



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

STUDY PROPOSAL REQUEST FORM

Please complete the form and email to PAROS secretariat at patricia.tay@scri.cris.sg by the stipulated date. You will be notified in due time on whether your study has been accepted for presentation.

Reminder: Please check the list of existing proposals and publications from

<https://www.scri.edu.sg/crn/pan-asian-resuscitation-outcomes-study-paros-clinical-research-network-crn/paros-publications/> to avoid duplications of proposals. Abstract and manuscript must be sent to PAROS chairs for approval before submission for presentation/publication.

1. BASIC INFORMATION

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2. TYPE OF REQUEST (Please select one)

<input checked="" type="checkbox"/> New Study Proposal (initial)	<input type="checkbox"/> Secondary Analyses	<input type="checkbox"/> Explanatory Analyses
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3. STUDY TITLE

Universal Termination of Resuscitation (TOR) rules and health economic outcomes if TOR is applied to the Out-of-Hospital Cardiac Arrest (OHCA) patients in Asia

4. ABSTRACT OF STUDY PROPOSAL

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

Objectives/Hypotheses

- TOR is not standard practice for the OHCA patients in Asia. As the ageing population increases in these countries and the rate of deaths from non-communicable diseases in the form of OHCA increases, there is a need to consider the suitability of TOR protocols in these pre-hospital systems. Such protocols can help reduce the burden of futile resuscitation attempts and burden of OHCA survivors with poor neurological outcomes on an already stretched health system.
- However, it is important to implement TOR protocols safely following validation in the local context.
- Hence the primary objective is to determine the changes in the number of ambulance transports, hospital admissions and people with poor neurological outcomes that will occur if the TOR is implemented on Asian OHCA cases.
- The secondary objective is to conduct a health economic assessment and estimate the potential economic evaluation of implementing TOR in Asian EMS systems.

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

- Settings: Use of PAROS dataset to look at the OHCA within countries in Asia
- Inclusion criteria: All non-traumatic OHCA cases above the age of 16.
- Exclusion criteria: Age 16 or below/ Non-cardiac cause of the arrest/ Trauma as cause of arrest/ Patient was visibly dead onsite from rigor mortis, lividity, decomposition or decapitation/ Paramedics were presented with a 'Do Not Resuscitate' order.
- Sensitivity, specificity and predictive models, together with ROC curves will be used to validate the Universal TOR rules on the data set.
- Markov model will be used to evaluate the changes in the number of transports, hospital

Secretariat

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- 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 PAROS secretariat at paros.secretariat@yahoo.com

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