| | |
|-------------------|--|
| Definition | Most senior nurse present who accompanies patient for the whole journey |
| Reason | To enable effective audit and assessment of health services delivery. |
| Format | Choose from one of the following: Band 5 Band 6 Band 7 Band 8 None – nurse not present Unknown |

Collection area

Definition

The care area that the child was collected from by the transport team.

X-ray, endoscopy, CT scanner or similar area identifies that the child came from an area where diagnostic procedures may have been carried out at the time of collection from the referring hospital.

Recovery only means the child was receiving care in the recovery area at the time of collection from the referring hospital

HDU (step up/step down area) means the child was receiving care in a high dependency area at the time of collection from the referring hospital

Other intermediate care area (not ICU) is an area where the level of care is greater than that of the normal wards, but not an ICU/PICU/NICU or HDU.

Theatre and recovery means the child has undergone all or part of a surgical procedure or has received an anaesthetic for a procedure and was receiving care within the theatre and recovery area at the time of collection from the referring hospital.

Other transport service – the patient is received from a different transport service i.e. at an airport or port for international transfer.

ICU means the child was receiving care within an adult or other specialist ICU, which is not designated as a PICU, at the time of collection from the referring hospital

PICU means the child was receiving care within PICU at the time of collection from the referring hospital

NICU means the child was receiving care within NICU at the time of collection from the referring hospital

Ward means the child was receiving care in a ward at the time of collection from the referring hospital

A&E means the child was receiving care within an Accident and Emergency Department at the time of collection from the referring hospital

Reason

To enable effective audit and assessment of health services delivery.

| | |
|---------------|---|
| Format | Choose from one of the following: X-ray, endoscopy, CT scanner or similar Recovery only HDU (step up/step down unit) A&E Other intermediate care area (not ICU) Theatre and recovery Other transport service ICU PICU NICU Ward A&E Unknown |
|---------------|---|

Collection unit (or location)

| | |
|-------------------|---|
| Definition | Identifies the unique name of the hospital or the place such as an airport, where the patient is located at the time of collection by the transport team. |
| Reason | Required for assessment of geographical distribution of referring population to individual units/transport services. To enable effective audit and assessment of health services delivery. |
| Format | Name of individual PICU or location e.g. Heathrow Airport Select the name of the PICU or location from the organisation coder. If the name is not available in the given list, but known select 'Other organisation' and enter the name in the 'Other' box, using free text. If the name of the organisation is not known select 'Unknown organisation'. |

Most senior member of medical staff present at collection unit (*retrievals only*)

| | |
|-------------------|---|
| Definition | Most senior member of medical staff handing over the patient for retrieval. |
| Reason | To enable effective audit and assessment of health services delivery. |
| Format | Choose from one of the following: Consultant/Associate Specialist Doctor/Staff Grade ST4-8 level ST1-3 level None – no member of medical staff present Unknown |

Medical Technician

| | |
|-------------------|--|
| Definition | A medical technician accompanying the patient on the journey, include technicians, ODP, ODA, vent technician or respiratory therapist. |
| Reason | To enable effective audit and assessment of health services delivery. |
| Format | Choose from one of the following Yes No Unknown |

Parents accompanying

| | |
|-------------------|---|
| Definition | Identifies if one or more parent(s)/guardian(s) accompanied the patient in the ambulance. Yes- one or more parent(s)/guardian(s) accompanied the patient in the ambulance No, parent was not present- a parent/guardian was not present with the patient at the referring DGH/unit at the time of collection for the transport episode. No, parent declined to accompany- the facility was available for a parent to accompany the patient but the parent chose not to do so. No, parent not permitted to accompany- it was not possible to safely provide the facility for a parent /guardian to accompany the child in the ambulance for the transport episode. |
| Reason | To enable effective audit and assessment of health services delivery. |
| Format | Choose from one of the following Yes No - parent not present No - parent declined to accompany No - parent not permitted to accompany Unknown |

Outcome of this transport event

| | |
|-------------------|--|
| Definition | <p>The result of the transport episode once the decision to mobilise the transport team has been made and/or the transport journey has been completed.</p> <p>Patient transported- the child has been transported to the destination specified.</p> <p>Not transported –condition improved- the transport team arrived at the collection unit, the child's condition improved and PICU was no longer required.</p> <p>Not transported – condition deteriorated- the transport team arrived at the collection unit, the child's condition deteriorated and transfer to PICU was no longer appropriate.</p> <p>Not transported – other reason – the transport team arrived at the collection unit but was not transferred to another unit or location by the transport team. Enter reason in comments box.</p> <p>Patient died before transport team arrived- the child died after the transport team was mobilised but prior to arrival at the referring hospital.</p> <p>Patient died while transport team present- the child died whilst the transport team were providing care at the referring hospital.</p> <p>Patient died during transit- the child died during the return journey from the referring unit.</p> |
| Reason | To enable effective audit and assessment of health services delivery. |
| Format | Choose one of the following Patient transported Not transported- condition improved Not transported - condition deteriorated Not transported - other reason Patient died before transport team arrived Patient died while transport team present Patient died during transit Unknown |

Destination type

| | |
|-------------------|--|
| Definition | <p>Identifies the exact type of unit or site that the patient was admitted or transferred to at the end of this transport episode.</p> <p>PICU – paediatric intensive care unit</p> <p>NICU – neonatal intensive care unit</p> <p>ICU – an adult or specialist intensive care unit which is not designated as a PICU</p> <p>HDU- (step up/step down area) a designated unit or bed providing high dependency care</p> <p>Theatre</p> <p>Ward - a paediatric or general ward</p> <p>Other transport service – the patient is handed over to a different transport service e.g. at an airport or port for international transfer</p> <p>Normal residences – a PICU patient requiring intensive care during the journey home – specify postcode in box titled ‘Destination unit (or location)’.</p> <p>Hospice – a PICU patient requiring intensive care during the journey to a hospice– specify postcode in box titled ‘Destination unit (or location)’.</p> |
| Reason | Required for geographic information to be linked to assessment of health services delivery. |
| Format | Choose from one of the following |
| | <ul style="list-style-type: none">PICUNICUICUHDUWardTheatreOther transport serviceNormal residence) Specify postcode of destinationHospice) in Other destination unit (or location) fieldUnknown |

Destination unit (or location)

| | |
|-------------------|---|
| Definition | The destination unit / admitting PICU/location identifies the exact destination that the patient was taken to at the end of the transport episode. Enter postcode if child has been transferred to normal residence or hospice. |
| Reason | Required for geographic information to be linked to assessment of health services delivery. |
| Format | Name of the destination unit (or location) e.g. Heathrow Airport Select the name of the destination unit (or location) from the organisation coder. If the name is not available in the given list, but known select 'Other organisation' and enter the name in the 'Other' box, using free text. If the name is not known select 'Unknown organisation'. |

Critical incidents

No critical incidents during transport

| | |
|-------------------|---|
| Definition | Identifies that none of the critical incidents listed occurred between the time of departure of the transport team from their base to the time the patient is in their bed at the destination unit (or location). |
| Reason | Assessment of care provided during transit. To enable effective audit and assessment of health services delivery. |
| Format | Tick box if no critical incident occurred |

Accidental extubation during transport

| | |
|-------------------|--|
| Definition | Identifies that accidental extubation occurred between the time of departure of the patient from the collection unit (or location) and the time the patient is in their bed at the destination unit (or location). |
| Reason | Assessment of care provided during transit. To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Required intubation in transit

| | |
|-------------------|---|
| Definition | Identifies that the patient required intubation, including primary and/or re-intubation between the time of departure of the patient from the collection unit (<i>or location</i>) and the time the patient is in their bed at the destination unit (<i>or location</i>). |
| Reason | Assessment of care provided during transit. To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Required chest drain insertion

| | |
|-------------------|--|
| Definition | Identifies that the patient required insertion of a chest drain between the time of departure of the patient from the collection unit (<i>or location</i>) and the time the patient is in their bed at the destination unit (<i>or location</i>). Complete only for incidents during the patient journey. |
| Reason | Assessment of care provided during transit To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Significant desaturation or bradycardia

| | |
|-------------------|---|
| Definition | Identifies that the patient had a significant desaturation or bradycardia between the time of departure from the collection unit (<i>or location</i>) and the time the patient is in their bed at the destination unit (<i>or location</i>). Complete only for incidents during the patient journey. |
| Reason | Assessment of care provided during transit To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Significant unanticipated hypotension

| | |
|-------------------|---|
| Definition | Identifies that the patient had a significant unanticipated hypotension between the time of departure from the collection unit (<i>or location</i>) and the time the patient is in their bed at the receiving unit (<i>or location</i>). Complete only for incidents during the patient journey. |
| Reason | Assessment of care provided during transit To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Ventilator failure

| | |
|-------------------|--|
| Definition | Identifies that failure of the ventilator occurred between the time of departure from the collection unit (<i>or location</i>) and the time the patient is in their bed at the receiving unit (<i>or location</i>). Complete only for incidents during the patient journey. |
| Reason | Assessment of care provided during transit To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Loss of oxygen supply

| | |
|-------------------|--|
| Definition | Identifies that a loss of oxygen supply occurred between the time of departure from the collection unit (<i>or location</i>) and the time the patient is in their bed at the receiving unit (<i>or location</i>). Complete only for incidents during the patient journey. |
| Reason | Assessment of care provided during transit To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Loss of Inotrope supply

| | |
|-------------------|--|
| Definition | Identifies that a loss of inotrope (iNO) supply occurred between the time of departure from the collection unit (<i>or location</i>) and the time the patient is in their bed at the receiving unit (<i>or location</i>). Complete only for incidents during the patient journey. |
| Reason | Assessment of care provided during transit To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Loss of O₂ sats monitoring >1 minute

| | |
|-------------------|--|
| Definition | Identifies that a loss of oxygen saturation monitoring for longer than one minute occurred between the time of departure from the collection unit (<i>or location</i>) and the time the patient is in their bed at the receiving unit (<i>or location</i>). Complete only for incidents during the patient journey. |
| Reason | Assessment of care provided during transit To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Loss of all IV access

| | |
|-------------------|---|
| Definition | Identifies that loss of all intravenous access occurred between the time of departure from the collection unit (<i>or location</i>) and the time the patient is in their bed at the receiving unit (<i>or location</i>). Complete only for incidents during the patient journey. |
| Reason | Assessment of care provided during transit. To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Cardiac arrest, successfully resuscitated

| | |
|-------------------|---|
| Definition | Identifies that the patient suffered a cardiac arrest and was successfully resuscitated between the time of departure from the collection unit (<i>or location</i>) and the time the patient is in their bed at the receiving unit (<i>or location</i>). Complete only for incidents during the patient journey. |
| Reason | Assessment of care provided during transit. To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Equipment failure or incompatibility

| | |
|-------------------|---|
| Definition | Identifies that there was equipment failure or incompatibility between the equipment and transport vehicle and that this occurred between the time of departure from the transport team base and the time the patient is in their bed at the destination unit (<i>or location</i>). Complete for base to collection unit journey and/or patient journey. |
| Reason | Assessment of care provided during transit To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Team diverted to other patient

| | |
|-------------------|--|
| Definition | Identifies that the transport team were diverted to retrieve another patient, and that this occurred between the time of departure from the transport team base and the time the patient is in their bed at the destination unit (<i>or location</i>). Complete for base to collection unit journey and/or patient journey. |
| Reason | Assessment of care provided during transit To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Vehicle accident

| | |
|-------------------|--|
| Definition | Identifies that the transport vehicle was involved in an accident and that this occurred between the time of departure from the transport team base and the time the patient is in their bed at the destination unit (<i>or location</i>). Complete for base to collection unit journey and/or patient journey. |
| Reason | Assessment of care provided during transit. To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Vehicle breakdown

| | |
|-------------------|--|
| Definition | Identifies that there was a breakdown of the transport vehicle and that this occurred between the time of departure from the transport team base and the time the patient is in their bed at the destination unit (<i>or location</i>). Complete for base to collection unit journey and/or patient journey |
| Reason | Assessment of care provided during transit. To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Use of replacement vehicle

| | |
|-------------------|--|
| Definition | Identifies that a replacement vehicle was provided and used between the time of departure from the transport team base and the time the patient is in their bed at the destination unit (<i>or location</i>). Complete for base to collection unit journey and/or patient journey |
| Reason | Assessment of care provided during transit. To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Journey abandoned

| | |
|-------------------|---|
| Definition | Identifies that the journey was abandoned between the time of departure from the transport team base and the time the patient is in their bed at the destination unit (<i>or location</i>). Complete for base to collection unit journey and/or patient journey. |
| Reason | Assessment of care provided during transit To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Delayed connection

| | |
|-------------------|---|
| Definition | Identifies that there was a delayed connection during transit, and that this occurred between the time of departure from the transport team base and the time the patient is in their bed at the destination unit (<i>or location</i>). This may include where the patient is being transported to or from an airport or port. For example the plane is not ready to depart when the ambulance arrives, or the ambulance is not waiting on the runway when the transport team arrives. Complete for base to collection unit journey and/or patient journey. |
| Reason | Assessment of care provided during transit To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Emergency diversion

| | |
|-------------------|---|
| Definition | Identifies that the transport team were required to divert to another hospital en route because the patient had deteriorated or there was a technical failure. This incident occurs between the time the transport team departed from the transport team base and the time the patient is in their bed at the destination unit (<i>or location</i>). Complete for base to collection unit journey and/or patient journey. |
| Reason | Assessment of care provided during transit To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Other critical incident

| | |
|-------------------|---|
| Definition | Identifies that another critical incident, not listed, occurs between the time the transport team departed from the transport team base and the time the patient is in their bed at the destination unit (<i>or location</i>). Complete for base to collection unit journey and/or patient journey. Tick box on form and specify type of critical incident in comments section. |
| Reason | Assessment of care provided during transit To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Transport times – Base to Collection unit

The journey of the transport team from the team base to the collection unit or location, where the patient is sited, at the time of collection by the transport team.

Base to collection unit not applicable

| | |
|-------------------|---|
| Definition | Confirmation that this section of the trip is not applicable to this transport event because there was no journey from the base to the collection unit or location, where the patient is sited at the time of collection by the transport team. For example the patient is located at the base hospital for the PICU transport team. |
| Reason | Acts as a filter for validation and further data entry |
| Format | Tick box if this section of the trip is not applicable |

Mode of transport

| | |
|-------------------|---|
| Definition | Identifies the type of transport used by the transport team at any time during the base to collection unit or outward journey. Dedicated ambulance – identifies if a dedicated paediatric intensive care transport service ambulance was used by the transport team at any time during this journey Other ambulance - identifies if another ambulance such as an NHS or private ambulance (not a dedicated transport service ambulance) was used by the transport team at any time during this journey Rapid Response Vehicle (RRV) – identifies if a rapid response vehicle was used by the transport team at any time during this journey Taxi – identifies if a taxi was used by the transport team at any time during this journey Air – identifies if any type of air transport was used by the transport team at any time during this journey Other – identifies if any other type of transport not listed above was used by the transport team at any time during this journey |
| Reason | To enable effective audit and assessment of health services delivery. |
| Format | Tick all of the following modes of transport used during this journey: Dedicated ambulance Other ambulance Rapid Response vehicle (RRV) Taxi Air Other |

Depart base

| | |
|-------------------|---|
| Definition | The actual date and time the transport team depart in the specified mode of transport from the team base, includes the PICU or stand alone base. This specific field should only be completed if applicable to this journey. |
| Reason | Accurate recording of date and time will allow analysis of time intervals and total timings. To enable effective audit and assessment of health services delivery. |
| Format | Date: dd/mm/yyyy Time : hh:mm (24 hour clock) |

Arrive base airport

| | |
|-------------------|---|
| Definition | The actual date and time the transport team arrive at the base airport. To be completed only if applicable to this particular section of the journey taken by air transport. |
| Reason | Accurate recording of date and time will allow analysis of time intervals and total timings. Epidemiological analysis of service organisation. |
| Format | Date: dd/mm/yyyy Time : hh.mm (24 hour clock) |

Aircraft type

| | |
|-------------------|---|
| Definition | Identifies the type of air transport used by the transport team at any time during the base to collection unit or outward journey. Unpressurised fixed wing aircraft Pressurised fixed-wing aircraft Dedicated helicopter – dedicated medical ambulance Other helicopter - including forces or emergency services To be completed only if applicable to this particular section of the journey taken by air transport. |
| Reason | Epidemiological analysis of service organisation and geographical variation. |
| Format | Choose from one of the following: Unpressurised fixed wing Pressurised fixed- wing Dedicated helicopter Other helicopter Unknown |

Takeoff base airport

| | |
|-------------------|---|
| Definition | <p>The actual date and time of the flight departure from the transport team's base airport.</p> <p>To be completed only if applicable to this particular section of the journey taken by air transport.</p> |
| Reason | <p>Accurate recording of date and time will allow analysis of time intervals and total timings.</p> <p>Epidemiological analysis of service organisation.</p> |
| Format | <p>Date: dd/mm/yyyy</p> <p>Time : hh.mm (24 hour clock)</p> |

Land collection airport

| | |
|-------------------|---|
| Definition | <p>The actual date and time of the flight arrival at the airport for the collection unit or location.</p> <p>To be completed only if applicable to this particular section of the journey taken by air transport.</p> |
| Reason | <p>Accurate recording of date and time will allow analysis of time intervals and total timings.</p> <p>Epidemiological analysis of service organisation.</p> |
| Format | <p>Date: dd/mm/yyyy</p> <p>Time : hh.mm (24 hour clock)</p> |

Depart collection airport

| | |
|-------------------|--|
| Definition | <p>The actual date and time the transport team depart the collection airport to travel to the collection unit or location where the child is sited.</p> <p>To be completed only if applicable to this particular section of the journey taken by air transport.</p> <p>Not to be completed if child is transferred from another transport service at the airport location.</p> |
| Reason | <p>Accurate recording of date and time will allow analysis of time intervals and total timings.</p> <p>Epidemiological analysis of service organisation.</p> |
| Format | <p>Date: dd/mm/yyyy</p> <p>Time : hh.mm (24 hour clock)</p> |

Arrive collection unit (or location)

| | |
|-------------------|---|
| Definition | <p>The actual date and time the transport team arrive at the child's bedside in the collection unit.</p> <p>This specific field should only be completed if applicable to this journey i.e. the transport team have travelled from another base to the collection unit or location.</p> |
| Reason | <p>Accurate recording of date and time will allow analysis of time intervals and total timings.</p> <p>To enable effective audit and assessment of health services delivery.</p> |
| Format | <p>Date: dd/mm/yyyy</p> <p>Time : hh.mm (24 hour clock)</p> |

Blue light or siren used or requested

| | |
|-------------------|---|
| Definition | <p>Identifies whether use of the blue light and or siren for the base to collection unit journey was requested and therefore indicates the intention to use the blue light and/or siren in appropriate traffic conditions</p> |
| Reason | <p>To enable effective audit and assessment of health services delivery.</p> |
| Format | <p>Choose from one of the following:</p> <ul style="list-style-type: none">YesNoUnknown |

Organisational delays base to collection unit journey

| | |
|-------------------|--|
| Definition | <p>Organisational time delays during the outward journey from the transport team base or PICU to the collection unit or location.</p> <p>None - identifies there have been NO organisational time delays for outward journey due to lack of available transport</p> <p>Team out or busy - time delay in mobilising for outward journey due to transport team already being out on another transport event or busy</p> <p>Staffing- time delay in mobilising for the outward journey due to no staff being available for transport event</p> <p>Vehicle - time delay in mobilising for the outward journey due to no vehicle being available for transport event</p> |
| Reason | <p>To enable effective audit and assessment of health services delivery.</p> |
| Format | <p>Choose from one of the following:</p> <ul style="list-style-type: none">NoneTeam out or busyStaffing delayVehicle delayUnknown |

Transport times – Patient journey

The journey with the patient from the collection unit/PICU/DGH or location such as an airport, to the destination unit/PICU or location such as a hospice.

Patient journey not applicable

| | |
|-------------------|--|
| Definition | Confirmation that this section of the trip is not applicable to this transport event because there was no journey with the patient. For example the transport team arrives at the collection unit or location but the patient is not transported because the condition of the patient improves or deteriorates. |
| Reason | Acts as a filter for further data entry |
| Format | Tick box if this section of the trip is not applicable |

Mode of transport

| | |
|-------------------|--|
| Definition | Identifies the type of transport used by the transport team at any time during the journey with the patient. Dedicated ambulance – identifies if a dedicated paediatric intensive care transport service ambulance was used by the transport team at any time during the patient journey Other ambulance - identifies if another ambulance such as an NHS or private ambulance (not a dedicated transport service ambulance) was used by the transport team at any time during the patient journey Rapid Response Vehicle (RRV) – identifies if a rapid response vehicle was used by the transport team at any time during the patient journey Taxi – identifies if a taxi was used by the transport team at any time during this journey Air – identifies if any type of air transport was used by the transport team at any time during the patient journey Other – identifies if any other type of transport not listed above was used by the transport team at any time during the patient journey |
| Reason | To enable effective audit and assessment of health services delivery. |
| Format | Tick all of the following modes of transport used during this journey Dedicated ambulance Other ambulance Rapid Response Vehicle (RRV) Taxi Air Other |

Depart collection unit (or location)

| | |
|-------------------|--|
| Definition | <p>The actual date and time the transport team depart in the specified mode of transport from the collection unit, which is the hospital/location where the patient is located at the time of acceptance of this transport event.</p> <p>For patients who are being transported from a country outside the United Kingdom or Eire this may be a port or airport.</p> |
| Reason | <p>Accurate recording of date and time will allow analysis of time intervals and total timings.</p> <p>To enable effective audit and assessment of health services delivery.</p> |
| Format | <p>Date: dd/mm/yyyy</p> <p>Time : hh.mm (24 hour clock)</p> |

Arrive collection airport

| | |
|-------------------|--|
| Definition | <p>The actual date and time the transport team arrive at the collection airport.</p> <p>To be completed only if applicable to this particular section of the journey taken by air transport.</p> |
| Reason | <p>Accurate recording of date and time will allow analysis of time intervals and total timings.</p> <p>Epidemiological analysis of service organisation.</p> |
| Format | <p>Date: dd/mm/yyyy</p> <p>Time : hh.mm (24 hour clock)</p> |

Aircraft type

| | |
|-------------------|--|
| Definition | <p>Type of air transport used.</p> <p>Unpressurised fixed wing aircraft</p> <p>Pressurised fixed- wing aircraft</p> <p>Dedicated helicopter – dedicated medical ambulance</p> <p>Other helicopter - including forces or emergency services</p> <p>To be completed only if applicable to this particular section of the journey taken by air transport.</p> |
| Reason | <p>Epidemiological analysis of service organisation and geographical variation.</p> |
| Format | <p>Choose from one of the following:</p> <ul style="list-style-type: none">Unpressurised fixed wingPressurised fixed- wingDedicated helicopterOther helicopterUnknown |

Takeoff collection airport

| | |
|-------------------|--|
| Definition | <p>The actual date and time of the flight departure from the collection unit/location airport.</p> <p>To be completed only if applicable to this particular section of the journey taken by air transport.</p> |
| Reason | <p>Accurate recording of date and time will allow analysis of time intervals and total timings.</p> <p>Epidemiological analysis of service organisation.</p> |
| Format | <p>Date: dd/mm/yyyy</p> <p>Time : hh.mm (24 hour clock)</p> |

Land destination airport

| | |
|-------------------|---|
| Definition | <p>The actual date and time of the flight arrival at the airport for the admission/destination PICU/unit or location, that is the destination that the child is taken to at the end of the transport episode.</p> <p>To be completed only if applicable to this particular section of the journey taken by air transport.</p> |
| Reason | <p>Accurate recording of date and time will allow analysis of time intervals and total timings.</p> <p>Epidemiological analysis of service organisation.</p> |
| Format | <p>Date: dd/mm/yyyy</p> <p>Time : hh.mm (24 hour clock)</p> |

Depart destination airport

| | |
|-------------------|---|
| Definition | <p>The actual date and time the transport team depart the destination airport to travel to the destination PICU/unit or location, that is the destination where the child will complete their journey.</p> <p>To be completed only if applicable to this particular section of the journey taken by air transport.</p> <p>Not to be completed if child is transferred to another transport service at the airport location.</p> |
| Reason | <p>Accurate recording of date and time will allow analysis of time intervals and total timings.</p> <p>Epidemiological analysis of service organisation.</p> |
| Format | <p>Date: dd/mm/yyyy</p> <p>Time : hh.mm (24 hour clock)</p> |

Arrive destination unit (or location)

| | |
|-------------------|--|
| Definition | <p>The actual date and time the child arrives in a bed at the destination unit or location, this will include the time taken to transfer from trolley to bed, or hand over in theatre or scanner to receiving team.</p> <p>This specific field should only be completed if applicable to this journey.</p> |
| Reason | <p>Accurate recording of date and time will allow analysis of time intervals and total timings.</p> <p>To enable effective audit and assessment of health services delivery.</p> |
| Format | <p>Date: dd/mm/yyyy</p> <p>Time : hh.mm (24 hour clock)</p> |

Blue light or siren used or requested

| | |
|-------------------|--|
| Definition | <p>Identifies whether use of the blue light and or siren, for the patient journey between the collection unit and the destination unit, was requested and therefore indicates the intention to use the blue light and/or siren in appropriate traffic conditions</p> |
| Reason | <p>To enable effective audit and assessment of health services delivery.</p> |
| Format | <p>Choose from one of the following:</p> <ul style="list-style-type: none">YesNoUnknown |

Organisational delays – patient journey

| | |
|-------------------|--|
| Definition | <p>Time delays on the patient journey from the collection unit to the destination unit</p> <p>None - identifies there have been NO organisational time delays for patient journey due to lack of available transport</p> <p>Team out- time delay in mobilising for patient journey due to transport team already being out with another transport event or busy</p> <p>Staffing- time delay in mobilising for the patient journey due to no staff being available for transport event</p> <p>Vehicle - time delay in mobilising for the patient journey due to no vehicle being available for transport event</p> |
| Reason | <p>To enable effective audit and assessment of health services delivery.</p> |
| Format | <p>Choose from one of the following:</p> <ul style="list-style-type: none">NoneTeam outStaffingVehicleUnknown |

Transport times – Destination unit to Base

The journey of the transport team from the destination unit or location, to the transport team base

Destination unit to Base not applicable

| | |
|-------------------|---|
| Definition | Confirmation that this section of the trip is not applicable to this transport event because there was no journey from the destination unit to the transport team base. For example the transport team is based at the destination PICU. |
| Reason | Acts as a filter for further data entry |
| Format | Tick box if this section of the trip is not applicable |

Mode of transport

| | |
|-------------------|---|
| Definition | Identifies the type of transport used by the transport team at any time during the journey from the destination unit or location to the transport team base or PICU. Dedicated ambulance – identifies if a dedicated paediatric intensive care transport service ambulance was used by the transport team at any time during this journey Other ambulance - identifies if another ambulance such as an NHS or private ambulance (not a dedicated transport service ambulance) was used by the transport team at any time during this journey Rapid Response vehicle (RRV) – identifies if a rapid response vehicle was used by the transport team at any time during this journey Taxi – identifies if a taxi was used by the transport team at any time during this journey Air – identifies if any type of air transport was used by the transport team at any time during this journey Other – identifies if any other type of transport not listed above was used by the transport team at any time during this journey |
| Reason | To enable effective audit and assessment of health services delivery. |
| Format | Choose from one of the following: Dedicated ambulance Other ambulance RRV Taxi Air Other |

Depart destination unit (or location)

| | |
|-------------------|---|
| Definition | <p>The actual date and time the transport team depart in the specified mode of transport from the patient bedside at the destination unit or location, which is the hospital/location which was the end of this patient journey.</p> <p>For patients who are being transported to a country outside the United Kingdom or Eire this may be a port or airport.</p> |
| Reason | <p>Accurate recording of date and time will allow analysis of time intervals and total timings.</p> <p>To enable effective audit and assessment of health services delivery.</p> |
| Format | <p>Date: dd/mm/yyyy</p> <p>Time : hh.mm (24 hour clock)</p> |

Arrive destination airport

| | |
|-------------------|--|
| Definition | <p>The actual date and time the transport team arrive at the destination airport for return to base.</p> <p>To be completed only if applicable to this particular section of the journey taken by air transport.</p> |
| Reason | <p>Accurate recording of date and time will allow analysis of time intervals and total timings.</p> <p>Epidemiological analysis of service organisation.</p> |
| Format | <p>Date: dd/mm/yyyy</p> <p>Time : hh.mm (24 hour clock)</p> |

Aircraft type

| | |
|-------------------|---|
| Definition | <p>Type of air transport used by the transport team at any time during the base to collection unit or outward journey</p> <p>Unpressurised fixed wing aircraft</p> <p>Pressurised fixed- wing aircraft</p> <p>Dedicated helicopter – dedicated medical ambulance</p> <p>Other helicopter - including forces or emergency services</p> <p>To be completed only if applicable to this particular section of the journey taken by air transport.</p> |
| Reason | <p>Epidemiological analysis of service organisation and geographical variation.</p> |
| Format | <p>Choose from one of the following:</p> <ul style="list-style-type: none">Unpressurised fixed wingPressurised fixed- wingDedicated helicopterOther helicopterUnknown |

Takeoff destination airport

| | |
|-------------------|--|
| Definition | The actual date and time of the flight departure from the destination unit/location airport. To be completed only if applicable to this particular section of the journey taken by air transport. |
| Reason | Accurate recording of date and time will allow analysis of time intervals and total timings. Epidemiological analysis of service organisation. |
| Format | Date: dd/mm/yyyy Time : hh.mm (24 hour clock) |

Land base airport

| | |
|-------------------|--|
| Definition | The actual date and time the transport team arrive at the base airport on the return journey to the team base. To be completed only if applicable to this particular section of the journey taken by air transport. |
| Reason | Accurate recording of date and time will allow analysis of time intervals and total timings. Epidemiological analysis of service organisation. |
| Format | Date: dd/mm/yyyy Time : hh.mm (24 hour clock) |

Depart base airport

| | |
|-------------------|---|
| Definition | The actual date and time the transport team depart the base airport to return to the stand alone team base or PICU. To be completed only if applicable to this particular section of the journey taken by air transport. |
| Reason | Accurate recording of date and time will allow analysis of time intervals and total timings. Epidemiological analysis of service organisation. |
| Format | Date: dd/mm/yyyy Time : hh.mm (24 hour clock) |

Arrive base

| | |
|-------------------|---|
| Definition | <p>The actual date and time the transport team arrive at the stand alone base or own PICU.</p> <p>This specific field should only be completed if applicable to this journey i.e. by stand alone transport team or PICU transporting child to another unit.</p> |
| Reason | <p>Accurate recording of date and time will allow analysis of time intervals and total timings.</p> <p>To enable effective audit and assessment of health services delivery.</p> |
| Format | <p>Date: dd/mm/yyyy</p> <p>Time : hh.mm (24 hour clock)</p> |

Blue light or siren used or requested

| | |
|-------------------|---|
| Definition | <p>Identifies whether use of the blue light and or siren, for the journey from the destination unit to the transport team base, was requested and therefore indicates the intention to use the blue light and/or siren in appropriate traffic conditions.</p> |
| Reason | <p>To enable effective audit and assessment of health services delivery.</p> |
| Format | <p>Choose from one of the following:</p> <ul style="list-style-type: none">YesNoUnknown |

Organisational delays base to collection unit journey

| | |
|-------------------|---|
| Definition | <p>Time delays on the patient journey from the destination unit (or location) to the transport team base.</p> <p>None - identifies there have been NO organisational time delays for patient journey due to lack of available transport</p> <p>Team busy - time delay in mobilising for patient journey due to transport team being busy i.e. with another patient</p> <p>Staffing- time delay in mobilising for the patient journey due to staff being detained for other reason.</p> <p>Vehicle - time delay in mobilising for the patient journey due to no vehicle being available for transport event</p> |
| Reason | <p>To enable effective audit and assessment of health services delivery.</p> |
| Format | <p>Choose from one of the following:</p> <ul style="list-style-type: none">NoneTeam busyStaffing delayVehicle delayUnknown |

Interventions by local team prior to arrival of transport team

Applies only to retrievals to PICU or journeys to another intensive care unit

Primary Intubation

| | |
|-------------------|--|
| Definition | The patient was intubated at the time of arrival of the transport team. Complete this field only for transports to or from a PICU or other intensive care unit. |
| Reason | May reflect intensity of treatment prior to arrival of team, may show different performance between different seniority of staff. To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Re-intubation

| | |
|-------------------|---|
| Definition | The patient was already intubated and then required re-intubation which was completed prior to arrival of the transport team. Complete only for retrievals to or from a PICU or other intensive care unit. |
| Reason | May reflect intensity of treatment prior to arrival of team, may show different performance between different seniority of staff. To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Primary central venous access

| | |
|-------------------|---|
| Definition | Primary central venous access (intraosseus access is regarded separately), was gained by the local team prior to arrival of the transport team. Complete only for retrievals to or from a PICU or other intensive care unit. |
| Reason | May reflect intensity of treatment prior to arrival of team, may show different performance between different seniority of staff. To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Additional central venous access

| | |
|-------------------|--|
| Definition | <p>The patient already had primary central venous access (intraosseus access is regarded separately), and additional central venous access is gained by the local team prior to arrival of the transport team.</p> <p>Complete only for retrievals to or from a PICU or other intensive care unit.</p> |
| Reason | <p>May reflect intensity of treatment prior to arrival of team, may show different performance between different seniority of staff.</p> <p>To enable effective audit and assessment of health services delivery.</p> |
| Format | Tick box if true |

Arterial access

| | |
|-------------------|---|
| Definition | <p>Arterial access was gained by the local team prior to arrival of the transport team.</p> <p>Complete only for retrievals to or from a PICU or other intensive care unit.</p> |
| Reason | <p>May reflect intensity of treatment prior to arrival of team, may show different performance between different seniority of staff.</p> <p>To enable effective audit and assessment of health services delivery.</p> |
| Format | Tick box if true |

Inotrope or vasopressor infusion

| | |
|-------------------|---|
| Definition | <p>Inotrope infusion or vasopressor infusion connected and running prior to arrival of the transport team.</p> <p>Complete only for retrievals to or from a PICU or other intensive care unit.</p> |
| Reason | <p>May reflect intensity of treatment prior to arrival of team, may show different performance between different seniority of staff.</p> <p>To enable effective audit and assessment of health services delivery.</p> |
| Format | Tick box if true |

Prostaglandin infusion

| | |
|-------------------|---|
| Definition | <p>Prostaglandin infusion connected and running prior to arrival of the transport team.</p> <p>Complete only for retrievals to or from a PICU or other intensive care unit.</p> |
| Reason | <p>May reflect intensity of treatment prior to arrival of team, may show different performance between different seniority of staff.</p> <p>To enable effective audit and assessment of health services delivery.</p> |
| Format | Tick box if true |

Primary intraosseus access

| | |
|-------------------|--|
| Definition | The patient has primary intraosseus access prior to arrival of the transport team. Complete only for retrievals to or from a PICU or other intensive care unit. |
| Reason | May reflect intensity of treatment prior to arrival of team, may show different performance between different seniority of staff. To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Additional intraosseus access

| | |
|-------------------|--|
| Definition | The patient already had primary intraosseus access and additional intraosseus access is gained by the local team prior to arrival of the transport team. Complete only for retrievals to or from a PICU or intensive care unit. |
| Reason | May reflect intensity of treatment prior to arrival of team, may show different performance between different seniority of staff. To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Chest drain insertion

| | |
|-------------------|--|
| Definition | A chest drain had been inserted by the local team prior to arrival of the transport team. Complete only for retrievals to or from a PICU or intensive care unit. |
| Reason | May reflect intensity of treatment prior to arrival of team, may show different performance between different seniority of staff. To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

ICP monitoring

| | |
|-------------------|--|
| Definition | Intracranial pressure (ICP) monitoring was commenced by the local team prior to arrival of the transport team. Complete only for retrievals to or from a PICU or intensive care unit. |
| Reason | May reflect intensity of treatment prior to arrival of team, may show different performance between different seniority of staff. To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

ECMO

| | |
|-------------------|--|
| Definition | Extracorporeal membrane oxygenation (ECMO) was commenced by the local team prior to arrival of the transport team. Complete only for retrievals to or from a PICU and or intensive care unit. |
| Reason | May reflect intensity of treatment prior to arrival of team, may show different performance between different seniority of staff. To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Interventions while transport team in attendance

Includes interventions carried out by the local team in the presence of the transport team

Primary Intubation

| | |
|-------------------|---|
| Definition | The patient is NOT intubated prior to arrival of the transport team and is intubated whilst the transport team is in attendance at the referring hospital. This includes primary intubation by the local team after arrival of the transport team. Complete only for retrievals to or from a PICU or intensive care unit. |
| Reason | May reflect intensity of treatment prior to arrival of team, may show different performance between different seniority of staff. To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Re-intubation

| | |
|-------------------|---|
| Definition | The patient is already intubated but is then re-intubated whilst the transport team is in attendance. This includes re-intubation by the local team after arrival of the transport team. Complete only for retrievals to or from a PICU and or intensive care unit. |
| Reason | May reflect intensity of treatment prior to arrival of team, may show different performance between different seniority of staff. To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

Primary central venous access

| | |
|-------------------|---|
| Definition | <p>The patient does not have central venous access, (intraosseus access is regarded separately), and central venous access is gained whilst the transport team is in attendance at the referring hospital.</p> <p>This includes central venous access gained by the local team after arrival of the transport team.</p> <p>Complete only for retrievals to or from a PICU and or intensive care unit.</p> |
| Reason | <p>May reflect intensity of treatment prior to arrival of team, may show different performance between different seniority of staff.</p> <p>To enable effective audit and assessment of health services delivery.</p> |
| Format | Tick box if true |

Additional central venous access

| | |
|-------------------|---|
| Definition | <p>The patient already has central venous access, (intraosseus access is regarded separately), and additional central venous access is gained whilst the transport team is in attendance at the referring hospital.</p> <p>This includes additional central venous access gained by the local team after arrival of the transport team.</p> <p>Complete only for retrievals to or from a PICU and or intensive care unit.</p> |
| Reason | <p>May reflect intensity of treatment prior to arrival of team, may show different performance between different seniority of staff.</p> <p>To enable effective audit and assessment of health services delivery.</p> |
| Format | Tick box if true |

Arterial access

| | |
|-------------------|---|
| Definition | <p>Arterial access is gained whilst the transport team is in attendance at the referring hospital.</p> <p>This includes arterial access gained by the local team after arrival of the transport team.</p> <p>Complete only for retrievals to or from a PICU or other intensive care unit.</p> |
| Reason | <p>May reflect intensity of treatment prior to arrival of team, may show different performance between different seniority of staff.</p> <p>To enable effective audit and assessment of health services delivery.</p> |
| Format | Tick box if true |

Inotrope or vasopressor infusion

| | |
|-------------------|---|
| Definition | <p>Inotrope or vasopressor infusion connected and running whilst the transport team is in attendance at the referring hospital.</p> <p>This includes an inotrope or vasopressor infusion connected by the local team after arrival of the transport team.</p> <p>Complete only for retrievals to or from a PICU and or intensive care unit.</p> |
| Reason | <p>May reflect intensity of treatment prior to arrival of team, may show different performance between different seniority of staff.</p> <p>To enable effective audit and assessment of health services delivery.</p> |
| Format | Tick box if true |

Prostaglandin infusion

| | |
|-------------------|---|
| Definition | <p>Prostaglandin infusion connected and running, whilst the transport team is in attendance at the referring hospital.</p> <p>This includes a prostaglandin infusion connected by the local team after arrival of the transport team.</p> <p>Complete only for retrievals to or from a PICU and or intensive care unit.</p> |
| Reason | <p>May reflect intensity of treatment prior to arrival of team, may show different performance between different seniority of staff.</p> <p>To enable effective audit and assessment of health services delivery.</p> |
| Format | Tick box if true |

Primary intraosseus access

| | |
|-------------------|---|
| Definition | <p>The patient has no intraosseus access and intraosseus access is gained whilst the transport team is in attendance at the referring hospital.</p> <p>This includes intraosseus access gained by the local team after arrival of the transport team.</p> <p>Complete only for retrievals to or from a PICU and or intensive care unit.</p> |
| Reason | <p>May reflect intensity of treatment prior to arrival of team, may show different performance between different seniority of staff.</p> <p>To enable effective audit and assessment of health services delivery.</p> |
| Format | Tick box if true |

Additional intraosseus access

| | |
|-------------------|--|
| Definition | <p>The patient already has intraosseus access but additional access is gained whilst the transport team is in attendance at the referring hospital.</p> <p>This includes additional intraosseus access gained by the local team after arrival of the transport team.</p> <p>Complete only for retrievals to or from a PICU and or intensive care unit.</p> |
| Reason | <p>May reflect intensity of treatment prior to arrival of team, may show different performance between different seniority of staff.</p> <p>To enable effective audit and assessment of health services delivery.</p> |
| Format | Tick box if true |

Chest drain insertion

| | |
|-------------------|---|
| Definition | <p>A chest drain is inserted whilst the transport team is in attendance at the referring hospital.</p> <p>This includes a chest drain inserted by the local team after arrival of the transport team.</p> <p>Complete only for retrievals to or from a PICU and or intensive care unit.</p> |
| Reason | <p>May reflect intensity of treatment prior to arrival of team, may show different performance between different seniority of staff.</p> <p>To enable effective audit and assessment of health services delivery.</p> |
| Format | Tick box if true |

ICP monitoring

| | |
|-------------------|---|
| Definition | <p>Intracranial pressure (ICP) monitoring is commenced whilst the transport team is in attendance at the referring hospital.</p> <p>This includes the commencement of intracranial pressure monitoring by the local team after arrival of the transport team.</p> <p>Complete only for retrievals to or from a PICU and or intensive care unit.</p> |
| Reason | <p>May reflect intensity of treatment prior to arrival of team, may show different performance between different seniority of staff.</p> <p>To enable effective audit and assessment of health services delivery.</p> |
| Format | Tick box if true |

ECMO

| | |
|-------------------|---|
| Definition | Extracorporeal membrane oxygenation (ECMO) is commenced whilst the transport team is in attendance at the referring hospital. Complete only for retrievals to or from a PICU and or intensive care unit. |
| Reason | May reflect intensity of treatment prior to arrival of team, may show different performance between different seniority of staff. To enable effective audit and assessment of health services delivery. |
| Format | Tick box if true |

PIM / PIM2 (retrievals only)

PIM/PIM2 applies to observations recorded in the first hour after first face to face contact with the transport team doctor or nurse practitioner.

Elective admission

| | |
|-------------------|--|
| Definition | Identifies whether the child is an elective admission to the paediatric intensive care service. Elective admission includes after elective surgery, or an admission for an elective procedure (e.g. insertion of a central line), or elective monitoring, or review of home ventilation. An admission to PICU is considered elective if it could be postponed for more than 6 hours without adverse effects. |
| Reason | Elective admissions are weighted in PIM/PIM2. |
| Format | Tick box if child was an elective admission |

Main reason for admission

| | |
|-------------------|--|
| Definition | Identifies whether the child has been admitted to the intensive care service with either: Asthma, Bronchiolitis, Croup, Obstructive sleep apnoea, Diabetic ketoacidosis or Recovery from surgery or a procedure, as the main reason for admission to your unit. Recovery from surgery or a procedure includes a radiological procedure or cardiac catheter. Do not include patients admitted from the operating theatre where recovery from surgery is not the main reason for admission to the paediatric intensive care service e.g. for a patient with a head injury who goes to theatre for insertion of an ICP monitor the main reason for admission is the head injury. |
| Reason | These diagnoses are weighted in PIM/ PIM2 if they are the main reason for the admission. |
| Format | Choose from one of the following: Asthma Bronchiolitis Croup Obstructive sleep apnoea Recovery from surgery Diabetic ketoacidosis Other (none of the above) Unknown |

Evidence available to assess past medical history

| | |
|-------------------|--|
| Definition | Identifies whether or not evidence was available at the time of the transport episode to assess past medical history. Evidence may be obtained from in or out-patient hospital notes, GP notes, or information from the child (if able), child's family/friends/relatives or any other responsible adult. |
| Reason | Important data to confirm whether evidence is available to assess medical history. Acts as a filter for further data entry. |
| Format | Choose from one of the following: Yes No Unknown |

Cardiac arrest before ICU admission

| | |
|-------------------|--|
| Definition | Identifies whether the child has had a cardiac arrest before admission to the paediatric intensive care service, including the specialised paediatric intensive care transport service. Include both in-hospital and out-of-hospital arrests. Requires either documented absent pulse or the requirement for external cardiac compression. Do not include past history of cardiac arrest. |
| Reason | Cardiac arrest preceding admission to the paediatric intensive care service is weighted in PIM/PIM2. |
| Format | Tick if child has a cardiac arrest preceding admission to the paediatric intensive care service. |

Cardiac arrest OUT of hospital

| | |
|-------------------|---|
| Definition | Identifies whether the child has a cardiac arrest before this admission to hospital. Only relates to out-of-hospital cardiac arrests. Requires documented absent pulse or the requirement for external cardiac compression. Do not include past history of cardiac arrest. |
| Reason | Cardiac arrest preceding admission to hospital is weighted in PIM/PIM2. |
| Format | Tick if child has cardiac arrest prior to this hospital admission. |

Cardiomyopathy or myocarditis

| | |
|-------------------|--|
| Definition | Cardiomyopathy or myocarditis refers to a documented diagnosis of cardiomyopathy or myocarditis relevant to the period one month before or at first contact with the paediatric intensive care service. If cardiomyopathy or myocarditis only develop subsequently following admission to your unit and are not present at first contact then answer NO . Impaired cardiac function associated with sepsis or surgery should NOT be recorded as cardiomyopathy. Descriptions of poor ventricular function alone, whether based upon haemodynamic or invasive pressure measurement or during real time imaging are NOT sufficient evidence of cardiomyopathy. Echocardiographic appearances of endocardial fibroelastosis in addition to evidence of poor ventricular function (echocardiographic or otherwise) are sufficient evidence of cardiomyopathy. |
| Reason | Cardiomyopathy and myocarditis are weighted in PIM/PIM2. |
| Format | Tick if true. |

Severe combined immune deficiency (SCIDS)

| | |
|-------------------|---|
| Definition | Identifies whether the child has a diagnosis of severe combined immune deficiency syndrome documented in the case notes prior to or at first contact with the paediatric intensive care service. Patients who have severe combined immune deficiency syndrome, who have had a successful bone marrow transplant following which they have been discharged home, are still regarded as having severe combined immune deficiency syndrome. |
| Reason | Severe combined immune deficiency syndrome is weighted in PIM/PIM2. |
| Format | Tick if true. |

Hypoplastic left heart syndrome

| | |
|-------------------|---|
| Definition | Identifies whether the child has hypoplastic left heart syndrome documented in the case notes prior to or at first contact with the paediatric intensive care service. Include patients of any age but only those cases where a Norwood procedure or equivalent is or was required in the neonatal period to sustain life. Patients who have previously survived to discharge home after surgical repair of hypoplastic left heart syndrome are still included. Patients with similar diagnosis who are not documented as having hypoplastic left heart syndrome are excluded. This includes critical aortic stenosis, mitral atresia, Schones complex and coarctation. Hypoplastic left ventricle is not synonymous with hypoplastic left heart syndrome unless there is also documented ventriculo-arterial concordance. |
| Reason | Hypoplastic left heart syndrome is weighted in PIM/PIM2. |
| Format | Tick if true |

Leukaemia or lymphoma after completion of first induction

| | |
|-------------------|--|
| Definition | Identifies whether the child has leukaemia or lymphoma for which first induction has been received and completed irrespective of current presumed state of immunity or remission; prior to or at first contact with the paediatric intensive care service. |
| Reason | Leukaemia or lymphoma after completion of 1 st induction is weighted in PIM/PIM2. |
| Format | Tick if true. |

Liver failure main reason for ICU admission

| | |
|-------------------|--|
| Definition | Identifies whether the child has acute or chronic liver failure as the primary reason for this admission to the paediatric intensive care service. Include patients admitted for recovery following liver transplantation for acute or chronic liver failure. |
| Reason | Liver failure as the primary reason for admission to the paediatric intensive care service is weighted in PIM/PIM2. |
| Format | Tick if child is admitted with acute or chronic liver failure as the primary reason for their admission. |

Admitted following cardiac bypass

| | |
|-------------------|---|
| Definition | Identifies whether the child has undergone cardiac bypass immediately prior to this admission to the paediatric intensive care service. |
| Reason | Cardiac bypass is weighted in PIM/PIM2. |
| Format | Tick if child has had cardiac bypass prior to this admission. |

Spontaneous cerebral haemorrhage

| | |
|-------------------|--|
| Definition | Identifies whether the child has a spontaneous cerebral haemorrhage (e.g. from an aneurysm or AV malformation) documented in the case notes prior to or at first contact with the paediatric intensive care service. Cerebral haemorrhage should be the cause of or be associated with the intensive care admission, which would normally mean it had occurred within 48 hours prior to the intensive care admission. Do not include traumatic cerebral haemorrhage or intracranial haemorrhage that is not intracerebral (e.g. subdural haemorrhage). |
| Reason | Spontaneous cerebral haemorrhage is weighted in PIM/PIM2. |
| Format | Tick if present. |

Neurodegenerative disorder

| | |
|-------------------|---|
| Definition | Identifies whether the child has a neurodegenerative disorder documented in the case notes prior to or at admission to the paediatric intensive care service. A neurodegenerative disorder is a disease that leads to a progressive deterioration of neurological function with loss of speech, vision, hearing or locomotion. It is often associated with seizures, feeding difficulties and impairment of intellect. Requires a progressive loss of milestones or a diagnosis where this will inevitable occur. A static disability should NOT be recorded as a neurodegenerative disorder (even if it is severe), |
| Reason | A neurodegenerative disorder is weighted in PIM/PIM2. |
| Format | Tick if present |

Human Immunodeficiency Virus (HIV)

| | |
|-------------------|---|
| Definition | Identifies whether the child is HIV antigen positive as documented in the case notes prior to or at admission to the paediatric intensive care service. |
| Reason | The presence of HIV infection is weighted in PIM/PIM2. |
| Format | Tick if present. |

Systolic blood pressure

| | |
|-----------------------|--|
| Definition | The first systolic blood pressure measured and recorded following first face to face (not telephone) contact between the patient and a specialist paediatric intensive care doctor or nurse practitioner; contact in your own hospital (on your ICU, emergency department or ward) or in another hospital on retrieval. Data that are available to the specialist paediatric intensive care doctor or nurse practitioner at first contact and that are current at that time are acceptable. In cases of doubt record the first value of each variable measured after the time of first contact. Systolic blood pressure values are included irrespective of the measurement method used or the site. Record 0 if the patient is in cardiac arrest. Record 30 if the patient is shocked and the blood pressure is so low it is unrecordable. |
| Reason | Systolic blood pressure at first contact with your unit doctor is weighted in PIM/PIM2. |
| Format | Numerical value (e.g. 130). Units: mmHg. |
| Expected range | 20 – 180; validation check if range exceeds 200. |

Blood gas in first hour

| | |
|-------------------|---|
| Definition | <p>Confirmation that results from a blood gas taken and analysed, following first contact between the patient and a specialist paediatric intensive care doctor or nurse practitioner are available.</p> <p>First contact with a specialist paediatric intensive care doctor or nurse practitioner refers to first face-to-face (not telephone) contact in your own hospital (on your ICU, emergency department or ward) or another hospital/unit on retrieval.</p> <p>Data that are available to the specialist paediatric intensive care doctor or nurse practitioner at first contact, that are current at that time, are acceptable. In cases of doubt record the earliest measurement that was current at time of first contact.</p> <p>The blood gas taken and analysed may be arterial, capillary or venous.</p> |
| Reason | <p>Acts as a filter for further data entry.</p> <p>Blood gas results are weighted in PIM/PIM2.</p> |
| Format | <p>Choose from one of the following</p> <ul style="list-style-type: none">YesNoUnknown |

Arterial PaO₂: Oxygen pressure (mmHg)

| | |
|-----------------------|--|
| Definition | <p>The first PaO₂ measured and recorded following first contact between the patient and a specialist paediatric intensive care doctor or nurse practitioner.</p> <p>First contact with a specialist paediatric intensive care doctor or nurse practitioner, refers to first face-to-face (not telephone) contact in your own hospital (on your ICU, emergency department or ward) or another hospital/unit on retrieval.</p> <p>Data that are available to the specialist paediatric intensive care doctor or nurse practitioner at first contact, that are current at that time, are acceptable. In cases of doubt record the earliest measurement that was current at time of first contact.</p> <p>Only arterial blood gas measurements are acceptable.</p> |
| Reason | <p>PaO₂ (and associated FiO₂) at first contact with your unit doctor is weighted in PIM/PIM2 if oxygen is delivered via an ET tube or a head box.</p> |
| Format | <p>Numerical value (e.g. 67.5).</p> <p>Units: mmHg.</p> |
| Expected range | <p>22 – 450; validation check if range falls outside 7.5 – 525.</p> |

FiO₂ at time of PaO₂ sample (oxygen inspired)

| | |
|-------------------|--|
| Definition | <p>The FiO₂ associated with the first PaO₂ measured and recorded following first contact between the patient and a specialist paediatric intensive care doctor or nurse practitioner.</p> <p>First contact with a specialist paediatric intensive care doctor or nurse practitioner refers to first face-to-face (not telephone) contact in your own hospital (on your ICU, emergency department or ward) or another hospital/unit on retrieval.</p> <p>Data that are available to the specialist paediatric intensive care doctor or nurse practitioner at first contact that are current at that time are acceptable. In cases of doubt record the earliest measurement that was current at time of first contact.</p> <p>Only record in association with arterial blood gas measurements.</p> <p>Record 0.21 if patient in air</p> |
| Reason | PaO ₂ and associated FiO ₂ at first contact with your unit doctor are weighted in PIM/PIM2 if oxygen is delivered via an ET tube or a head box. |
| Format | Numerical value (e.g. 0.4). Units: Fraction (decimal). |

Intubation

| | |
|-------------------|---|
| Definition | <p>Record whether or not the child was intubated at the time of the first PaO₂ and associated FiO₂ (measured and recorded) following first contact between the patient and a specialist paediatric intensive care doctor or nurse practitioner.</p> <p>First contact with a specialist paediatric intensive care doctor or nurse practitioner refers to first face-to-face (not telephone) contact in your own hospital (on your ICU, emergency department or ward), or another hospital/unit on retrieval.</p> <p>Intubated is defined as an endotracheal tube, laryngeal mask or tracheostomy in situ.</p> |
| Reason | PaO ₂ and associated FiO ₂ at first contact with your unit doctor are weighted in PIM/PIM2 if oxygen is delivered via an ET tube or a head box. |
| Format | Choose from one of the following: Yes No |

Head box

| | |
|-------------------|--|
| Definition | <p>Record whether or not the child was receiving oxygen via a head box at the time of the first PaO₂ and associated FiO₂ (measured and recorded) following first contact between the patient and a specialist paediatric intensive care doctor or nurse practitioner.</p> <p>First contact with a specialist paediatric intensive care doctor or nurse practitioner, refers to first face-to-face (not telephone) contact in your own hospital (on your ICU, emergency department or ward) or another hospital/unit on retrieval.</p> |
| Reason | PaO ₂ and associated FiO ₂ at first contact with your unit doctor are weighted in PIM/PIM2 if oxygen is delivered via an ET tube or a head box. |
| Format | Choose from one of the following: Yes No |

Base excess in arterial or capillary blood

| | |
|------------------------|--|
| Definition | <p>The first base excess value measured and recorded from the arterial or capillary blood gas following first contact between the patient and a specialist paediatric intensive care doctor or nurse practitioner.</p> <p>First contact with a specialist paediatric intensive care doctor or nurse practitioner refers to first face-to-face (not telephone) contact in your own hospital (on your ICU, emergency department or ward) or another hospital/unit on retrieval.</p> <p>Data that are available to the specialist paediatric intensive care doctor or nurse practitioner at first contact that are current at that time are acceptable. In cases of doubt record the earliest measurement that was current at time of first contact.</p> <p>Manually calculated in vitro or in vivo base excess values are not accepted.</p> |
| Reason | Base excess at first contact with your unit doctor is weighted in PIM/PIM2. |
| Format | Numerical value (e.g. 6). Units: mmol per litre. |
| Expected range: | -30 to +20; validation check if range outside -40 to +30. |

Lactate in arterial, capillary or venous blood

| | |
|-----------------------|---|
| Definition | <p>The first blood lactate value measured and recorded from the arterial, capillary or venous blood gas following first contact between the patient and a specialist paediatric intensive care doctor or nurse practitioner.</p> <p>First contact with a specialist paediatric intensive care doctor or nurse practitioner, refers to first face-to-face (not telephone) contact in your own hospital (on your ICU, emergency department or ward) or another hospital/unit on retrieval.</p> <p>Data that are available to the specialist paediatric intensive care doctor or nurse practitioner at first contact that are current at that time are acceptable. In cases of doubt record the earliest measurement that was current at time of first contact.</p> |
| Reason | Blood lactate at first contact may predict outcome and be valuable alongside PIM2. |
| Format | <p>Numerical value, to 1 decimal place (e.g. 3.1).</p> <p>Units: mmol per litre.</p> |
| Expected range | 0.5 – 15.0: mmol per litre; validation check if range outside 0.2 to 18.0 |

Mechanical ventilation during first hour

| | |
|-------------------|---|
| Definition | <p>Specifies whether mechanical ventilation was administered at any time during the first hour of first face to face contact with a specialist paediatric intensive care doctor or nurse practitioner.</p> <p>First contact with a specialist paediatric intensive care doctor or nurse practitioner refers to first face-to-face contact in your own hospital (on your ICU, emergency department or ward), or another hospital/unit on retrieval.</p> <p>Ventilation is defined as where all or some of the breaths, or a portion of the breaths (pressure support) are delivered by a mechanical device. Ventilation can simply be defined as a treatment where some or all of the energy required to increase lung volume during inspiration is supplied by a mechanical device.</p> <p>High frequency, jet ventilators, negative pressure ventilators and BiPAP are all considered as mechanical ventilation.</p> <p>CPAP, ECMO and IVOX are not considered as mechanical ventilation, however most patients on ECMO and IVOX are usually also being ventilated.</p> |
| Reason | Mechanical ventilation during the first hour of admission to the paediatric intensive care service is weighted in PIM/PIM2. |
| Format | <p>Choose from one of the following:</p> <ul style="list-style-type: none">YesNoUnknown |

CPAP during first hour

| | |
|-------------------|--|
| Definition | <p>Identifies whether the child receives CPAP during the first hour of first face to face contact with a specialist paediatric intensive care doctor or nurse practitioner.</p> <p>First contact with a specialist paediatric intensive care doctor or nurse practitioner refers to first face-to-face contact in your own hospital (on your ICU, emergency department or ward) or another hospital/unit on retrieval.</p> <p>CPAP may be given by via an endotracheal tube, tracheostomy, facial CPAP mask or nasal CPAP mask / prongs.</p> |
| Reason | CPAP given during the first hour of admission to the paediatric intensive care service is weighted in PIM/PIM2. |
| Format | Choose from one of the following: Yes No Unknown |

Pupil reaction

| | |
|-------------------|---|
| Definition | <p>The first observed pupillary reaction measured and recorded following first contact between the patient and a specialist paediatric intensive care doctor or nurse practitioner.</p> <p>First contact with a specialist paediatric intensive care doctor or nurse practitioner refers to first face-to-face (not telephone) contact in your own hospital (on your ICU, emergency department or ward) or another hospital/unit on retrieval.</p> <p>Data that are available to the specialist paediatric intensive care doctor or nurse practitioner at first contact that are current at that time are acceptable. In cases of doubt record the earliest measurement that was current at time of first contact.</p> <p>Only record as 'Both fixed and dilated' if both pupils are greater than 3mm and both are fixed.</p> <p>Pupil reactions are used as an index of brain function. Do not record a pupil reaction as being fixed if it is due to toxins, drugs, local injury to the eye or chronically altered from a previous disease.</p> <p>Pupil reaction must be assessed by exposure to strong direct light.</p> |
| Reason | Pupil reaction at first contact with your transport doctor is weighted in PIM/PIM2. |
| Format | Choose from one of the following: Both fixed and dilated Other reaction Unknown |

Comments

| | |
|-------------------|---|
| Definition | <p>Any additional information considered relevant to the admission.</p> <p>Text entered in this field may provide extra information about data entered elsewhere in a specific field in the dataset, or may provide extra information on the admission, which is not collected as part of the dataset.</p> <p>No identifiers (patient, nurse, doctor, ICU, hospital) should be included in text data entered into this field.</p> <p>As there is limited space in this field all text data should be kept to a minimum and be as concise as possible. Text data must not contain any punctuation except a period (full-stop) at the end of each data point.</p> |
| Reason | <p>No dataset specification covers all eventualities: to deal with this a text field has been included for comments/additional information.</p> |
| Format | <p>Free text</p> |

Appendix A: Referral data collection form

[Placeholder for Referral data collection form page 1 of 1]

Appendix B: Transport data collection form

[Placeholder for Transport data collection form page 1 of 2]

[Placeholder for Transport data collection form page 2 of 2]

Appendix C: Flow chart

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