



Improving Outcomes from Pre-hospital and Emergency Care across the Asia-Pacific

STUDY PROPOSAL REQUEST FORM

Please complete the form and email to Swee Sung at sweesung.soon@scri.edu.sg by the stipulated date. You will be notified in due time on whether your study has been accepted for presentation.

1. BASIC INFORMATION

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2. TYPE OF REQUEST (Please select one)

New Study Proposal (initial)

Secondary Analyses

Explanatory Analyses

3. STUDY TITLE

Interaction effects of communities and advanced airway management on survival after out-of-hospital cardiac arrest; Multi-level analysis.

4. ABSTRACT OF STUDY PROPOSAL

In **no more than 350 words**, describe the study under the given headings below.

Objectives/Hypotheses

- The effects of prehospital advanced airway on outcomes of OHCA patients are controversial. (1~3).
- This study aimed to evaluate the interaction effects of advanced airway management on survival after out-of-hospital cardiac arrest.

Methodology (To include sample size, settings, inclusion & exclusion criteria, etc. For secondary & explanatory analyses: include statistical plan, type of analyses, measurement, etc.)

- This is a prospective, international, multi-center cohort study across the Asia-Pacific (Japan, Singapore, Taiwan, Korea) on out-of-hospital cardiac arrest. Each participating country provided between 1.5 and 2.5 years of data from January 2009 to December 2012. Patients with EMS-treated OHCA of presumed cardiac origin were analyzed, excluding those who had no information of prehospital advanced airway or OHCA outcomes, as well as those whose arrest occurred in ambulance. Main exposure variable was prehospital advanced airway including endotracheal intubation and supra-glottic airway. Primary end point was survival to discharge. Secondary end point was neurologic recovery at discharge. We performed multilevel logistic regression analysis adjusting for patient's demographics, witnessed status, bystander CPR, initial shockable rhythm, EMS response time interval and community.

Trial Coordinating Centre / Secretariat

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2. Limit total number of slides to not more than 12. The following are the recommended number of slides for each section.
 - a. Introduction – maximum of 2 slides
 - b. Objectives/Hypotheses – maximum of 2 slides
 - c. Methodology – maximum of 6 slides
 - d. Significance – maximum of 2 slides

3. Try to use big fonts and contrasting colours to increase readability e.g.
 - a. Black/dark blue font against white background
 - b. White/yellow font against black background
 - c. Black font against blue background

For any enquiries, please contact Swee Sung at sweesung.soon@scri.edu.sg.