Screening Instructions

This manual describes how to screen participants for TTM2 using the online tool. All participants with out-of-hospital cardiac arrest, and return of spontaneous circulation should be screened.

Contents

1 Access to the online screening tool

The website can be accessed in two different ways.

- **Via the webpage**

  Click *Login* at the top-right corner of www.ttm2trial.org

- **Direct link**

  Use https://tt.spinnakersoftware.com/Login/

  The website might at times be somewhat slow, please be patient and keep in mind that this is due to necessary security features.

2 Username and Password

User accounts are administrated by ttm2@ttm2trial.org. Please contact us if you need to set up a new account.

There are several different types of user accounts

- **Investigator**

  Person account - bound to an email adress.

- **Shared User**

  Non-email address bound users that multiple clinicians can use. Can be distributed to all clinicians who participate in patient screening at a site.

- **TEST accounts** A generic test account is available for all countries:

  Username: ttm2test // Password: cardiacarrest

  This test account accepts ROSC and randomisation times outside of the 180 minute window - to allow for all time zones.

3   Locations

It is very important that each user is aware of which location they have been invited to and are able to access. Investigators and Shared Users only have access to the site which they have been invited to. Location codes consist of a two-letter country code (SW for Sweden, IT for Italy, etc.) and a 3-digit site code. Site numbers are created successively (001, 002 etc).

4   Time of ROSC

At times it might be difficult to know what time of ROSC to use, especially if there a recurrent need for chest compressions, or an arrhythmia that necessitates defibrillation.

**If the participant has a second arrest:**

- Use the first time of ROSC if there was more than 20 minutes from the end of the first event (end of CPR) to the start of the next event (rearrest)

- Use the second time of ROSC if there was less than 20 minutes from the end of the first even to the next (no sustained ROSC between events

If the participant is defibrillated - without prior chest compressions

- Disregard time of defibrillation - this should not be considered as a second arrest

5 Screening a participant

Make sure that you have logged in using the right site and not a test location. You can see the location in the top right corner of the webpage. Press the "Screen patient" button that will be immediately visible upon logging in.
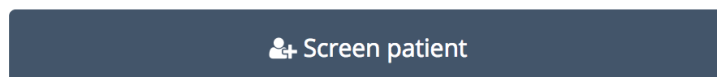
1. **STEP 1 - Demographics**

   Enter patients initials, date of birth, sex at birth and date and time of ROSC. Please note that all dates will be in the format dd-MMM-yyyy, with month being denoted by three characters, (i.e 01-jan-2018). All times will be in the 24-hour format HH:MM. (i.e. 18.00 and not 6pm). If data on date of birth and/or initials aren't available, the box "Unknown at this time" can be checked.

   Please note that even if "Date of birth" defaults to the current date, dates between 1900 and 1980 are easily accessible by clicking on the arrow and then on the current year. This will make scrolling between decades easier. The date can also be entered manually.

2. **STEP 2 - Inclusion and Exclusion criteria**

   When filling in inclusion criteria, "age" will automatically be filled in based on the data in STEP 1. For more details on inclusion and exclusion criteria, please see the trial protocol.

6 Erroneous data

In the case where it becomes evident that initial data were erroneous, for example it becomes clear that the cause of arrest was not cardiac the intervention should if possible proceed as planned, and data should be collected. The participant should not be excluded. This also applies to the case where time of ROSC is revised and retrospectively puts the patient outside the inclusion window. These types of errors reflect real world conditions and are expected in study on out-of-hospital cardiac arrest.