Data Set Name: ae.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	aeformidx	Num	8		Form Index
15	visitname	Char	1024	$1024.	Visit Name
16	aedt	Num	8	BEST12.	Date of the event (Day)
17	aetm	Num	8	TIMEAMPM.	Time of the event
18	protalta	Num	8		Protocol Specified ALTA AE
19	protaltac	Char	20	$20.	Protocol Specified ALTA AE
20	prottypealta	Num	8		Protocol Specified ALTA AE type
21	prottypealtac	Char	109	$109.	Protocol Specified ALTA AE type
22	protedom	Num	8		Protocol Specified EDEN/Omega AE
23	protedomc	Char	26	$26.	Protocol Specified EDEN/Omega AE
24	prottypeedom	Num	8		EDEN/Omega Contraindication
25	prottypeedomc	Char	39	$39.	EDEN/Omega Contraindication
26	costart	Char	255	$255.	Name of event if not a protocol specified event
27	aesever	Num	8		Severity of Event
28	aeseverc	Char	8	$8.	Severity of Event
29	expectalta	Num	8		Was event or severity unexpected ALTA
30	expectaltac	Char	20	$20.	Was event or severity unexpected ALTA
31	expectedom	Num	8		Was event or severity unexpected ED/OM
32	expectedomc	Char	26	$26.	Was event or severity unexpected ED/OM
33	causealta	Num	8		Causal relationship to ALTA study drug?
34	causealtac	Char	25	$25.	Causal relationship to ALTA study drug?
35	causeedom	Num	8		Causal relationship to EDEN/Omega procedures?
36	causeedomc	Char	26	$26.	Causal relationship to EDEN/Omega procedures?
37	wdrawalta	Num	8		Was the ALTA study drug permanently discontinued?

Num	Variable	Type	Len	Format	Label
38	wdrawaltac	Char	20	$20.	Was the ALTA study drug permanently discontinued?
39	wdrawaltadt	Num	8	BEST12.	Date of ALTA study drug withdrawal: (Day)
40	wdrawomega	Num	8		Was the Omega study drug permanently discontinued?
41	wdrawomegac	Char	26	$26.	Was the Omega study drug permanently discontinued?
42	wdrawomegadt	Num	8	BEST12.	Date of Omega study drug withdrawal: (Day)
43	wdraweden	Num	8		Were the EDEN study procedures permanently discontinued?
44	wdrawedenc	Char	26	$26.	Were the EDEN study procedures permanently discontinued?
45	wdrawedendt	Num	8	BEST12.	Date of EDEN study procedures discontinued: (Day)
46	aestatus	Num	8		Status of this adverse event at the time of initial AE report:
47	aestatusc	Char	31	$31.	Status of this adverse event at the time of initial AE report:
48	aerecdt	Num	8	BEST12.	If recovered, date: (Day)
49	aeoutcome	Num	8		Final outcome of this AE?
50	aeoutcomec	Char	31	$31.	Final outcome of this AE?
51	aefinrecdt	Num	8	BEST12.	If recovered: date (Day)
52	causestudy	Num	8		Causal relationship to study procedures?
53	causestudyc	Char	26	$26.	Causal relationship to study procedures?
54	causepicco	Num	8		Causal relationship to PICCO procedures?
55	causepiccoc	Char	26	$26.	Causal relationship to PICCO procedures?
56	aereviewed	Num	8		Has a site investigator reviewed this adverse event?
57	aereviewedc	Char	3	$3.	Has a site investigator reviewed this adverse event?

Data Set Name: ae_costart.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	severityc	Char	15		
3	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
4	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
5	altapatient	Num	8		
6	omegapatient	Num	8		
7	edenpatient	Num	8		
8	alta	Char	20		
9	altachar	Char	20		
10	omega	Char	20		
11	omegachar	Char	20		
12	eden	Char	20	$EDENHID.	
13	edenchar	Char	12		EDEN
14	visit	Num	8		
15	aeformidx	Num	8		Form Index
16	visitname	Char	1024	$1024.	Visit Name
17	aedt	Num	8	BEST12.	Date of the event (Day)
18	aetm	Num	8	TIMEAMPM.	Time of the event
19	protalta	Num	8		Protocol Specified ALTA AE
20	protaltac	Char	20	$20.	Protocol Specified ALTA AE
21	prottypealta	Num	8		Protocol Specified ALTA AE type
22	prottypealtac	Char	109	$109.	Protocol Specified ALTA AE type
23	protedom	Num	8		Protocol Specified EDEN/Omega AE
24	protedomc	Char	26	$26.	Protocol Specified EDEN/Omega AE
25	prottypeedom	Num	8		EDEN/Omega Contraindication
26	prottypeedomc	Char	39	$39.	EDEN/Omega Contraindication
27	costart	Char	255	$255.	Name of event if not a protocol specified event
28	aesever	Num	8		Severity of Event
29	aeseverc	Char	8	$8.	Severity of Event
30	expectalta	Num	8		Was event or severity unexpected ALTA
31	expectaltac	Char	20	$20.	Was event or severity unexpected ALTA
32	expectedom	Num	8		Was event or severity unexpected ED/OM
33	expectedomc	Char	26	$26.	Was event or severity unexpected ED/OM
34	causealta	Num	8		Causal relationship to ALTA study drug?
35	causealtac	Char	25	$25.	Causal relationship to ALTA study drug?
36	causeedom	Num	8		Causal relationship to EDEN/Omega procedures?

Num	Variable	Type	Len	Format	Label
37	causeedomc	Char	26	$26.	Causal relationship to EDEN/Omega procedures?
38	wdrawalta	Num	8		Was the ALTA study drug permanently discontinued?
39	wdrawaltac	Char	20	$20.	Was the ALTA study drug permanently discontinued?
40	wdrawaltadt	Num	8	BEST12.	Date of ALTA study drug withdrawal: (Day)
41	wdrawomega	Num	8		Was the Omega study drug permanently discontinued?
42	wdrawomegac	Char	26	$26.	Was the Omega study drug permanently discontinued?
43	wdrawomegadt	Num	8	BEST12.	Date of Omega study drug withdrawal: (Day)
44	wdraweden	Num	8		Were the EDEN study procedures permanently discontinued?
45	wdrawedenc	Char	26	$26.	Were the EDEN study procedures permanently discontinued?
46	wdrawedendt	Num	8	BEST12.	Date of EDEN study procedures discontinued: (Day)
47	aestatus	Num	8		Status of this adverse event at the time of initial AE report:
48	aestatusc	Char	31	$31.	Status of this adverse event at the time of initial AE report:
49	aerecdt	Num	8	BEST12.	If recovered, date: (Day)
50	aeoutcome	Num	8		Final outcome of this AE?
51	aeoutcomec	Char	31	$31.	Final outcome of this AE?
52	aefinrecdt	Num	8	BEST12.	If recovered: date (Day)
53	causestudy	Num	8		Causal relationship to study procedures?
54	causestudyc	Char	26	$26.	Causal relationship to study procedures?
55	causepicco	Num	8		Causal relationship to PICCO procedures?
56	causepiccoc	Char	26	$26.	Causal relationship to PICCO procedures?
57	aereviewed	Num	8		Has a site investigator reviewed this adverse event?
58	aereviewedc	Char	3	$3.	Has a site investigator reviewed this adverse event?
59	shock	Num	8	YES1NO0F.	
60	body_system	Char	20		
61	aeterm	Char	255		AE Term
62	eden_numeric	Num	8		
63	omega_numeric	Num	8		
64	dummy_subject	Num	8		
65	severity	Num	8	SEVERITY.	Severity
66	dummystrat	Num	8		

Data Set Name: ae_costart_disc.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	severityc	Char	15		
3	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
4	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
5	altapatient	Num	8		
6	omegapatient	Num	8		
7	edenpatient	Num	8		
8	alta	Char	20		
9	altachar	Char	20		
10	omega	Char	20		
11	omegachar	Char	20		
12	eden	Char	20	$EDENHID.	
13	edenchar	Char	12		EDEN
14	visit	Num	8		
15	aeformidx	Num	8		Form Index
16	visitname	Char	1024	$1024.	Visit Name
17	aedt	Num	8	BEST12.	Date of the event (Day)
18	aetm	Num	8	TIMEAMPM.	Time of the event
19	protalta	Num	8		Protocol Specified ALTA AE
20	protaltac	Char	20	$20.	Protocol Specified ALTA AE
21	prottypealta	Num	8		Protocol Specified ALTA AE type
22	prottypealtac	Char	109	$109.	Protocol Specified ALTA AE type
23	protedom	Num	8		Protocol Specified EDEN/Omega AE
24	protedomc	Char	26	$26.	Protocol Specified EDEN/Omega AE
25	prottypeedom	Num	8		EDEN/Omega Contraindication
26	prottypeedomc	Char	39	$39.	EDEN/Omega Contraindication
27	costart	Char	255	$255.	Name of event if not a protocol specified event
28	aesever	Num	8		Severity of Event
29	aeseverc	Char	8	$8.	Severity of Event
30	expectalta	Num	8		Was event or severity unexpected ALTA
31	expectaltac	Char	20	$20.	Was event or severity unexpected ALTA
32	expectedom	Num	8		Was event or severity unexpected ED/OM
33	expectedomc	Char	26	$26.	Was event or severity unexpected ED/OM
34	causealta	Num	8		Causal relationship to ALTA study drug?
35	causealtac	Char	25	$25.	Causal relationship to ALTA study drug?
36	causeedom	Num	8		Causal relationship to EDEN/Omega procedures?

Num	Variable	Type	Len	Format	Label
37	causeedomc	Char	26	$26.	Causal relationship to EDEN/Omega procedures?
38	wdrawalta	Num	8		Was the ALTA study drug permanently discontinued?
39	wdrawaltac	Char	20	$20.	Was the ALTA study drug permanently discontinued?
40	wdrawaltadt	Num	8	BEST12.	Date of ALTA study drug withdrawal: (Day)
41	wdrawomega	Num	8		Was the Omega study drug permanently discontinued?
42	wdrawomegac	Char	26	$26.	Was the Omega study drug permanently discontinued?
43	wdrawomegadt	Num	8	BEST12.	Date of Omega study drug withdrawal: (Day)
44	wdraweden	Num	8		Were the EDEN study procedures permanently discontinued?
45	wdrawedenc	Char	26	$26.	Were the EDEN study procedures permanently discontinued?
46	wdrawedendt	Num	8	BEST12.	Date of EDEN study procedures discontinued: (Day)
47	aestatus	Num	8		Status of this adverse event at the time of initial AE report:
48	aestatusc	Char	31	$31.	Status of this adverse event at the time of initial AE report:
49	aerecdt	Num	8	BEST12.	If recovered, date: (Day)
50	aeoutcome	Num	8		Final outcome of this AE?
51	aeoutcomec	Char	31	$31.	Final outcome of this AE?
52	aefinrecdt	Num	8	BEST12.	If recovered: date (Day)
53	causestudy	Num	8		Causal relationship to study procedures?
54	causestudyc	Char	26	$26.	Causal relationship to study procedures?
55	causepicco	Num	8		Causal relationship to PICCO procedures?
56	causepiccoc	Char	26	$26.	Causal relationship to PICCO procedures?
57	aereviewed	Num	8		Has a site investigator reviewed this adverse event?
58	aereviewedc	Char	3	$3.	Has a site investigator reviewed this adverse event?
59	shock	Num	8	YES1NO0F.	
60	body_system	Char	20		
61	aeterm	Char	255		AE Term
62	eden_numeric	Num	8		
63	omega_numeric	Num	8		
64	dummy_subject	Num	8		
65	severity	Num	8	SEVERITY.	Severity
66	dummystrat	Num	8		

Data Set Name: ae_fu.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	nocallreas	Char	255	$255.	Follow up call not completed other reason
16	callcomp	Num	8		Was follow up call completed?
17	callcompc	Char	58	$58.	Was follow up call completed?
18	funewcond	Num	8		Has subject developed a new medical problem or sought medical attention for new medical problem in the week following last dose?
19	funewcondc	Char	3	$3.	Has subject developed a new medical problem or sought medical attention for new medical problem in the week following last dose?
20	fureadmit	Num	8		Has patient been readmitted to the hospital for any reason in the 7 days after the last dose?
21	fureadmitc	Char	3	$3.	Has patient been readmitted to the hospital for any reason in the 7 days after the last dose?

Data Set Name: alch_smk.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	alchfreq	Num	8		How often do you have a drink containing alcohol?
16	alchfreqc	Char	27	$27.	How often do you have a drink containing alcohol?
17	alchnum	Num	8		How many drinks containing alcohol do you have on a typical day when you are drinking?
18	alchnumc	Char	10	$10.	How many drinks containing alcohol do you have on a typical day when you are drinking?
19	alch6freq	Num	8		How often do you have six or more drinks on one occasion?
20	alch6freqc	Char	21	$21.	How often do you have six or more drinks on one occasion?
21	alchstop	Num	8		How often during the last year have you found you were not able to stop drinking once you had started?
22	alchstopc	Char	21	$21.	How often during the last year have you found you were not able to stop drinking once you had started?
23	alchfail	Num	8		How often during the last year have you failed to do what was normally expected from you because of drinking?
24	alchfailc	Char	21	$21.	How often during the last year have you failed to do what was normally expected from you because of drinking?
25	alchmorning	Num	8		How often during the last year have you needed a first drink in the morning to get yourself going after a heavy drinking session?
26	alchmorningc	Char	21	$21.	How often during the last year have you needed a first drink in the morning to get yourself going after a heavy drinking session?
27	alchguilt	Num	8		How often during the last year have you had a feeling of guilt or remorse after drinking?
28	alchguiltc	Char	21	$21.	How often during the last year have you had a feeling of guilt or remorse after drinking?
29	alchmemory	Num	8		How often during the last year have you been unable to remember what happened the night before because you had been drinking?
30	alchmemoryc	Char	21	$21.	How often during the last year have you been unable to remember what happened the night before because you had been drinking?

Num	Variable	Type	Len	Format	Label
31	alchinjury	Num	8		Have you or someone else been injured as a result of your drinking?
32	alchinjuryc	Char	29	$29.	Have you or someone else been injured as a result of your drinking?
33	alchconcern	Num	8		Has a relative or friend or a doctor or another health worker been concerned about your drinking or suggested you cut down?
34	alchconcernc	Char	29	$29.	Has a relative or friend or a doctor or another health worker been concerned about your drinking or suggested you cut down?
35	smoker	Num	8		Ever smoker (> 100 cigarettes in lifetime)?
36	smokerc	Char	3	$3.	Ever smoker (> 100 cigarettes in lifetime)?
37	packyr	Num	8		If ever smoker, estimate pack years: (Pack years = [# packs per day] x [# years smoked])
38	cursmoker	Num	8		Current Smoker?
39	cursmokerc	Char	14	$14.	Current Smoker?
40	smokequitdt	Num	8	BEST12.	When Quit Smoking (Day)
41	alchfreqX	Char	64	$64.	How often do you have a drink containing alcohol? (Not Done)
42	alchnumX	Char	64	$64.	How many drinks containing alcohol do you have on a typical day when you are drinking? (Not Done)
43	alch6freqX	Char	64	$64.	How often do you have six or more drinks on one occasion? (Not Done)
44	alchstopX	Char	64	$64.	How often during the last year have you found you were not able to stop drinking once you had started? (Not Done)
45	alchfailX	Char	64	$64.	How often during the last year have you failed to do what was normally expected from you because of drinking? (Not Done)
46	alchmorningX	Char	64	$64.	How often during the last year have you needed a first drink in the morning to get yourself going after a heavy drinking session? (Not Done)
47	alchguiltX	Char	64	$64.	How often during the last year have you had a feeling of guilt or remorse after drinking? (Not Done)
48	alchmemoryX	Char	64	$64.	How often during the last year have you been unable to remember what happened the night before because you had been drinking? (Not Done)
49	alchinjuryX	Char	64	$64.	Have you or someone else been injured as a result of your drinking? (Not Done)
50	alchconcernX	Char	64	$64.	Has a relative or friend or a doctor or another health worker been concerned about your drinking or suggested you cut down? (Not Done)
51	smokerX	Char	64	$64.	Ever smoker (> 100 cigarettes in lifetime) (Not Done)?
52	packyrX	Char	64	$64.	If ever smoker, estimate pack years: (Not Done)
53	cursmokerX	Char	64	$64.	Current Smoker?

Data Set Name: alta_dose.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	doseindex	Num	8		Dose index
15	visitname	Char	1024	$1024.	Visit Name
16	altadose	Num	8		ALTA Dose:
17	altadosec	Char	20	$20.	ALTA Dose:
18	altanodose	Num	8		Dose None, select reason
19	altanodosec	Char	61	$61.	Dose None, select reason
20	altanodoseoth	Char	255	$255.	If dose "other", indicate reason
21	altadosetm	Num	8	TIMEAMPM.	Time dose initiated:
22	altadosecomp	Num	8		Was dose completed?
23	altadosecompc	Char	18	$18.	Was dose completed?
24	altastopreas	Num	8		Dose not completed, select reason
25	altastopreasc	Char	61	$61.	Dose not completed, select reason
26	altastopoth	Char	255	$255.	If "other", indicate reason
27	hrpre	Num	8		HR-pre:
28	hrpost	Num	8		HR-post:
29	hrmax	Num	8		Max HR from time of aerosolization to 15 min
30	sbppre	Num	8		SBP-pre:
31	sbppost	Num	8		SBP-post:
32	altadosex	Char	64	$64.	ALTA Dose: (Not Done)
33	altadosecompx	Char	64	$64.	Was dose completed? (Not Done)

Data Set Name: apache_abg.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	abg24	Num	8		Were any ABGs completed in the 24 hours preceding randomization?
16	abg24c	Char	3	$3.	Were any ABGs completed in the 24 hours preceding randomization?
17	abg24X	Char	64	$64.	Were any ABGs completed in the 24 hours preceding randomization? (Not Done)

Data Set Name: apache_abg2.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	abgidx	Num	8		Form index
15	visitname	Char	1024	$1024.	Visit Name
16	fio2abg	Num	8		FiO2:
17	pao2abg	Num	8		PaO2 (mmHg):
18	paco2abg	Num	8		PaCO2 (mmHg):
19	phabg	Num	8		pH:
20	intubat	Num	8		Intubated when ABG obtained:
21	intubatc	Char	3	$3.	Intubated when ABG obtained:
22	fio2abgx	Char	64	$64.	FiO2: (Not Done)
23	pao2abgX	Char	64	$64.	PaO2 (mmHg): (Not Done)
24	paco2abgX	Char	64	$64.	PaCO2 (mmHg): (Not Done)
25	phabgX	Char	64	$64.	pH: (Not Done)
26	intubatX	Char	64	$64.	Intubated when ABG obtained: (Not Done)

Data Set Name: apache_demog.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	hasddt	Num	8	BEST12.	Hospital Admission Date (Day)
16	admtype	Num	8		Hospital Admission Type
17	admtypec	Char	20	$20.	Hospital Admission Type
18	admother	Char	50	$50.	Hospital Admission Type: Other
19	icudt	Num	8	BEST12.	ICU Admission Date (Day)
20	icutm	Num	8	TIMEAMPM.	Time of ICU Admission
21	admitfrom	Num	8		Patient Admitted Directly From
22	admitfromc	Char	25	$25.	Patient Admitted Directly From
23	reside	Num	8		Place of residence prior to hospitalization
24	residec	Char	63	$63.	Place of residence prior to hospitalization
25	surgel	Num	8		Patient post-operative elective surgery?
26	surgelc	Char	3	$3.	Patient post-operative elective surgery?
27	icureadmit	Num	8		ICU Readmit
28	icureadmitc	Char	3	$3.	ICU Readmit
29	readmit24	Num	8		ICU Readmit within 24 hours
30	readmit24c	Char	3	$3.	ICU Readmit within 24 hours
31	healthinfo	Num	8		Chronic health information available
32	healthinfoc	Char	3	$3.	Chronic health information available
33	chrondial	Num	8		Patient on chronic or peritoneal dialysis
34	chrondialc	Char	3	$3.	Patient on chronic or peritoneal dialysis
35	aids	Num	8		AIDS (does not include only HIV +)
36	aidsc	Char	3	$3.	AIDS (does not include only HIV +)

Num	Variable	Type	Len	Format	Label
37	leuk	Num	8		Leukemia (AML, CML, ALL, multiple myeloma)
38	leukc	Char	3	$3.	Leukemia (AML, CML, ALL, multiple myeloma)
39	lymph	Num	8		Non-Hodgekins Lymphoma
40	lymphc	Char	3	$3.	Non-Hodgekins Lymphoma
41	tumor	Num	8		Solid tumor with metastasis
42	tumorc	Char	3	$3.	Solid tumor with metastasis
43	immune	Num	8		Immune Suppression w/in past 6 mths
44	immunec	Char	3	$3.	Immune Suppression w/in past 6 mths
45	hepa	Num	8		Hepatic Failure with coma or encephalo.
46	hepac	Char	3	$3.	Hepatic Failure with coma or encephalo.
47	cirr	Num	8		Cirrhosis
48	cirrc	Char	3	$3.	Cirrhosis
49	diab	Num	8		Diabetes Mellitus
50	diabc	Char	3	$3.	Diabetes Mellitus
51	hyper	Num	8		History of hypertension
52	hyperc	Char	3	$3.	History of hypertension
53	myocard	Num	8		Prior myocardial infarction
54	myocardc	Char	3	$3.	Prior myocardial infarction
55	heart	Num	8		Congestive heart failure
56	heartc	Char	3	$3.	Congestive heart failure
57	vascular	Num	8		Peripheral Vascular Disease
58	vascularc	Char	3	$3.	Peripheral Vascular Disease
59	aestroke	Num	8		Prior stroke with Sequel AE
60	aestrokec	Char	3	$3.	Prior stroke with Sequel AE
61	dementia	Num	8		Dementia
62	dementiac	Char	3	$3.	Dementia
63	chrpulm	Num	8		Chronic pulmonary disease
64	chrpulmc	Char	3	$3.	Chronic pulmonary disease
65	arthritis	Num	8		Arthritis
66	arthritisc	Char	3	$3.	Arthritis
67	ulcer	Num	8		Peptic Ulcer Disease
68	ulcerc	Char	3	$3.	Peptic Ulcer Disease
69	vasol24	Num	8		Vasopressors in the 24 hours prior to randomization
70	vasol24c	Char	3	$3.	Vasopressors in the 24 hours prior to randomization
71	hasddtX	Char	64	$64.	Hospital Admission Date (Not Done)
72	admtypeX	Char	64	$64.	Hospital Admission Type (Not Done)
73	icudtx	Char	64	$64.	ICU Admission Date (Not Done)
74	icutmx	Char	64	$64.	Time of ICU Admission (Not Done)
75	admitfromX	Char	64	$64.	Patient Admitted Directly From (Not Done)

Num	Variable	Type	Len	Format	Label
76	resideX	Char	64	$64.	Place of residence prior to hospitalization (Not Done)
77	surgelX	Char	64	$64.	Patient post-operative elective surgery? (Not Done)
78	icureadmitX	Char	64	$64.	ICU Readmit (Not Done)
79	readmit24X	Char	64	$64.	ICU Readmit within 24 hours (Not Done)
80	healthinfoX	Char	64	$64.	Chronic health information available (Not Done)
81	chrondialX	Char	64	$64.	Patient on chronic or peritoneal dialysis (Not Done)
82	aidsX	Char	64	$64.	AIDS (does not include only HIV +) (Not Done)
83	leukX	Char	64	$64.	Leukemia (AML, CML, ALL, multiple myeloma) (Not Done)
84	lymphX	Char	64	$64.	Non-Hodgekins Lymphoma (Not Done)
85	tumorX	Char	64	$64.	Solid tumor with metastasis (Not Done)
86	immuneX	Char	64	$64.	Immune Suppression w/in past 6 mths (Not Done)
87	hepaX	Char	64	$64.	Hepatic Failure with coma or encephalo. (Not Done)
88	cirrX	Char	64	$64.	Cirrhosis (Not Done)
89	diabX	Char	64	$64.	Diabetes Mellitus (Not Done)
90	hyperX	Char	64	$64.	History of hypertension (Not Done)
91	myocardX	Char	64	$64.	Prior myocardial infarction (Not Done)
92	heartX	Char	64	$64.	Congestive heart failure (Not Done)
93	vascularX	Char	64	$64.	Peripheral Vascular Disease (Not Done)
94	aestrokeX	Char	64	$64.	Prior stroke with Sequel AE (Not Done)
95	dementiaX	Char	64	$64.	Dementia (Not Done)
96	chrpulmX	Char	64	$64.	Chronic pulmonary disease (Not Done)
97	arthritisX	Char	64	$64.	Arthritis (Not Done)
98	ulcerX	Char	64	$64.	Peptic Ulcer Disease (Not Done)

Data Set Name: apache_phys.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	templ	Num	8		Lowest Temperature in Celcius
16	temph	Num	8		Highest Temperature in Clecius
17	sysbpl	Num	8		Lowest Systolic BP
18	sysbph	Num	8		Highest Systolic BP
19	mapl	Num	8		Lowest Mean Arterial Pressure
20	maph	Num	8		Highest Mean Arterial Pressure
21	hratel	Num	8		Lowest Heart Rate (beats/min)
22	hrateh	Num	8		Highest Heart Rate (beats/min)
23	respl	Num	8		Lowest Respiratory Rate (breaths/min)
24	resph	Num	8		Highest Respiratory Rate (breaths/min)
25	ventl	Num	8		Patient ventilated at lowest resp. rate
26	ventlc	Char	3	$3.	Patient ventilated at lowest resp. rate
27	venth	Num	8		Patient ventilated at highest resp. rate
28	venthc	Char	3	$3.	Patient ventilated at highest resp. rate
29	urineout	Num	8		Urine output for 24 hours preceding randomization
30	fluidout	Num	8		Total fluid output last 24 hours
31	fluidin	Num	8		Total fluid intake for the 24 hours preceding randomization
32	hcto	Num	8		Hct: Only %
33	hctl	Num	8		Hct: Lowest %
34	hcth	Num	8		Hct: Highest %
35	wbco	Num	8		WBC: Only mm^3
36	wbcl	Num	8		WBC: Lowest mm^3

Num	Variable	Type	Len	Format	Label
37	wbch	Num	8		WBC: Highest mm^3
38	plate	Num	8		Platelets (lowest): x 1000 / mm^3
39	sodiumo	Num	8		Serum Sodium: Only (mEq/L)
40	sodiuml	Num	8		Serum Sodium: Lowest (mEq/L)
41	sodiumh	Num	8		Serum Sodium: Highest (mEq/L)
42	potaso	Num	8		Serum Potassium: Only (mEq/L)
43	potasl	Num	8		Serum Potassium: Lowest (mEq/L)
44	potash	Num	8		Serum Potassium: Highest (mEq/L)
45	bun	Num	8		Serum BUN (highest): (mg/dL)
46	creato	Num	8		Serum Creatinine Only: (mg/dL)
47	creatl	Num	8		Serum Creatinine Lowest: (mg/dL)
48	creath	Num	8		Serum Creatinine Highest: (mg/dL)
49	gluco	Num	8		Serum Glucose Only: (mg/dL)
50	glucl	Num	8		Serum Glucose Lowest: (mg/dL)
51	gluch	Num	8		Serum Glucose Highest: (mg/dL)
52	albumo	Num	8		Serum Albumin Only: (g/dL)
53	albuml	Num	8		Serum Albumin Lowest: (g/dL)
54	albumh	Num	8		Serum Albumin Highest: (g/dL)
55	bilih	Num	8		Serum Bilirubin Highest: (mg/dL)
56	bicarbl	Num	8		Serum Bicarbonate Lowest: (mEq/L)
57	tempX	Char	64	$64.	Highest Temperature in Clecius (Not Done)
58	sysbpX	Char	64	$64.	Highest Systolic BP (Not Done)
59	mapX	Char	64	$64.	Highest Mean Arterial Pressure (Not Done)
60	hrateX	Char	64	$64.	Highest Heart Rate (beats/min) (Not Done)
61	resphlX	Char	64	$64.	Highest Respiratory Rate (breaths/min) (Not Done)
62	ventlX	Char	64	$64.	Patient ventilated at lowest resp. rate (Not Done)
63	venthX	Char	64	$64.	Patient ventilated at highest resp. rate (Not Done)
64	urineoutX	Char	64	$64.	Urine output for 24 hours preceding randomization (Not Done)
65	fluidoutX	Char	64	$64.	Total fluid output last 24 hours (Not Done)
66	fluidinX	Char	64	$64.	Total fluid intake for the 24 hours preceding randomization (Not Done)
67	hctX	Char	64	$64.	Hct: (Not Done)
68	wbcX	Char	64	$64.	WBC: (Not Done)
69	plateX	Char	64	$64.	Platelets (lowest): x 1000 / mm^3 (Not Done)
70	sodiumX	Char	64	$64.	Serum Sodium (mEq/L) (Not Done)
71	potasX	Char	64	$64.	Serum Potassium (mEq/L) (Not Done)
72	bunX	Char	64	$64.	Serum BUN (highest): (mg/dL) (Not Done)
73	creatX	Char	64	$64.	Serum Creatinine: (mg/dL) (Not Done)
74	glucX	Char	64	$64.	Serum Glucose: (mg/dL) (Not Done)
75	albumX	Char	64	$64.	Serum Albumin: (g/dL) (Not Done)

Num	Variable	Type	Len	Format	Label
76	bilihX	Char	64	$64.	Serum Bilirubin Highest: (mg/dL) (Not Done)
77	bicarblx	Char	64	$64.	Serum Bicarbonate Lowest: (mEq/L) (Not Done)

Data Set Name: apachep_fluids_bypt.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	templ	Num	8		Lowest Temperature in Celcius
14	temph	Num	8		Highest Temperature in Clecius
15	sysbpl	Num	8		Lowest Systolic BP
16	sysbph	Num	8		Highest Systolic BP
17	mapl	Num	8		Lowest Mean Arterial Pressure
18	maph	Num	8		Highest Mean Arterial Pressure
19	hratel	Num	8		Lowest Heart Rate (beats/min)
20	hrateh	Num	8		Highest Heart Rate (beats/min)
21	respl	Num	8		Lowest Respiratory Rate (breaths/min)
22	resph	Num	8		Highest Respiratory Rate (breaths/min)
23	ventl	Num	8		Patient ventilated at lowest resp. rate
24	ventlc	Char	3	$3.	Patient ventilated at lowest resp. rate
25	venth	Num	8		Patient ventilated at highest resp. rate
26	venthc	Char	3	$3.	Patient ventilated at highest resp. rate
27	urineout_0	Num	8		Urine output for 24 hours preceding randomization
28	fluidout_0	Num	8		Total fluid output last 24 hours
29	fluidin_0	Num	8		Total fluid intake for the 24 hours preceding randomization
30	hcto	Num	8		Hct: Only %
31	hctl	Num	8		Hct: Lowest %
32	hcth	Num	8		Hct: Highest %
33	wbco	Num	8		WBC: Only mm^3
34	wbcl	Num	8		WBC: Lowest mm^3
35	wbch	Num	8		WBC: Highest mm^3
36	plate	Num	8		Platelets (lowest): x 1000 / mm^3

Num	Variable	Type	Len	Format	Label
37	sodiumo	Num	8		Serum Sodium: Only (mEq/L)
38	sodiuml	Num	8		Serum Sodium: Lowest (mEq/L)
39	sodiumh	Num	8		Serum Sodium: Highest (mEq/L)
40	potaso	Num	8		Serum Potassium: Only (mEq/L)
41	potasl	Num	8		Serum Potassium: Lowest (mEq/L)
42	potash	Num	8		Serum Potassium: Highest (mEq/L)
43	bun	Num	8		Serum BUN (highest): (mg/dL)
44	creato	Num	8		Serum Creatinine Only: (mg/dL)
45	creatl	Num	8		Serum Creatinine Lowest: (mg/dL)
46	creath	Num	8		Serum Creatinine Highest: (mg/dL)
47	gluco	Num	8		Serum Glucose Only: (mg/dL)
48	glucl	Num	8		Serum Glucose Lowest: (mg/dL)
49	gluch	Num	8		Serum Glucose Highest: (mg/dL)
50	albumo	Num	8		Serum Albumin Only: (g/dL)
51	albuml	Num	8		Serum Albumin Lowest: (g/dL)
52	albumh	Num	8		Serum Albumin Highest: (g/dL)
53	bilih	Num	8		Serum Bilirubin Highest: (mg/dL)
54	bicarbl	Num	8		Serum Bicarbonate Lowest: (mEq/L)
55	tempX	Char	64	$64.	Highest Temperature in Clecius (Not Done)
56	sysbpX	Char	64	$64.	Highest Systolic BP (Not Done)
57	mapX	Char	64	$64.	Highest Mean Arterial Pressure (Not Done)
58	hrateX	Char	64	$64.	Highest Heart Rate (beats/min) (Not Done)
59	resphlX	Char	64	$64.	Highest Respiratory Rate (breaths/min) (Not Done)
60	ventlX	Char	64	$64.	Patient ventilated at lowest resp. rate (Not Done)
61	venthX	Char	64	$64.	Patient ventilated at highest resp. rate (Not Done)
62	urineoutX	Char	64	$64.	Urine output for 24 hours preceding randomization (Not Done)
63	fluidoutX	Char	64	$64.	Total fluid output last 24 hours (Not Done)
64	fluidinX	Char	64	$64.	Total fluid intake for the 24 hours preceding randomization (Not Done)
65	hctX	Char	64	$64.	Hct: (Not Done)
66	wbcX	Char	64	$64.	WBC: (Not Done)
67	plateX	Char	64	$64.	Platelets (lowest): x 1000 / mm^3 (Not Done)
68	sodiumX	Char	64	$64.	Serum Sodium (mEq/L) (Not Done)
69	potasX	Char	64	$64.	Serum Potassium (mEq/L) (Not Done)
70	bunX	Char	64	$64.	Serum BUN (highest): (mg/dL) (Not Done)
71	creatX	Char	64	$64.	Serum Creatinine: (mg/dL) (Not Done)
72	glucX	Char	64	$64.	Serum Glucose: (mg/dL) (Not Done)
73	albumX	Char	64	$64.	Serum Albumin: (g/dL) (Not Done)
74	bilihX	Char	64	$64.	Serum Bilirubin Highest: (mg/dL) (Not Done)
75	bicarblx	Char	64	$64.	Serum Bicarbonate Lowest: (mEq/L) (Not Done)

Num	Variable	Type	Len	Format	Label
76	prbc24_1	Num	8		PRBC given in last 24 hours
77	ffp24_1	Num	8		FFP given in last 24 hours
78	notedenpt_1	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
79	notedenptc_1	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
80	entfeedvol_1	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
81	fluidinx_1	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
82	fluidoutx_1	Char	64	$64.	Total fluid out last 24 hours (Not Done)
83	urineoutx_1	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
84	fluidin_1	Num	8		Total Fluid Intake in last 24h
85	fluidout_1	Num	8		Total fluid out last 24 hours
86	urineout_1	Num	8		Total urine output in the last 24 hours
87	prbc24_2	Num	8		PRBC given in last 24 hours
88	ffp24_2	Num	8		FFP given in last 24 hours
89	notedenpt_2	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
90	notedenptc_2	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
91	entfeedvol_2	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
92	fluidinx_2	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
93	fluidoutx_2	Char	64	$64.	Total fluid out last 24 hours (Not Done)
94	urineoutx_2	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
95	fluidin_2	Num	8		Total Fluid Intake in last 24h
96	fluidout_2	Num	8		Total fluid out last 24 hours
97	urineout_2	Num	8		Total urine output in the last 24 hours
98	prbc24_3	Num	8		PRBC given in last 24 hours
99	ffp24_3	Num	8		FFP given in last 24 hours
100	notedenpt_3	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
101	notedenptc_3	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
102	entfeedvol_3	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
103	fluidinx_3	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
104	fluidoutx_3	Char	64	$64.	Total fluid out last 24 hours (Not Done)
105	urineoutx_3	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
106	fluidin_3	Num	8		Total Fluid Intake in last 24h
107	fluidout_3	Num	8		Total fluid out last 24 hours
108	urineout_3	Num	8		Total urine output in the last 24 hours
109	prbc24_4	Num	8		PRBC given in last 24 hours
110	ffp24_4	Num	8		FFP given in last 24 hours
111	notedenpt_4	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
112	notedenptc_4	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
113	entfeedvol_4	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
114	fluidinx_4	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)

Num	Variable	Type	Len	Format	Label
115	fluidoutx_4	Char	64	$64.	Total fluid out last 24 hours (Not Done)
116	urineoutx_4	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
117	fluidin_4	Num	8		Total Fluid Intake in last 24h
118	fluidout_4	Num	8		Total fluid out last 24 hours
119	urineout_4	Num	8		Total urine output in the last 24 hours
120	prbc24_5	Num	8		PRBC given in last 24 hours
121	ffp24_5	Num	8		FFP given in last 24 hours
122	notedenpt_5	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
123	notedenptc_5	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
124	entfeedvol_5	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
125	fluidinx_5	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
126	fluidoutx_5	Char	64	$64.	Total fluid out last 24 hours (Not Done)
127	urineoutx_5	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
128	fluidin_5	Num	8		Total Fluid Intake in last 24h
129	fluidout_5	Num	8		Total fluid out last 24 hours
130	urineout_5	Num	8		Total urine output in the last 24 hours
131	prbc24_6	Num	8		PRBC given in last 24 hours
132	ffp24_6	Num	8		FFP given in last 24 hours
133	notedenpt_6	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
134	notedenptc_6	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
135	entfeedvol_6	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
136	fluidinx_6	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
137	fluidoutx_6	Char	64	$64.	Total fluid out last 24 hours (Not Done)
138	urineoutx_6	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
139	fluidin_6	Num	8		Total Fluid Intake in last 24h
140	fluidout_6	Num	8		Total fluid out last 24 hours
141	urineout_6	Num	8		Total urine output in the last 24 hours
142	prbc24_7	Num	8		PRBC given in last 24 hours
143	ffp24_7	Num	8		FFP given in last 24 hours
144	notedenpt_7	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
145	notedenptc_7	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
146	entfeedvol_7	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
147	fluidinx_7	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
148	fluidoutx_7	Char	64	$64.	Total fluid out last 24 hours (Not Done)
149	urineoutx_7	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
150	fluidin_7	Num	8		Total Fluid Intake in last 24h
151	fluidout_7	Num	8		Total fluid out last 24 hours
152	urineout_7	Num	8		Total urine output in the last 24 hours
153	prbc24_8	Num	8		PRBC given in last 24 hours

Num	Variable	Type	Len	Format	Label
154	ffp24_8	Num	8		FFP given in last 24 hours
155	notedenpt_8	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
156	notedenptc_8	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
157	entfeedvol_8	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
158	fluidinx_8	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
159	fluidoutx_8	Char	64	$64.	Total fluid out last 24 hours (Not Done)
160	urineoutx_8	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
161	fluidin_8	Num	8		Total Fluid Intake in last 24h
162	fluidout_8	Num	8		Total fluid out last 24 hours
163	urineout_8	Num	8		Total urine output in the last 24 hours

Data Set Name: atfib.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	afibhist	Num	8		Does the patient have a history of chronic or recurrent atrial fibrulation?
16	afibhistc	Char	3	$3.	Does the patient have a history of chronic or recurrent atrial fibrulation?
17	afibadmit	Num	8		Was the cardiac rhythm at the time of study hospital admission atrial fibrillation?
18	afibadmitc	Char	3	$3.	Was the cardiac rhythm at the time of study hospital admission atrial fibrillation?
19	atfibnew	Num	8		Did the patient develop new atrial fibrillation during the study hospitalization and prior to ICU discharge?
20	afibnewc	Char	4	$4.	Did the patient develop new atrial fibrillation during the study hospitalization and prior to ICU discharge?
21	afibdays	Num	8		Number of days on which new atrial fibrillation occurred
22	afibpre	Num	8		Before first dose of study drug was administered
23	afibprec	Char	49	$49.	Before first dose of study drug was administered
24	afibduring	Num	8		During the days on which study drug was administered
25	afibduringc	Char	53	$53.	During the days on which study drug was administered
26	tfibpost	Num	8		More than 4 hours after the last dose of study drug was administered
27	afibpostc	Char	69	$69.	More than 4 hours after the last dose of study drug was administered
28	afibdccard	Num	8		DC cardioversion
29	afibdccardc	Char	16	$16.	DC cardioversion
30	afibvaso	Num	8		Vasopressor for hypotension that occurred after onset of atrial fibrillation
31	afibvasoc	Char	75	$75.	Vasopressor for hypotension that occurred after onset of atrial fibrillation
32	afibbeta	Num	8		Beta Blocker
33	afibbetac	Char	12	$12.	Beta Blocker
34	afibamid	Num	8		Amiodarone
35	afibamidc	Char	10	$10.	Amiodarone

Num	Variable	Type	Len	Format	Label
36	afibantic	Num	8		Anticoagulation
37	afibanticc	Char	15	$15.	Anticoagulation
38	afibdig	Num	8		Digoxin
39	afibdigc	Char	7	$7.	Digoxin
40	afibdilt	Num	8		Diltiazem
41	afibdiltc	Char	9	$9.	Diltiazem
42	afibtreat	Num	8		Was chronic or new onset atrial fibrillation treated prior to ICU discharge?
43	afibtreatc	Char	4	$4.	Was chronic or new onset atrial fibrillation treated prior to ICU discharge?
44	afibadmitx	Char	64	$64.	Was the cardiac rhythm at the time of study hospital admission atrial fibrillation? (Not Done)
45	afibnewx	Char	64	$64.	Did the patient develop new atrial fibrillation during the study hospitalization and prior to ICU discharge? (Not Done)
46	afibtreatx	Char	64	$64.	Was chronic or new onset atrial fibrillation treated prior to ICU discharge? (Not Done)

Data Set Name: bal.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	bal0	Num	8		Mini-BAL completed?
16	bal0c	Char	20	$20.	Mini-BAL completed?
17	baldt0	Num	8	BEST12.	Date Mini-BAL completed (Day)
18	balnotreas0	Char	255	$255.	Reason Mini-BAL not completed
19	balvolin0	Num	8		Volume instilled
20	balvolout0	Num	8		Volume returned
21	balinr0	Num	8		INR value obtained within the 36 hours prior to BAL?
22	balinr0c	Char	24	$24.	INR value obtained within the 36 hours prior to BAL?
23	balinrle2_0	Num	8		Was INR value <= 2.0?
24	balinrle2_0c	Char	23	$23.	Was INR value <= 2.0?
25	balplate0	Num	8		Platelet value obtained in the 36 hours prior to BAL?
26	balplate0c	Char	53	$53.	Platelet value obtained in the 36 hours prior to BAL?
27	balplatege5_0	Num	8		Was platelet value >= 50*10^3/mm^3?
28	balplatege5_0c	Char	23	$23.	Was platelet value >= 50*10^3/mm^3?
29	bal3	Num	8		Mini-BAL completed?
30	bal3c	Char	20	$20.	Mini-BAL completed?
31	baldt3	Num	8	BEST12.	Date Mini-BAL completed (Day)
32	balnotreas3	Char	255	$255.	Reason Mini-BAL not completed
33	balvolin3	Num	8		Volume instilled
34	balvolout3	Num	8		Volume returned
35	balinr3	Num	8		INR value obtained within the 36 hours prior to BAL?
36	balinr3c	Char	24	$24.	INR value obtained within the 36 hours prior to BAL?

Num	Variable	Type	Len	Format	Label
37	balinrle2_3	Num	8		Was INR value <= 2.0?
38	balinrle2_3c	Char	23	$23.	Was INR value <= 2.0?
39	balplate3	Num	8		Platelet value obtained in the 36 hours prior to BAL?
40	balplate3c	Char	53	$53.	Platelet value obtained in the 36 hours prior to BAL?
41	balplatege5_3	Num	8		Was platelet value >= 50*10^3/mm^3?
42	balplatege5_3c	Char	23	$23.	Was platelet value >= 50*10^3/mm^3?

Data Set Name: base_labs.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	hgb	Num	8		Hgb (g/dL)
16	sodium	Num	8		Sodium (mEq/L):
17	potas	Num	8		Postassium (mEq/L)
18	gluc	Num	8		Glucose (mg/dL):
19	bicarb	Num	8		Serum Bicarb (mEq/L):
20	phos	Num	8		Serum Phosphorous (mg/dL)
21	mg	Num	8		Serum Magnesium (mEq/L)
22	protein	Num	8		Total Protein (g/dL)
23	album	Num	8		Albumin (g/dL):
24	glucmin	Num	8		Lowest glucose this day:
25	prothrombin	Num	8		Prothrombin time
26	hgbx	Char	64	$64.	Hgb (g/dL) (Not Done)
27	sodiumx	Char	64	$64.	Sodium (mEq/L): (Not Done)
28	potasx	Char	64	$64.	Postassium (mEq/L) (Not Done)
29	glucx	Char	64	$64.	Glucose (mg/dL): (Not Done)
30	bicarbx	Char	64	$64.	Serum Bicarb (mEq/L): (Not Done)
31	phosx	Char	64	$64.	Serum Phosphorous (mg/dL) (Not Done)
32	mgx	Char	64	$64.	Serum Magnesium (mEq/L) (Not Done)
33	proteinx	Char	64	$64.	Total Protein (g/dL) (Not Done)
34	albumx	Char	64	$64.	Albumin (g/dL): (Not Done)

Data Set Name: base_labs_all.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	hgb	Num	8		Hgb (g/dL)
16	sodium	Num	8		Sodium (mEq/L):
17	potas	Num	8		Postassium (mEq/L)
18	gluc	Num	8		Glucose (mg/dL):
19	bicarb	Num	8		Serum Bicarb (mEq/L):
20	phos	Num	8		Serum Phosphorous (mg/dL)
21	mg	Num	8		Serum Magnesium (mEq/L)
22	protein	Num	8		Total Protein (g/dL)
23	album	Num	8		Albumin (g/dL):
24	glucmin	Num	8		Lowest glucose this day:
25	prothrombin	Num	8		Prothrombin time
26	hgbx	Char	64	$64.	Hgb (g/dL) (Not Done)
27	sodiumx	Char	64	$64.	Sodium (mEq/L): (Not Done)
28	potasx	Char	64	$64.	Postassium (mEq/L) (Not Done)
29	glucx	Char	64	$64.	Glucose (mg/dL): (Not Done)
30	bicarbx	Char	64	$64.	Serum Bicarb (mEq/L): (Not Done)
31	phosx	Char	64	$64.	Serum Phosphorous (mg/dL) (Not Done)
32	mgx	Char	64	$64.	Serum Magnesium (mEq/L) (Not Done)
33	proteinx	Char	64	$64.	Total Protein (g/dL) (Not Done)
34	albumx	Char	64	$64.	Albumin (g/dL): (Not Done)
35	alt	Num	8		ALT
36	ast	Num	8		AST

Num	Variable	Type	Len	Format	Label
37	ck	Num	8		CK
38	crp	Num	8		CRP
39	crphl	Num	8		High sensitivity or regular CRP
40	crphlc	Char	16	$16.	High sensitivity or regular CRP

Data Set Name: base_vent.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	simv	Num	8		SIMV
16	simvc	Char	4	$4.	SIMV
17	prvc	Num	8		PRVC (pressure regulated volume control) or equivalent
18	prvc2	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
19	pressup	Num	8		Pressure Support (y/n)
20	pressupc	Char	16	$16.	Pressure Support (y/n)
21	pressupcmH2O	Num	8		Pressure Support cmH2O
22	volassist	Num	8		Volume Assist/Control
23	volassistc	Char	21	$21.	Volume Assist/Control
24	presassist	Num	8		Pressure Assist (y/n)
25	presassistc	Char	15	$15.	Pressure Assist (y/n)
26	presascmH2O	Num	8		Pressure Assist cmH2O
27	pcirv	Num	8		PC IRV
28	pcirvc	Char	6	$6.	PC IRV
29	aprv	Num	8		Airway Pressure Release Ventilation (APRV)
30	aprvc	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
31	ventoth	Num	8		Other vent mode
32	ventothc	Char	5	$5.	Other vent mode
33	hfov	Num	8		HFOV
34	hfovc	Char	4	$4.	HFOV
35	othvent	Char	255	$255.	Enter other vent mode:
36	tidal	Num	8		Calculated Delivered Tidal Volume

Num	Variable	Type	Len	Format	Label
37	setrate	Num	8		Set Rate
38	resp	Num	8		Total Respiratory Rate
39	minvent	Num	8		Total Minute Ventilation (L/min)
40	peep	Num	8		PEEP (cm H2O):
41	fio2	Num	8		FiO2 prior to randomization
42	SpO2	Num	8		SpO2 prior to randomization
43	pplat	Num	8		Plateau Pressure (cm H2O):
44	pip	Num	8		Peak Inspiratory Pressure
45	meanair	Num	8		Mean airway pressure
46	tidalpost	Num	8		Calculated delivered tidal volume after vent change
47	pplatpost	Num	8		Plateau Pressure after vent change
48	peeppost	Num	8		PEEP after vent change
49	fio2abg	Num	8		FiO2 at time of ABG:
50	pao2abg	Num	8		PaO2 (cm H20):
51	paco2abg	Num	8		PaCO2 (cm H20):
52	phabg	Num	8		Arterial pH:
53	spo2abg	Num	8		SpO2 at time of ABG
54	ventX	Char	64	$64.	Vent Mode (Not Done)
55	tidalx	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
56	respX	Char	64	$64.	Total Respiratory Rate (Not Done)
57	minventX	Char	64	$64.	Total Minute Ventilation (L/min) (Not Done)
58	peepx	Char	64	$64.	PEEP (cm H2O): (Not Done)
59	fio2x	Char	64	$64.	FiO2 prior to randomization (Not Done)
60	SpO2x	Char	64	$64.	SpO2 prior to randomization (Not Done)
61	meanairX	Char	64	$64.	Mean airway pressure (Not Done)

Data Set Name: base_vs.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	hrate	Num	8		Heart Rate (beats/min):
16	sysbp	Num	8		Systolic BP (mmHg):
17	diabp	Num	8		Diastolic BP (mmHg)
18	cvp	Num	8		Central Venous Pressure (mmHg):
19	map	Num	8		Mean Arterial Pressure (mmHg):
20	temp	Num	8		Temperature (C)
21	height	Num	8		Measured Height (cm)
22	weight	Num	8		Measured Weight (Kg)
23	pbw	Char	255	$255.	Predicted Body Weight
24	vaso	Num	8		IV Vasopressors or inotropes in 24 hrs preceding randomization
25	vasoc	Char	3	$3.	IV Vasopressors or inotropes in 24 hrs preceding randomization
26	dobut	Num	8		Dobutamine Infusion Rate
27	dobutu	Char	9	$9.	Dobutamine Units
28	dopa	Num	8		Dopamine Infusion Rate:
29	dopau	Char	9	$9.	Dopamine Units
30	norepi	Num	8		Norepinephrine Infusion Rate
31	norepiu	Char	9	$9.	Norepinephrine Units
32	epi	Num	8		Epinephrine Infusion Rate
33	epiu	Char	9	$9.	Epinephrine Units
34	vasorate	Num	8		Vasopressin Infusion Rate
35	neosyn	Num	8		Neosynephrine (phenylephrine) Infusion Rate
36	neosynu	Char	9	$9.	Neosynephrine (phenylephrine) Units

Num	Variable	Type	Len	Format	Label
37	vasooth	Char	50	$50.	Other Vasopressor
38	betablock	Num	8		Beta blockers (IV, PO, PGT) in 24 hours preceding randomization?
39	betablockc	Char	3	$3.	Beta blockers (IV, PO, PGT) in 24 hours preceding randomization?
40	hratex	Char	64	$64.	Heart Rate (beats/min): (Not done)
41	sysbpx	Char	64	$64.	Systolic BP (mmHg): (Not Done)
42	diabpx	Char	64	$64.	Diastolic BP (mmHg) (Not Done)
43	tempx	Char	64	$64.	Temperature (C) (Not Done)
44	heightx	Char	64	$64.	Measured Height (cm) (Not Done)
45	vasox	Char	64	$64.	IV Vasopressors or inotropes in 24 hrs preceding randomization (Not Done)
46	betablockx	Char	64	$64.	Beta blockers (IV, PO, PGT) in 24 hours preceding randomization? (Not Done)

Data Set Name: blood_cult.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	index	Num	8		Form index
15	visitname	Char	1024	$1024.	Visit Name
16	bcdt	Num	8	BEST12.	Date and time of new positive blood culture: (Day)
17	bctm	Num	8	TIME5.	Date and time of new positive blood culture: (Time)
18	bcorg	Num	8		Organism
19	bcorgc	Char	29	$29.	Organism
20	bcorgoth	Char	255	$255.	Organism: Other

Data Set Name: bruss.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	brussdt0	Num	8	BEST12.	Day 0 Date (Day)
16	systbp0	Num	8		Day 0 Systolic BP
17	pf0	Num	8		Day 0 PaO2/FiO2
18	plate0	Num	8		Day 0 Platelets x1000
19	creat0	Num	8		Day 0 Creatinine
20	bili0	Num	8		Day 0 Bilirubin
21	vaso0	Num	8		Day 0 Vasopressor
22	vaso0c	Char	3	$3.	Day 0 Vasopressor
23	brussdtX0	Char	64	$64.	Day 0 Date (Not Done)
24	brussX0	Char	64	$64.	Day 0 Brussels (Not Done)
25	brussdt1	Num	8	BEST12.	Day 1 Date (Day)
26	systbp1	Num	8		Day 1 Systolic BP
27	pf1	Num	8		Day 1 PaO2/FiO2
28	plate1	Num	8		Day 1 Platelets x1000
29	creat1	Num	8		Day 1 Creatinine
30	bili1	Num	8		Day 1 Bilirubin
31	vaso1	Num	8		Day 1 Vasopressor
32	vaso1c	Char	3	$3.	Day 1 Vasopressor
33	brussdtX1	Char	64	$64.	Day 1 Date (Not Done)
34	brussX1	Char	64	$64.	Day 1 Brussels (Not Done)
35	brussdt2	Num	8	BEST12.	Day 2 Date (Day)
36	systbp2	Num	8		Day 2 Systolic BP

Num	Variable	Type	Len	Format	Label
37	pf2	Num	8		Day 2 PaO2/FiO2
38	plate2	Num	8		Day 2 Platelets x1000
39	creat2	Num	8		Day 2 Creatinine
40	bili2	Num	8		Day 2 Bilirubin
41	vaso2	Num	8		Day 2 Vasopressor
42	vaso2c	Char	3	$3.	Day 2 Vasopressor
43	brussdtX2	Char	64	$64.	Day 2 Date (Not Done)
44	brussX2	Char	64	$64.	Day 2 Brussels (Not Done)
45	brussdt3	Num	8	BEST12.	Day 3 Date (Day)
46	systbp3	Num	8		Day 3 Systolic BP
47	pf3	Num	8		Day 3 PaO2/FiO2
48	plate3	Num	8		Day 3 Platelets x1000
49	creat3	Num	8		Day 3 Creatinine
50	bili3	Num	8		Day 3 Bilirubin
51	vaso3	Num	8		Day 3 Vasopressor
52	vaso3c	Char	3	$3.	Day 3 Vasopressor
53	brussdtX3	Char	64	$64.	Day 3 Date (Not Done)
54	brussX3	Char	64	$64.	Day 3 Brussels (Not Done)
55	brussdt4	Num	8	BEST12.	Day 4 Date (Day)
56	systbp4	Num	8		Day 4 Systolic BP
57	pf4	Num	8		Day 4 PaO2/FiO2
58	plate4	Num	8		Day 4 Platelets x1000
59	creat4	Num	8		Day 4 Creatinine
60	bili4	Num	8		Day 4 Bilirubin
61	vaso4	Num	8		Day 4 Vasopressor
62	vaso4c	Char	3	$3.	Day 4 Vasopressor
63	brussdtX4	Char	64	$64.	Day 4 Date (Not Done)
64	brussX4	Char	64	$64.	Day 4 Brussels (Not Done)
65	brussdt5	Num	8	BEST12.	Day 5 Date (Day)
66	systbp5	Num	8		Day 5 Systolic BP
67	pf5	Num	8		Day 5 PaO2/FiO2
68	plate5	Num	8		Day 5 Platelets x1000
69	creat5	Num	8		Day 5 Creatinine
70	bili5	Num	8		Day 5 Bilirubin
71	vaso5	Num	8		Day 5 Vasopressor
72	vaso5c	Char	3	$3.	Day 5 Vasopressor
73	brussdtX5	Char	64	$64.	Day 5 Date (Not Done)
74	brussX5	Char	64	$64.	Day 5 Brussels (Not Done)
75	brussdt6	Num	8	BEST12.	Day 6 Date (Day)

Num	Variable	Type	Len	Format	Label
76	systbp6	Num	8		Day 6 Systolic BP
77	pf6	Num	8		Day 6 PaO2/FiO2
78	plate6	Num	8		Day 6 Platelets x1000
79	creat6	Num	8		Day 6 Creatinine
80	bili6	Num	8		Day 6 Bilirubin
81	vaso6	Num	8		Day 6 Vasopressor
82	vaso6c	Char	3	$3.	Day 6 Vasopressor
83	brussdtX6	Char	64	$64.	Day 6 Date (Not Done)
84	brussX6	Char	64	$64.	Day 6 Brussels (Not Done)
85	brussdt7	Num	8	BEST12.	Day 7 Date (Day)
86	systbp7	Num	8		Day 7 Systolic BP
87	pf7	Num	8		Day 7 PaO2/FiO2
88	plate7	Num	8		Day 7 Platelets x1000
89	creat7	Num	8		Day 7 Creatinine
90	bili7	Num	8		Day 7 Bilirubin
91	vaso7	Num	8		Day 7 Vasopressor
92	vaso7c	Char	3	$3.	Day 7 Vasopressor
93	brussdtX7	Char	64	$64.	Day 7 Date (Not Done)
94	brussX7	Char	64	$64.	Day 7 Brussels (Not Done)
95	brussdt8	Num	8	BEST12.	Day 8 Date (Day)
96	systbp8	Num	8		Day 8 Systolic BP
97	pf8	Num	8		Day 8 PaO2/FiO2
98	plate8	Num	8		Day 8 Platelets x1000
99	creat8	Num	8		Day 8 Creatinine
100	bili8	Num	8		Day 8 Bilirubin
101	vaso8	Num	8		Day 8 Vasopressor
102	vaso8c	Char	3	$3.	Day 8 Vasopressor
103	brussdtX8	Char	64	$64.	Day 8 Date (Not Done)
104	brussX8	Char	64	$64.	Day 8 Brussels (Not Done)
105	brussdt9	Num	8	BEST12.	Day 9 Date (Day)
106	systbp9	Num	8		Day 9 Systolic BP
107	pf9	Num	8		Day 9 PaO2/FiO2
108	plate9	Num	8		Day 9 Platelets x1000
109	creat9	Num	8		Day 9 Creatinine
110	bili9	Num	8		Day 9 Bilirubin
111	vaso9	Num	8		Day 9 Vasopressor
112	vaso9c	Char	3	$3.	Day 9 Vasopressor
113	brussdtX9	Char	64	$64.	Day 9 Date (Not Done)
114	brussX9	Char	64	$64.	Day 9 Brussels (Not Done)

Num	Variable	Type	Len	Format	Label
115	brussdt10	Num	8	BEST12.	Day 10 Date (Day)
116	systbp10	Num	8		Day 10 Systolic BP
117	pf10	Num	8		Day 10 PaO2/FiO2
118	plate10	Num	8		Day 10 Platelets x1000
119	creat10	Num	8		Day 10 Creatinine
120	bili10	Num	8		Day 10 Bilirubin
121	vaso10	Num	8		Day 10 Vasopressor
122	vaso10c	Char	3	$3.	Day 10 Vasopressor
123	brussdtX10	Char	64	$64.	Day 10 Date (Not Done)
124	brussX10	Char	64	$64.	Day 10 Brussels (Not Done)
125	brussdt11	Num	8	BEST12.	Day 11 Date (Day)
126	systbp11	Num	8		Day 11 Systolic BP
127	pf11	Num	8		Day 11 PaO2/FiO2
128	plate11	Num	8		Day 11 Platelets x1000
129	creat11	Num	8		Day 11 Creatinine
130	bili11	Num	8		Day 11 Bilirubin
131	vaso11	Num	8		Day 11 Vasopressor
132	brussdtX11	Char	64	$64.	Day 11 Date (Not Done)
133	brussX11	Char	64	$64.	Day 11 Brussels (Not Done)
134	vaso11c	Char	3	$3.	Day 11 Vasopressor
135	brussdt12	Num	8	BEST12.	Day 12 Date (Day)
136	systbp12	Num	8		Day 12 Systolic BP
137	pf12	Num	8		Day 12 PaO2/FiO2
138	plate12	Num	8		Day 12 Platelets x1000
139	creat12	Num	8		Day 12 Creatinine
140	bili12	Num	8		Day 12 Bilirubin
141	vaso12	Num	8		Day 12 Vasopressor
142	vaso12c	Char	3	$3.	Day 12 Vasopressor
143	brussdtX12	Char	64	$64.	Day 12 Date (Not Done)
144	brussX12	Char	64	$64.	Day 12 Brussels (Not Done)
145	brussdt13	Num	8	BEST12.	Day 13 Date (Day)
146	systbp13	Num	8		Day 13 Systolic BP
147	pf13	Num	8		Day 13 PaO2/FiO2
148	plate13	Num	8		Day 13 Platelets x1000
149	creat13	Num	8		Day 13 Creatinine
150	bili13	Num	8		Day 13 Bilirubin
151	vaso13	Num	8		Day 13 Vasopressor
152	vaso13c	Char	3	$3.	Day 13 Vasopressor
153	brussdtX13	Char	64	$64.	Day 13 Date (Not Done)

Num	Variable	Type	Len	Format	Label
154	brussX13	Char	64	$64.	Day 13 Brussels (Not Done)
155	brussdt14	Num	8	BEST12.	Day 14 Date (Day)
156	systbp14	Num	8		Day 14 Systolic BP
157	pf14	Num	8		Day 14 PaO2/FiO2
158	plate14	Num	8		Day 14 Platelets x1000
159	creat14	Num	8		Day 14 Creatinine
160	bili14	Num	8		Day 14 Bilirubin
161	vaso14	Num	8		Day 14 Vasopressor
162	vaso14c	Char	3	$3.	Day 14 Vasopressor
163	brussdtX14	Char	64	$64.	Day 14 Date (Not Done)
164	brussX14	Char	64	$64.	Day 14 Brussels (Not Done)
165	brussdt15	Num	8	BEST12.	Day 15 Date (Day)
166	systbp15	Num	8		Day 15 Systolic BP
167	pf15	Num	8		Day 15 PaO2/FiO2
168	plate15	Num	8		Day 15 Platelets x1000
169	creat15	Num	8		Day 15 Creatinine
170	bili15	Num	8		Day 15 Bilirubin
171	vaso15	Num	8		Day 15 Vasopressor
172	vaso15c	Char	3	$3.	Day 15 Vasopressor
173	brussdtX15	Char	64	$64.	Day 15 Date (Not Done)
174	brussX15	Char	64	$64.	Day 15 Brussels (Not Done)
175	brussdt16	Num	8	BEST12.	Day 16 Date (Day)
176	systbp16	Num	8		Day 16 Systolic BP
177	pf16	Num	8		Day 16 PaO2/FiO2
178	plate16	Num	8		Day 16 Platelets x1000
179	creat16	Num	8		Day 16 Creatinine
180	bili16	Num	8		Day 16 Bilirubin
181	vaso16	Num	8		Day 16 Vasopressor
182	vaso16c	Char	3	$3.	Day 16 Vasopressor
183	brussdtX16	Char	64	$64.	Day 16 Date (Not Done)
184	brussX16	Char	64	$64.	Day 16 Brussels (Not Done)
185	brussdt17	Num	8	BEST12.	Day 17 Date (Day)
186	systbp17	Num	8		Day 17 Systolic BP
187	pf17	Num	8		Day 17 PaO2/FiO2
188	plate17	Num	8		Day 17 Platelets x1000
189	creat17	Num	8		Day 17 Creatinine
190	bili17	Num	8		Day 17 Bilirubin
191	vaso17	Num	8		Day 17 Vasopressor
192	vaso17c	Char	3	$3.	Day 17 Vasopressor

Num	Variable	Type	Len	Format	Label
193	brussdtX17	Char	64	$64.	Day 17 Date (Not Done)
194	brussX17	Char	64	$64.	Day 17 Brussels (Not Done)
195	brussdt18	Num	8	BEST12.	Day 18 Date (Day)
196	systbp18	Num	8		Day 18 Systolic BP
197	pf18	Num	8		Day 18 PaO2/FiO2
198	plate18	Num	8		Day 18 Platelets x1000
199	creat18	Num	8		Day 18 Creatinine
200	bili18	Num	8		Day 18 Bilirubin
201	vaso18	Num	8		Day 18 Vasopressor
202	vaso18c	Char	3	$3.	Day 18 Vasopressor
203	brussdtX18	Char	64	$64.	Day 18 Date (Not Done)
204	brussX18	Char	64	$64.	Day 18 Brussels (Not Done)
205	brussdt19	Num	8	BEST12.	Day 19 Date (Day)
206	systbp19	Num	8		Day 19 Systolic BP
207	pf19	Num	8		Day 19 PaO2/FiO2
208	plate19	Num	8		Day 19 Platelets x1000
209	creat19	Num	8		Day 19 Creatinine
210	bili19	Num	8		Day 19 Bilirubin
211	vaso19	Num	8		Day 19 Vasopressor
212	vaso19c	Char	3	$3.	Day 19 Vasopressor
213	brussdtX19	Char	64	$64.	Day 19 Date (Not Done)
214	brussX19	Char	64	$64.	Day 19 Brussels (Not Done)
215	brussdt20	Num	8	BEST12.	Day 20 Date (Day)
216	systbp20	Num	8		Day 20 Systolic BP
217	pf20	Num	8		Day 20 PaO2/FiO2
218	plate20	Num	8		Day 20 Platelets x1000
219	creat20	Num	8		Day 20 Creatinine
220	bili20	Num	8		Day 20 Bilirubin
221	vaso20	Num	8		Day 20 Vasopressor
222	vaso20c	Char	3	$3.	Day 20 Vasopressor
223	brussdtX20	Char	64	$64.	Day 20 Date (Not Done)
224	brussX20	Char	64	$64.	Day 20 Brussels (Not Done)
225	brussdt21	Num	8	BEST12.	Day 21 Date (Day)
226	systbp21	Num	8		Day 21 Systolic BP
227	pf21	Num	8		Day 21 PaO2/FiO2
228	plate21	Num	8		Day 21 Platelets x1000
229	creat21	Num	8		Day 21 Creatinine
230	bili21	Num	8		Day 21 Bilirubin
231	vaso21	Num	8		Day 21 Vasopressor

Num	Variable	Type	Len	Format	Label
232	vaso21c	Char	3	$3.	Day 21 Vasopressor
233	brussdtX21	Char	64	$64.	Day 21 Date (Not Done)
234	brussX21	Char	64	$64.	Day 21 Brussels (Not Done)
235	brussdt22	Num	8	BEST12.	Day 22 Date (Day)
236	systbp22	Num	8		Day 22 Systolic BP
237	pf22	Num	8		Day 22 PaO2/FiO2
238	plate22	Num	8		Day 22 Platelets x1000
239	creat22	Num	8		Day 22 Creatinine
240	bili22	Num	8		Day 22 Bilirubin
241	vaso22	Num	8		Day 22 Vasopressor
242	vaso22c	Char	3	$3.	Day 22 Vasopressor
243	brussdtX22	Char	64	$64.	Day 22 Date (Not Done)
244	brussX22	Char	64	$64.	Day 22 Brussels (Not Done)
245	brussdt23	Num	8	BEST12.	Day 23 Date (Day)
246	systbp23	Num	8		Day 23 Systolic BP
247	pf23	Num	8		Day 23 PaO2/FiO2
248	plate23	Num	8		Day 23 Platelets x1000
249	creat23	Num	8		Day 23 Creatinine
250	bili23	Num	8		Day 23 Bilirubin
251	vaso23	Num	8		Day 23 Vasopressor
252	vaso23c	Char	3	$3.	Day 23 Vasopressor
253	brussdtX23	Char	64	$64.	Day 23 Date (Not Done)
254	brussX23	Char	64	$64.	Day 23 Brussels (Not Done)
255	brussdt24	Num	8	BEST12.	Day 24 Date (Day)
256	systbp24	Num	8		Day 24 Systolic BP
257	pf24	Num	8		Day 24 PaO2/FiO2
258	plate24	Num	8		Day 24 Platelets x1000
259	creat24	Num	8		Day 24 Creatinine
260	bili24	Num	8		Day 24 Bilirubin
261	vaso24	Num	8		Day 24 Vasopressor
262	vaso24c	Char	3	$3.	Day 24 Vasopressor
263	brussdtX24	Char	64	$64.	Day 24 Date (Not Done)
264	brussX24	Char	64	$64.	Day 24 Brussels (Not Done)
265	brussdt25	Num	8	BEST12.	Day 25 Date (Day)
266	systbp25	Num	8		Day 25 Systolic BP
267	pf25	Num	8		Day 25 PaO2/FiO2
268	plate25	Num	8		Day 25 Platelets x1000
269	creat25	Num	8		Day 25 Creatinine
270	bili25	Num	8		Day 25 Bilirubin

Num	Variable	Type	Len	Format	Label
271	vaso25	Num	8		Day 25 Vasopressor
272	vaso25c	Char	3	$3.	Day 25 Vasopressor
273	brussdtX25	Char	64	$64.	Day 25 Date (Not Done)
274	brussX25	Char	64	$64.	Day 25 Brussels (Not Done)
275	brussdt26	Num	8	BEST12.	Day 26 Date (Day)
276	systbp26	Num	8		Day 26 Systolic BP
277	pf26	Num	8		Day 26 PaO2/FiO2
278	plate26	Num	8		Day 26 Platelets x1000
279	creat26	Num	8		Day 26 Creatinine
280	bili26	Num	8		Day 26 Bilirubin
281	vaso26	Num	8		Day 26 Vasopressor
282	vaso26c	Char	3	$3.	Day 26 Vasopressor
283	brussdtX26	Char	64	$64.	Day 26 Date (Not Done)
284	brussX26	Char	64	$64.	Day 26 Brussels (Not Done)
285	brussdt27	Num	8	BEST12.	Day 27 Date (Day)
286	systbp27	Num	8		Day 27 Systolic BP
287	pf27	Num	8		Day 27 PaO2/FiO2
288	plate27	Num	8		Day 27 Platelets x1000
289	creat27	Num	8		Day 27 Creatinine
290	bili27	Num	8		Day 27 Bilirubin
291	vaso27	Num	8		Day 27 Vasopressor
292	vaso27c	Char	3	$3.	Day 27 Vasopressor
293	brussdtX27	Char	64	$64.	Day 27 Date (Not Done)
294	brussX27	Char	64	$64.	Day 27 Brussels (Not Done)
295	brussdt28	Num	8	BEST12.	Day 28 Date (Day)
296	systbp28	Num	8		Day 28 Systolic BP
297	pf28	Num	8		Day 28 PaO2/FiO2
298	plate28	Num	8		Day 28 Platelets x1000
299	creat28	Num	8		Day 28 Creatinine
300	bili28	Num	8		Day 28 Bilirubin
301	vaso28	Num	8		Day 28 Vasopressor
302	vaso28c	Char	3	$3.	Day 28 Vasopressor
303	brussdtX28	Char	64	$64.	Day 28 Date (Not Done)
304	brussX28	Char	64	$64.	Day 28 Brussels (Not Done)

Data Set Name: brussall.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	brussdt0	Num	8	BEST12.	Day 0 Date (Day)
16	systbp0	Num	8		Day 0 Systolic BP
17	pf0	Num	8		Day 0 PaO2/FiO2
18	plate0	Num	8		Day 0 Platelets x1000
19	creat0	Num	8		Day 0 Creatinine
20	bili0	Num	8		Day 0 Bilirubin
21	vaso0	Num	8		Day 0 Vasopressor
22	vaso0c	Char	3	$3.	Day 0 Vasopressor
23	brussdtX0	Char	64	$64.	Day 0 Date (Not Done)
24	brussX0	Char	64	$64.	Day 0 Brussels (Not Done)
25	brussdt1	Num	8	BEST12.	Day 1 Date (Day)
26	systbp1	Num	8		Day 1 Systolic BP
27	pf1	Num	8		Day 1 PaO2/FiO2
28	plate1	Num	8		Day 1 Platelets x1000
29	creat1	Num	8		Day 1 Creatinine
30	bili1	Num	8		Day 1 Bilirubin
31	vaso1	Num	8		Day 1 Vasopressor
32	vaso1c	Char	3	$3.	Day 1 Vasopressor
33	brussdtX1	Char	64	$64.	Day 1 Date (Not Done)
34	brussX1	Char	64	$64.	Day 1 Brussels (Not Done)
35	brussdt2	Num	8	BEST12.	Day 2 Date (Day)
36	systbp2	Num	8		Day 2 Systolic BP

Num	Variable	Type	Len	Format	Label
37	pf2	Num	8		Day 2 PaO2/FiO2
38	plate2	Num	8		Day 2 Platelets x1000
39	creat2	Num	8		Day 2 Creatinine
40	bili2	Num	8		Day 2 Bilirubin
41	vaso2	Num	8		Day 2 Vasopressor
42	vaso2c	Char	3	$3.	Day 2 Vasopressor
43	brussdtX2	Char	64	$64.	Day 2 Date (Not Done)
44	brussX2	Char	64	$64.	Day 2 Brussels (Not Done)
45	brussdt3	Num	8	BEST12.	Day 3 Date (Day)
46	systbp3	Num	8		Day 3 Systolic BP
47	pf3	Num	8		Day 3 PaO2/FiO2
48	plate3	Num	8		Day 3 Platelets x1000
49	creat3	Num	8		Day 3 Creatinine
50	bili3	Num	8		Day 3 Bilirubin
51	vaso3	Num	8		Day 3 Vasopressor
52	vaso3c	Char	3	$3.	Day 3 Vasopressor
53	brussdtX3	Char	64	$64.	Day 3 Date (Not Done)
54	brussX3	Char	64	$64.	Day 3 Brussels (Not Done)
55	brussdt4	Num	8	BEST12.	Day 4 Date (Day)
56	systbp4	Num	8		Day 4 Systolic BP
57	pf4	Num	8		Day 4 PaO2/FiO2
58	plate4	Num	8		Day 4 Platelets x1000
59	creat4	Num	8		Day 4 Creatinine
60	bili4	Num	8		Day 4 Bilirubin
61	vaso4	Num	8		Day 4 Vasopressor
62	vaso4c	Char	3	$3.	Day 4 Vasopressor
63	brussdtX4	Char	64	$64.	Day 4 Date (Not Done)
64	brussX4	Char	64	$64.	Day 4 Brussels (Not Done)
65	brussdt5	Num	8	BEST12.	Day 5 Date (Day)
66	systbp5	Num	8		Day 5 Systolic BP
67	pf5	Num	8		Day 5 PaO2/FiO2
68	plate5	Num	8		Day 5 Platelets x1000
69	creat5	Num	8		Day 5 Creatinine
70	bili5	Num	8		Day 5 Bilirubin
71	vaso5	Num	8		Day 5 Vasopressor
72	vaso5c	Char	3	$3.	Day 5 Vasopressor
73	brussdtX5	Char	64	$64.	Day 5 Date (Not Done)
74	brussX5	Char	64	$64.	Day 5 Brussels (Not Done)
75	brussdt6	Num	8	BEST12.	Day 6 Date (Day)

Num	Variable	Type	Len	Format	Label
76	systbp6	Num	8		Day 6 Systolic BP
77	pf6	Num	8		Day 6 PaO2/FiO2
78	plate6	Num	8		Day 6 Platelets x1000
79	creat6	Num	8		Day 6 Creatinine
80	bili6	Num	8		Day 6 Bilirubin
81	vaso6	Num	8		Day 6 Vasopressor
82	vaso6c	Char	3	$3.	Day 6 Vasopressor
83	brussdtX6	Char	64	$64.	Day 6 Date (Not Done)
84	brussX6	Char	64	$64.	Day 6 Brussels (Not Done)
85	brussdt7	Num	8	BEST12.	Day 7 Date (Day)
86	systbp7	Num	8		Day 7 Systolic BP
87	pf7	Num	8		Day 7 PaO2/FiO2
88	plate7	Num	8		Day 7 Platelets x1000
89	creat7	Num	8		Day 7 Creatinine
90	bili7	Num	8		Day 7 Bilirubin
91	vaso7	Num	8		Day 7 Vasopressor
92	vaso7c	Char	3	$3.	Day 7 Vasopressor
93	brussdtX7	Char	64	$64.	Day 7 Date (Not Done)
94	brussX7	Char	64	$64.	Day 7 Brussels (Not Done)
95	brussdt8	Num	8	BEST12.	Day 8 Date (Day)
96	systbp8	Num	8		Day 8 Systolic BP
97	pf8	Num	8		Day 8 PaO2/FiO2
98	plate8	Num	8		Day 8 Platelets x1000
99	creat8	Num	8		Day 8 Creatinine
100	bili8	Num	8		Day 8 Bilirubin
101	vaso8	Num	8		Day 8 Vasopressor
102	vaso8c	Char	3	$3.	Day 8 Vasopressor
103	brussdtX8	Char	64	$64.	Day 8 Date (Not Done)
104	brussX8	Char	64	$64.	Day 8 Brussels (Not Done)
105	brussdt9	Num	8	BEST12.	Day 9 Date (Day)
106	systbp9	Num	8		Day 9 Systolic BP
107	pf9	Num	8		Day 9 PaO2/FiO2
108	plate9	Num	8		Day 9 Platelets x1000
109	creat9	Num	8		Day 9 Creatinine
110	bili9	Num	8		Day 9 Bilirubin
111	vaso9	Num	8		Day 9 Vasopressor
112	vaso9c	Char	3	$3.	Day 9 Vasopressor
113	brussdtX9	Char	64	$64.	Day 9 Date (Not Done)
114	brussX9	Char	64	$64.	Day 9 Brussels (Not Done)

Num	Variable	Type	Len	Format	Label
115	brussdt10	Num	8	BEST12.	Day 10 Date (Day)
116	systbp10	Num	8		Day 10 Systolic BP
117	pf10	Num	8		Day 10 PaO2/FiO2
118	plate10	Num	8		Day 10 Platelets x1000
119	creat10	Num	8		Day 10 Creatinine
120	bili10	Num	8		Day 10 Bilirubin
121	vaso10	Num	8		Day 10 Vasopressor
122	vaso10c	Char	3	$3.	Day 10 Vasopressor
123	brussdtX10	Char	64	$64.	Day 10 Date (Not Done)
124	brussX10	Char	64	$64.	Day 10 Brussels (Not Done)
125	brussdt11	Num	8	BEST12.	Day 11 Date (Day)
126	systbp11	Num	8		Day 11 Systolic BP
127	pf11	Num	8		Day 11 PaO2/FiO2
128	plate11	Num	8		Day 11 Platelets x1000
129	creat11	Num	8		Day 11 Creatinine
130	bili11	Num	8		Day 11 Bilirubin
131	vaso11	Num	8		Day 11 Vasopressor
132	brussdtX11	Char	64	$64.	Day 11 Date (Not Done)
133	brussX11	Char	64	$64.	Day 11 Brussels (Not Done)
134	vaso11c	Char	3	$3.	Day 11 Vasopressor
135	brussdt12	Num	8	BEST12.	Day 12 Date (Day)
136	systbp12	Num	8		Day 12 Systolic BP
137	pf12	Num	8		Day 12 PaO2/FiO2
138	plate12	Num	8		Day 12 Platelets x1000
139	creat12	Num	8		Day 12 Creatinine
140	bili12	Num	8		Day 12 Bilirubin
141	vaso12	Num	8		Day 12 Vasopressor
142	vaso12c	Char	3	$3.	Day 12 Vasopressor
143	brussdtX12	Char	64	$64.	Day 12 Date (Not Done)
144	brussX12	Char	64	$64.	Day 12 Brussels (Not Done)
145	brussdt13	Num	8	BEST12.	Day 13 Date (Day)
146	systbp13	Num	8		Day 13 Systolic BP
147	pf13	Num	8		Day 13 PaO2/FiO2
148	plate13	Num	8		Day 13 Platelets x1000
149	creat13	Num	8		Day 13 Creatinine
150	bili13	Num	8		Day 13 Bilirubin
151	vaso13	Num	8		Day 13 Vasopressor
152	vaso13c	Char	3	$3.	Day 13 Vasopressor
153	brussdtX13	Char	64	$64.	Day 13 Date (Not Done)

Num	Variable	Type	Len	Format	Label
154	brussX13	Char	64	$64.	Day 13 Brussels (Not Done)
155	brussdt14	Num	8	BEST12.	Day 14 Date (Day)
156	systbp14	Num	8		Day 14 Systolic BP
157	pf14	Num	8		Day 14 PaO2/FiO2
158	plate14	Num	8		Day 14 Platelets x1000
159	creat14	Num	8		Day 14 Creatinine
160	bili14	Num	8		Day 14 Bilirubin
161	vaso14	Num	8		Day 14 Vasopressor
162	vaso14c	Char	3	$3.	Day 14 Vasopressor
163	brussdtX14	Char	64	$64.	Day 14 Date (Not Done)
164	brussX14	Char	64	$64.	Day 14 Brussels (Not Done)
165	brussdt15	Num	8	BEST12.	Day 15 Date (Day)
166	systbp15	Num	8		Day 15 Systolic BP
167	pf15	Num	8		Day 15 PaO2/FiO2
168	plate15	Num	8		Day 15 Platelets x1000
169	creat15	Num	8		Day 15 Creatinine
170	bili15	Num	8		Day 15 Bilirubin
171	vaso15	Num	8		Day 15 Vasopressor
172	vaso15c	Char	3	$3.	Day 15 Vasopressor
173	brussdtX15	Char	64	$64.	Day 15 Date (Not Done)
174	brussX15	Char	64	$64.	Day 15 Brussels (Not Done)
175	brussdt16	Num	8	BEST12.	Day 16 Date (Day)
176	systbp16	Num	8		Day 16 Systolic BP
177	pf16	Num	8		Day 16 PaO2/FiO2
178	plate16	Num	8		Day 16 Platelets x1000
179	creat16	Num	8		Day 16 Creatinine
180	bili16	Num	8		Day 16 Bilirubin
181	vaso16	Num	8		Day 16 Vasopressor
182	vaso16c	Char	3	$3.	Day 16 Vasopressor
183	brussdtX16	Char	64	$64.	Day 16 Date (Not Done)
184	brussX16	Char	64	$64.	Day 16 Brussels (Not Done)
185	brussdt17	Num	8	BEST12.	Day 17 Date (Day)
186	systbp17	Num	8		Day 17 Systolic BP
187	pf17	Num	8		Day 17 PaO2/FiO2
188	plate17	Num	8		Day 17 Platelets x1000
189	creat17	Num	8		Day 17 Creatinine
190	bili17	Num	8		Day 17 Bilirubin
191	vaso17	Num	8		Day 17 Vasopressor
192	vaso17c	Char	3	$3.	Day 17 Vasopressor

Num	Variable	Type	Len	Format	Label
193	brussdtX17	Char	64	$64.	Day 17 Date (Not Done)
194	brussX17	Char	64	$64.	Day 17 Brussels (Not Done)
195	brussdt18	Num	8	BEST12.	Day 18 Date (Day)
196	systbp18	Num	8		Day 18 Systolic BP
197	pf18	Num	8		Day 18 PaO2/FiO2
198	plate18	Num	8		Day 18 Platelets x1000
199	creat18	Num	8		Day 18 Creatinine
200	bili18	Num	8		Day 18 Bilirubin
201	vaso18	Num	8		Day 18 Vasopressor
202	vaso18c	Char	3	$3.	Day 18 Vasopressor
203	brussdtX18	Char	64	$64.	Day 18 Date (Not Done)
204	brussX18	Char	64	$64.	Day 18 Brussels (Not Done)
205	brussdt19	Num	8	BEST12.	Day 19 Date (Day)
206	systbp19	Num	8		Day 19 Systolic BP
207	pf19	Num	8		Day 19 PaO2/FiO2
208	plate19	Num	8		Day 19 Platelets x1000
209	creat19	Num	8		Day 19 Creatinine
210	bili19	Num	8		Day 19 Bilirubin
211	vaso19	Num	8		Day 19 Vasopressor
212	vaso19c	Char	3	$3.	Day 19 Vasopressor
213	brussdtX19	Char	64	$64.	Day 19 Date (Not Done)
214	brussX19	Char	64	$64.	Day 19 Brussels (Not Done)
215	brussdt20	Num	8	BEST12.	Day 20 Date (Day)
216	systbp20	Num	8		Day 20 Systolic BP
217	pf20	Num	8		Day 20 PaO2/FiO2
218	plate20	Num	8		Day 20 Platelets x1000
219	creat20	Num	8		Day 20 Creatinine
220	bili20	Num	8		Day 20 Bilirubin
221	vaso20	Num	8		Day 20 Vasopressor
222	vaso20c	Char	3	$3.	Day 20 Vasopressor
223	brussdtX20	Char	64	$64.	Day 20 Date (Not Done)
224	brussX20	Char	64	$64.	Day 20 Brussels (Not Done)
225	brussdt21	Num	8	BEST12.	Day 21 Date (Day)
226	systbp21	Num	8		Day 21 Systolic BP
227	pf21	Num	8		Day 21 PaO2/FiO2
228	plate21	Num	8		Day 21 Platelets x1000
229	creat21	Num	8		Day 21 Creatinine
230	bili21	Num	8		Day 21 Bilirubin
231	vaso21	Num	8		Day 21 Vasopressor

Num	Variable	Type	Len	Format	Label
232	vaso21c	Char	3	$3.	Day 21 Vasopressor
233	brussdtX21	Char	64	$64.	Day 21 Date (Not Done)
234	brussX21	Char	64	$64.	Day 21 Brussels (Not Done)
235	brussdt22	Num	8	BEST12.	Day 22 Date (Day)
236	systbp22	Num	8		Day 22 Systolic BP
237	pf22	Num	8		Day 22 PaO2/FiO2
238	plate22	Num	8		Day 22 Platelets x1000
239	creat22	Num	8		Day 22 Creatinine
240	bili22	Num	8		Day 22 Bilirubin
241	vaso22	Num	8		Day 22 Vasopressor
242	vaso22c	Char	3	$3.	Day 22 Vasopressor
243	brussdtX22	Char	64	$64.	Day 22 Date (Not Done)
244	brussX22	Char	64	$64.	Day 22 Brussels (Not Done)
245	brussdt23	Num	8	BEST12.	Day 23 Date (Day)
246	systbp23	Num	8		Day 23 Systolic BP
247	pf23	Num	8		Day 23 PaO2/FiO2
248	plate23	Num	8		Day 23 Platelets x1000
249	creat23	Num	8		Day 23 Creatinine
250	bili23	Num	8		Day 23 Bilirubin
251	vaso23	Num	8		Day 23 Vasopressor
252	vaso23c	Char	3	$3.	Day 23 Vasopressor
253	brussdtX23	Char	64	$64.	Day 23 Date (Not Done)
254	brussX23	Char	64	$64.	Day 23 Brussels (Not Done)
255	brussdt24	Num	8	BEST12.	Day 24 Date (Day)
256	systbp24	Num	8		Day 24 Systolic BP
257	pf24	Num	8		Day 24 PaO2/FiO2
258	plate24	Num	8		Day 24 Platelets x1000
259	creat24	Num	8		Day 24 Creatinine
260	bili24	Num	8		Day 24 Bilirubin
261	vaso24	Num	8		Day 24 Vasopressor
262	vaso24c	Char	3	$3.	Day 24 Vasopressor
263	brussdtX24	Char	64	$64.	Day 24 Date (Not Done)
264	brussX24	Char	64	$64.	Day 24 Brussels (Not Done)
265	brussdt25	Num	8	BEST12.	Day 25 Date (Day)
266	systbp25	Num	8		Day 25 Systolic BP
267	pf25	Num	8		Day 25 PaO2/FiO2
268	plate25	Num	8		Day 25 Platelets x1000
269	creat25	Num	8		Day 25 Creatinine
270	bili25	Num	8		Day 25 Bilirubin

Num	Variable	Type	Len	Format	Label
271	vaso25	Num	8		Day 25 Vasopressor
272	vaso25c	Char	3	$3.	Day 25 Vasopressor
273	brussdtX25	Char	64	$64.	Day 25 Date (Not Done)
274	brussX25	Char	64	$64.	Day 25 Brussels (Not Done)
275	brussdt26	Num	8	BEST12.	Day 26 Date (Day)
276	systbp26	Num	8		Day 26 Systolic BP
277	pf26	Num	8		Day 26 PaO2/FiO2
278	plate26	Num	8		Day 26 Platelets x1000
279	creat26	Num	8		Day 26 Creatinine
280	bili26	Num	8		Day 26 Bilirubin
281	vaso26	Num	8		Day 26 Vasopressor
282	vaso26c	Char	3	$3.	Day 26 Vasopressor
283	brussdtX26	Char	64	$64.	Day 26 Date (Not Done)
284	brussX26	Char	64	$64.	Day 26 Brussels (Not Done)
285	brussdt27	Num	8	BEST12.	Day 27 Date (Day)
286	systbp27	Num	8		Day 27 Systolic BP
287	pf27	Num	8		Day 27 PaO2/FiO2
288	plate27	Num	8		Day 27 Platelets x1000
289	creat27	Num	8		Day 27 Creatinine
290	bili27	Num	8		Day 27 Bilirubin
291	vaso27	Num	8		Day 27 Vasopressor
292	vaso27c	Char	3	$3.	Day 27 Vasopressor
293	brussdtX27	Char	64	$64.	Day 27 Date (Not Done)
294	brussX27	Char	64	$64.	Day 27 Brussels (Not Done)
295	brussdt28	Num	8	BEST12.	Day 28 Date (Day)
296	systbp28	Num	8		Day 28 Systolic BP
297	pf28	Num	8		Day 28 PaO2/FiO2
298	plate28	Num	8		Day 28 Platelets x1000
299	creat28	Num	8		Day 28 Creatinine
300	bili28	Num	8		Day 28 Bilirubin
301	vaso28	Num	8		Day 28 Vasopressor
302	vaso28c	Char	3	$3.	Day 28 Vasopressor
303	brussdtX28	Char	64	$64.	Day 28 Date (Not Done)
304	brussX28	Char	64	$64.	Day 28 Brussels (Not Done)

Data Set Name: bypt.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	on_propofol	Char	3		
14	b_pressors	Char	3		
15	allcrit	Num	8		Met all three criteria?
16	allcritc	Char	3	$3.	Met all three criteria?
17	qualdt	Num	8	BEST12.	Date and time of qualifying CXR: (Day)
18	qualtm	Num	8	TIME5.	Date and time of qualifying CXR: (Time)
19	sirs	Num	8		Patient met SIRS criteria? Defined as meeting at least 2 of the 3 criteria for a systemic inflammatory response within the window of time 24 hours before to 24 hours after the date and time of after ALI onset?
20	sirsc	Char	39	$39.	Patient met SIRS criteria? Defined as meeting at least 2 of the 3 criteria for a systemic inflammatory response within the window of time 24 hours before to 24 hours after the date and time of after ALI onset?
21	sirswbc	Num	8		White blood cell count > 12000 or > 4000 or > 10% band forms
22	sirswbcc	Char	60	$60.	White blood cell count > 12000 or > 4000 or > 10% band forms
23	sirstemp38	Num	8		Body Temperature > 38C (any route) or < 36C (by core temperatures only: indwelling catheter, esophageal, rectal)
24	sirstemp38c	Char	112	$112.	Body Temperature > 38C (any route) or < 36C (by core temperatures only: indwelling catheter, esophageal, rectal)
25	sirshr90	Num	8		Heart rate (> 90 beats/min) or receiving medications that slow heart rate or paced rhythm
26	sirshr90c	Char	89	$89.	Heart rate (> 90 beats/min) or receiving medications that slow heart rate or paced rhythm
27	inf	Num	8		Patient has suspected or proven infection?
28	infc	Char	23	$23.	Patient has suspected or proven infection?
29	infthorax	Num	8		Site of infection: Thorax
30	infthoraxc	Char	6	$6.	Site of infection: Thorax

Num	Variable	Type	Len	Format	Label
31	infabdomen	Num	8		Site of infection: Abdomen
32	infabdomenc	Char	7	$7.	Site of infection: Abdomen
33	infskin	Num	8		Site of infection: Skin or soft tissue
34	infskinc	Char	19	$19.	Site of infection: Skin or soft tissue
35	infmenin	Num	8		Site of infection: Bacterial meningitis
36	infmeninc	Char	20	$20.	Site of infection: Bacterial meningitis
37	inftract	Num	8		Site of infection: Urinary tract
38	inftractc	Char	13	$13.	Site of infection: Urinary tract
39	infcent	Num	8		Site of infection: Central line
40	infcentc	Char	12	$12.	Site of infection: Central line
41	infsinus	Num	8		Site of infection: Sinuses
42	infsinusc	Char	7	$7.	Site of infection: Sinuses
43	infosteo	Num	8		Site of infection: Osteomyelitis
44	infosteoc	Char	13	$13.	Site of infection: Osteomyelitis
45	infh1n1	Num	8		Site of infection: Confirmed Swine Influenza A (H1N1)
46	infh1n1c	Char	34	$34.	Site of infection: Confirmed Swine Influenza A (H1N1)
47	infother	Char	255	$255.	Other site of infection
48	quads	Num	8		Number of quadrants with opacities (2-4):
49	intubdt	Num	8	BEST12.	Date and time of current intubation (Day)
50	intubtm	Num	8	TIME5.	Date and time of current intubation (Time)
51	intfeed	Num	8		Intent to begin/continue enteral feedings?
52	intfeedc	Char	3	$3.	Intent to begin/continue enteral feedings?
53	pao2screen	Num	8		Pa02
54	fio2screen	Num	8		FiO2
55	qualpfdt	Num	8	BEST12.	Date and time of qualifying P/F (Day)
56	qualpftm	Num	8	TIME5.	Date and time of qualifying P/F (Time)
57	critdt	Num	8	BEST12.	First date that all these criteria exist simultaneously (Day)
58	gender	Num	8		Gender
59	genderc	Char	6	$6.	Gender
60	ethnic	Num	8		Hispanic or Not Hispanic?
61	ethnicc	Char	22	$22.	Hispanic or Not Hispanic?
62	norace	Num	8		Race Not Reported
63	noracec	Char	12	$12.	Race Not Reported
64	white	Num	8		White?
65	whitec	Char	5	$5.	White
66	afamer	Num	8		Black or African American?
67	afamerc	Char	25	$25.	Black or African American?
68	age	Num	8		Age as appears on screening form (in years):
69	agegt89	Num	8		Is true age greater than 89?

Num	Variable	Type	Len	Format	Label
70	agegt89c	Char	54	$54.	Is true age greater than 89?
71	locat	Num	8		Location
72	locatc	Char	12	$12.	Location
73	locatoth	Char	20	$20.	Location: Other
74	excluded	Num	8		Excluded?
75	excludedc	Char	41	$41.	Excluded?
76	agelt13	Num	8		Age younger than 13 years?
77	agelt13c	Char	25	$25.	Age younger than 13 years?
78	chronliv	Num	8		Severe Chronic liver disease?
79	chronlivc	Char	56	$56.	Severe Chronic liver disease?
80	alvhem	Num	8		Diffuse alveolar hemorrhage?
81	alvhemc	Char	43	$43.	Diffuse alveolar hemorrhage?
82	obese	Num	8		Morbid obesity?
83	obesec	Char	40	$40.	Morbid obesity?
84	nocons	Num	8		No consent/inability to obtain consent?
85	noconsc	Char	38	$38.	No consent/inability to obtain consent?
86	inabvent	Num	8		Inability to utilize ventilation protocol?
87	inabventc	Char	126	$126.	Inability to utilize ventilation protocol?
88	moribund	Num	8		Moribund in 24 hours?
89	moribundc	Char	49	$49.	Moribund in 24 hours?
90	nocvacc	Num	8		No intent to obtain CV access?
91	nocvaccc	Char	80	$80.	No intent to obtain CV access?
92	ptrefalta	Num	8		Patient refusal to ALTA
93	ptrefaltac	Char	33	$33.	Patient refusal to ALTA
94	ptrefeo	Num	8		Patient refusal to EDEN/OMEGA?
95	ptrefeoc	Char	39	$39.	Patient refusal to EDEN/OMEGA?
96	gt72hrvent	Num	8		> 72 h since mechanical ventilation?
97	gt72hrventc	Char	60	$60.	> 72 h since mechanical ventilation?
98	gt48hrcrit	Num	8		> 48 hours since met all criteria?
99	gt48hrcritc	Char	54	$54.	> 48 hours since met all criteria?
100	refshock	Num	8		Refractory Shock?
101	refshockc	Char	38	$38.	Refractory Shock?
102	noentacc	Num	8		Unable to obtain enteral access?
103	noentaccc	Char	31	$31.	Unable to obtain enteral access?
104	hoentfist	Num	8		High-output of enterocutaneous fistula?
105	hoentfistc	Char	88	$88.	High-output of enterocutaneous fistula?
106	curtpn	Num	8		Current or intent to use TPN?
107	curtpnc	Char	50	$50.	Current or intent to use TPN?
108	malnutr	Num	8		Severe malnutrition in last 6 months?

Num	Variable	Type	Len	Format	Label
109	malnutrc	Char	101	$101.	Severe malnutrition in last 6 months?
110	lap	Num	8		Laparotomy expected?
111	lapc	Char	33	$33.	Laparotomy expected?
112	raisehead	Num	8		Unable to raise head of bed?
113	raiseheadc	Char	41	$41.	Unable to raise head of bed?
114	shbowel	Num	8		Short-bowel syndrome or similar?
115	shbowelc	Char	57	$57.	Short-bowel syndrome or similar?
116	inrgt5	Num	8		INR > 5.0 or platelet count < 30K?
117	inrgt5c	Char	83	$83.	INR > 5.0 or platelet count < 30K?
118	nmdis	Num	8		Neuromuscular Disease?
119	nmdisc	Char	74	$74.	Neuromuscular Disease?
120	ichem	Num	8		Recent Intracranial hemorrhage?
121	ichemc	Char	49	$49.	Recent Intracranial hemorrhage?
122	allergy	Num	8		Allergies to substances in study?
123	allergyc	Char	127	$127.	Allergies to substances in study?
124	reqsub	Num	8		Requirement of substances in study?
125	reqsubc	Char	196	$196.	Requirement of substances in study?
126	contralb	Num	8		Contraindication to albuterol?
127	contralbc	Char	54	$54.	Contraindication to albuterol?
128	dailyba	Num	8		Daily use of inhaled beta agonists?
129	dailybac	Char	168	$168.	Daily use of inhaled beta agonists?
130	acutemi	Num	8		Acute MI or acute coronary syndrome?
131	acutemic	Char	69	$69.	Acute MI or acute coronary syndrome?
132	heartfail	Num	8		Congestive heart failure?
133	heartfailc	Char	24	$24.	Congestive heart failure?
134	othstud	Num	8		Participation in other studies?
135	othstudc	Char	117	$117.	Participation in other studies?
136	gt5pvcs	Num	8		Greater than 5 PVCs/min in the 4 hours prior to randomization
137	gt5pvcsc	Char	61	$61.	Greater than 5 PVCs/min in the 4 hours prior to randomization
138	newafib	Num	8		New onset (since hospital admission) of a-fib requiring anticoagulation
139	newafibc	Char	71	$71.	New onset (since hospital admission) of a-fib requiring anticoagulation
140	hrgt85	Num	8		Heart rate > 85% of max predicted?
141	hrgt85c	Char	109	$109.	Heart rate > 85% of max predicted?
142	mdrefalta	Num	8		MD refusal for ALTA?
143	mdrefaltac	Char	36	$36.	MD refusal for ALTA?
144	mdrefaltareas	Num	8		Reason for MD refusal for ALTA?
145	mdrefaltareasc	Char	42	$42.	Reason for MD refusal for ALTA?

Num	Variable	Type	Len	Format	Label
146	mdrefaltaoth	Char	100	$100.	Other reason for MD refusal for ALTA?
147	preg	Num	8		Pregnant or breast feeding?
148	pregc	Char	26	$26.	Pregnant or breast feeding?
149	mdrefeoc	Char	42	$42.	MD refusal for EDEN/Omega?
150	mdrefeoreas	Num	8		Reason for MD refusal for EDEN/Omega?
151	mdrefeoreasc	Char	42	$42.	Reason for MD refusal for EDEN/Omega?
152	mdrefeooth	Char	100	$100.	Other reason for MD refusal for EDEN/Omega?
153	chronresp	Num	8		Severe chronic respiratory disease?
154	chronrespc	Char	34	$34.	Severe chronic respiratory disease?
155	burnsc	Char	46	$46.	Burns > 40% of body surface area?
156	sixmthmort	Num	8		6-month mortality > 50%?
157	sixmthmortc	Char	117	$117.	6-month mortality > 50%?
158	marrowtrans	Num	8		Allogenic bone marrow transplant?
159	marrowtransc	Char	53	$53.	Allogenic bone marrow transplant?
160	notcomm	Num	8		Not committed to full support?
161	notcommc	Char	62	$62.	Not committed to full support?
162	bowobs	Num	8		Presence of partial or complete bowel obstruction, or ischemia, or infarction
163	bowobsc	Char	78	$78.	Presence of partial or complete bowel obstruction, or ischemia, or infarction
164	agelt18	Num	8		Age less than 18 years?
165	agelt18c	Char	22	$22.	Age less than 18 years?
166	prevstatin	Num	8		Receiving a statin medication within 48 hours of randomization?
167	prevstatinc	Char	62	$62.	Receiving a statin medication within 48 hours of randomization?
168	allergystat	Num	8		Allergy or intolerance to statins?
169	allergystatc	Char	33	$33.	Allergy or intolerance to statins?
170	mdstat	Num	8		Physician insistence on use of statins during the current hospitalization?
171	mdstatc	Char	73	$73.	Physician insistence on use of statins during the current hospitalization?
172	mdnostat	Num	8		Physician insistence on AVOIDANCE of statins during the current hospitalization?
173	mdnostatc	Char	79	$79.	Physician insistence on AVOIDANCE of statins during the current hospitalization?
174	ckgt5	Num	8		CK, ALT or AST > 5 times the upper limit of normal (ULN)?
175	ckgt5c	Char	58	$58.	CK, ALT or AST > 5 times the upper limit of normal (ULN)?
176	hypothy	Num	8		Diagnosis of hypothyroidism and not on thyroid replacement therapy?
177	hypothyc	Char	66	$66.	Diagnosis of hypothyroidism and not on thyroid replacement therapy?

Num	Variable	Type	Len	Format	Label
178	recniacin	Num	8		Receiving niacin, fenofibrate, cyclosporine, gemfibrozil, lopinavir, ritonavir or planned use of oral contraceptives or estrogen therapy during the ICU stay?
179	recniacinc	Char	156	$156.	Receiving niacin, fenofibrate, cyclosporine, gemfibrozil, lopinavir, ritonavir or planned use of oral contraceptives or estrogen therapy during the ICU stay?
180	homevent	Num	8		Home mechanical ventilation (noninvasive ventilation or via tracheotomy) except for CPAP/BIPAP used solely for sleep-disordered breathing?
181	homeventc	Char	139	$139.	Home mechanical ventilation (noninvasive ventilation or via tracheotomy) except for CPAP/BIPAP used solely for sleep-disordered breathing?
182	chronrespfl	Num	8		Chronic respiratory failure defined as PaCO2 > 50 mm Hg in the outpatient setting?
183	chronrespflc	Char	83	$83.	Chronic respiratory failure defined as PaCO2 > 50 mm Hg in the outpatient setting?
184	intlung	Num	8		Interstitial lung disease of severity sufficient to require continuous home oxygen therapy?
185	intlungc	Char	91	$91.	Interstitial lung disease of severity sufficient to require continuous home oxygen therapy?
186	carddis	Num	8		Cardiac disease classified as NYHA class IV?
187	carddisc	Char	45	$45.	Cardiac disease classified as NYHA class IV?
188	noabsorb	Num	8		Unable to receive or unlikely to absorb enteral study drug?
189	noabsorbc	Char	187	$187.	Unable to receive or unlikely to absorb enteral study drug?
190	mi6mth	Num	8		Myocardial infarction within past 6 months?
191	mi6mthc	Char	42	$42.	Myocardial infarction within past 6 months?
192	notexenreas	Char	200	$200.	Neither excluded nor enrolled reason:
193	Trauma	Num	8		Trauma
194	Traumac	Char	9	$9.	Trauma
195	Sepsite	Num	8		Site of Sepsis for Primary Lung Injury?
196	Sepsitec	Char	24	$24.	Site of Sepsis for Primary Lung Injury?
197	Sepsis	Num	8		Sepsis
198	Sepsisc	Char	37	$37.	Sepsis
199	Transf	Num	8		Multiple Transfusions
200	Transfc	Char	9	$9.	Multiple Transfusions
201	Aspir	Num	8		Aspiration
202	Aspirc	Char	9	$9.	Aspiration
203	Pneumo	Num	8		Pneumonia
204	Pneumoc	Char	9	$9.	Pneumonia
205	Otherlung	Num	8		Other Lung Injury
206	Otherlungc	Char	49	$49.	Other Lung Injury
207	Otherpr	Char	40	$40.	Description of Other Primary Lung Injury
208	Othersec	Char	40	$40.	Description of Other Secondary Lung Injury

Num	Variable	Type	Len	Format	Label
209	raceX	Char	64	$64.	Race (Not Done)
210	allcritX	Char	64	$64.	Met all three criteria? (Not Done)
211	qualdtmX	Char	64	$64.	Date and time of qualifying CXR: (Not Done)
212	quadsX	Char	64	$64.	Number of quadrants with opacities (2-4): (Not Done)
213	intubdtmX	Char	64	$64.	Date and time of current intubation (Not Done)
214	intfeedX	Char	64	$64.	Intent to begin/continue enteral feedings? (Not Done)
215	pao2screenX	Char	64	$64.	Pa02 (Not Done)
216	fio2screenX	Char	64	$64.	FiO2 (Not Done)
217	qualpfdtmX	Char	64	$64.	Date and time of qualifying P/F (Not Done)
218	critdtX	Char	64	$64.	First date that all these criteria exist simultaneously (Not Done)
219	genderX	Char	64	$64.	Gender (Not Done)
220	ethnicX	Char	64	$64.	Hispanic or Not Hispanic? (Not Done)
221	ageX	Char	64	$64.	Age as appears on screening form (in years): (Not Done)
222	locatX	Char	64	$64.	Location (Not Done)
223	excludedX	Char	64	$64.	Excluded? (Not Done)
224	TraumaX	Char	64	$64.	Trauma (Not Done)
225	SepsisX	Char	64	$64.	Sepsis (Not Done)
226	TransfX	Char	64	$64.	Multiple Transfusions (Not Done)
227	AspirX	Char	64	$64.	Aspiration (Not Done)
228	PneumoX	Char	64	$64.	Pneumonia (Not Done)
229	OtherlungX	Char	64	$64.	Other Lung Injury (Not Done)
230	mdrefeo	Num	8		MD refusal for EDEN/Omega?
231	burns	Num	8		Burns > 40% of body surface area?
232	altaconsent	Num	8		Has informed consent been obtained for the participation in ALTA?
233	altaconsentc	Char	3	$3.	Has informed consent been obtained for the participation in ALTA?
234	eoconsent	Num	8		Has informed consent been obtained for the participation in EDEN/Omega?
235	eoconsentc	Char	3	$3.	Has informed consent been obtained for the participation in EDEN/Omega?
236	genconsent	Num	8		Has informed consent been obtained for genetic testing testing in this study?
237	genconsentc	Char	3	$3.	Has informed consent been obtained for genetic testing testing in this study?
238	futconsenta	Num	8		Has informed consent been obtained for future genetic reasearch in ARDS?
239	futconsentac	Char	3	$3.	Has informed consent been obtained for future genetic reasearch in ARDS?
240	futconsento	Num	8		Has informed consent been obtained for Future Genetic Research involved with other medical conditions?

Num	Variable	Type	Len	Format	Label
241	futconsentoc	Char	3	$3.	Has informed consent been obtained for Future Genetic Research involved with other medical conditions?
242	contconsent	Num	8		Has informed consent been obtained to CONTACT subject in the future for other studies?
243	contconsentc	Char	3	$3.	Has informed consent been obtained to CONTACT subject in the future for other studies?
244	altaconsentX	Char	64	$64.	Has informed consent been obtained for the participation in ALTA? (Not Done)
245	eoconsentX	Char	64	$64.	Has informed consent been obtained for the participation in EDEN/Omega? (Not Done)
246	genconsentX	Char	64	$64.	Has informed consent been obtained for genetic testing testing in this study? (Not Done)
247	futconsentaX	Char	64	$64.	Has informed consent been obtained for future genetic reasearch in ARDS? (Not Done)
248	futconsentoX	Char	64	$64.	Has informed consent been obtained for Future Genetic Research involved with other medical conditions? (Not Done)
249	contconsentX	Char	64	$64.	Has informed consent been obtained to CONTACT subject in the future for other studies? (Not Done)
250	hasddt	Num	8	BEST12.	Hospital Admission Date (Day)
251	admtype	Num	8		Hospital Admission Type
252	admtypec	Char	20	$20.	Hospital Admission Type
253	admother	Char	50	$50.	Hospital Admission Type: Other
254	icudt	Num	8	BEST12.	ICU Admission Date (Day)
255	icutm	Num	8	TIMEAMPM.	Time of ICU Admission
256	admitfrom	Num	8		Patient Admitted Directly From
257	admitfromc	Char	25	$25.	Patient Admitted Directly From
258	reside	Num	8		Place of residence prior to hospitalization
259	residec	Char	63	$63.	Place of residence prior to hospitalization
260	surgel	Num	8		Patient post-operative elective surgery?
261	surgelc	Char	3	$3.	Patient post-operative elective surgery?
262	icureadmit	Num	8		ICU Readmit
263	icureadmitc	Char	3	$3.	ICU Readmit
264	readmit24	Num	8		ICU Readmit within 24 hours
265	readmit24c	Char	3	$3.	ICU Readmit within 24 hours
266	healthinfo	Num	8		Chronic health information available
267	healthinfoc	Char	3	$3.	Chronic health information available
268	chrondial	Num	8		Patient on chronic or peritoneal dialysis
269	chrondialc	Char	3	$3.	Patient on chronic or peritoneal dialysis
270	aids	Num	8		AIDS (does not include only HIV +)
271	aidsc	Char	3	$3.	AIDS (does not include only HIV +)
272	leuk	Num	8		Leukemia (AML, CML, ALL, multiple myeloma)
273	leukc	Char	3	$3.	Leukemia (AML, CML, ALL, multiple myeloma)

Num	Variable	Type	Len	Format	Label
274	lymph	Num	8		Non-Hodgekins Lymphoma
275	lymphc	Char	3	$3.	Non-Hodgekins Lymphoma
276	tumor	Num	8		Solid tumor with metastasis
277	tumorc	Char	3	$3.	Solid tumor with metastasis
278	immune	Num	8		Immune Suppression w/in past 6 mths
279	immunec	Char	3	$3.	Immune Suppression w/in past 6 mths
280	hepa	Num	8		Hepatic Failure with coma or encephalo.
281	hepac	Char	3	$3.	Hepatic Failure with coma or encephalo.
282	cirr	Num	8		Cirrhosis
283	cirrc	Char	3	$3.	Cirrhosis
284	diab	Num	8		Diabetes Mellitus
285	diabc	Char	3	$3.	Diabetes Mellitus
286	hyper	Num	8		History of hypertension
287	hyperc	Char	3	$3.	History of hypertension
288	myocard	Num	8		Prior myocardial infarction
289	myocardc	Char	3	$3.	Prior myocardial infarction
290	heart	Num	8		Congestive heart failure
291	heartc	Char	3	$3.	Congestive heart failure
292	vascular	Num	8		Peripheral Vascular Disease
293	vascularc	Char	3	$3.	Peripheral Vascular Disease
294	aestroke	Num	8		Prior stroke with Sequel AE
295	aestrokec	Char	3	$3.	Prior stroke with Sequel AE
296	dementia	Num	8		Dementia
297	dementiac	Char	3	$3.	Dementia
298	chrpulm	Num	8		Chronic pulmonary disease
299	chrpulmc	Char	3	$3.	Chronic pulmonary disease
300	arthritis	Num	8		Arthritis
301	arthritisc	Char	3	$3.	Arthritis
302	ulcer	Num	8		Peptic Ulcer Disease
303	ulcerc	Char	3	$3.	Peptic Ulcer Disease
304	vasol24	Num	8		Vasopressors in the 24 hours prior to randomization
305	vasol24c	Char	3	$3.	Vasopressors in the 24 hours prior to randomization
306	hasddtX	Char	64	$64.	Hospital Admission Date (Not Done)
307	admtypeX	Char	64	$64.	Hospital Admission Type (Not Done)
308	icudtx	Char	64	$64.	ICU Admission Date (Not Done)
309	icutmx	Char	64	$64.	Time of ICU Admission (Not Done)
310	admitfromX	Char	64	$64.	Patient Admitted Directly From (Not Done)
311	resideX	Char	64	$64.	Place of residence prior to hospitalization (Not Done)
312	surgelX	Char	64	$64.	Patient post-operative elective surgery? (Not Done)

Num	Variable	Type	Len	Format	Label
313	icureadmitX	Char	64	$64.	ICU Readmit (Not Done)
314	readmit24X	Char	64	$64.	ICU Readmit within 24 hours (Not Done)
315	healthinfoX	Char	64	$64.	Chronic health information available (Not Done)
316	chrondialX	Char	64	$64.	Patient on chronic or peritoneal dialysis (Not Done)
317	aidsX	Char	64	$64.	AIDS (does not include only HIV +) (Not Done)
318	leukX	Char	64	$64.	Leukemia (AML, CML, ALL, multiple myeloma) (Not Done)
319	lymphX	Char	64	$64.	Non-Hodgekins Lymphoma (Not Done)
320	tumorX	Char	64	$64.	Solid tumor with metastasis (Not Done)
321	immuneX	Char	64	$64.	Immune Suppression w/in past 6 mths (Not Done)
322	hepaX	Char	64	$64.	Hepatic Failure with coma or encephalo. (Not Done)
323	cirrX	Char	64	$64.	Cirrhosis (Not Done)
324	diabX	Char	64	$64.	Diabetes Mellitus (Not Done)
325	hyperX	Char	64	$64.	History of hypertension (Not Done)
326	myocardX	Char	64	$64.	Prior myocardial infarction (Not Done)
327	heartX	Char	64	$64.	Congestive heart failure (Not Done)
328	vascularX	Char	64	$64.	Peripheral Vascular Disease (Not Done)
329	aestrokeX	Char	64	$64.	Prior stroke with Sequel AE (Not Done)
330	dementiaX	Char	64	$64.	Dementia (Not Done)
331	chrpulmX	Char	64	$64.	Chronic pulmonary disease (Not Done)
332	arthritisX	Char	64	$64.	Arthritis (Not Done)
333	ulcerX	Char	64	$64.	Peptic Ulcer Disease (Not Done)
334	alchfreq	Num	8		How often do you have a drink containing alcohol?
335	alchfreqc	Char	27	$27.	How often do you have a drink containing alcohol?
336	alchnum	Num	8		How many drinks containing alcohol do you have on a typical day when you are drinking?
337	alchnumc	Char	10	$10.	How many drinks containing alcohol do you have on a typical day when you are drinking?
338	alch6freq	Num	8		How often do you have six or more drinks on one occasion?
339	alch6freqc	Char	21	$21.	How often do you have six or more drinks on one occasion?
340	alchstop	Num	8		How often during the last year have you found you were not able to stop drinking once you had started?
341	alchstopc	Char	21	$21.	How often during the last year have you found you were not able to stop drinking once you had started?
342	alchfail	Num	8		How often during the last year have you failed to do what was normally expected from you because of drinking?
343	alchfailc	Char	21	$21.	How often during the last year have you failed to do what was normally expected from you because of drinking?
344	alchmorning	Num	8		How often during the last year have you needed a first drink in the morning to get yourself going after a heavy drinking session?

Num	Variable	Type	Len	Format	Label
345	alchmorningc	Char	21	$21.	How often during the last year have you needed a first drink in the morning to get yourself going after a heavy drinking session?
346	alchguilt	Num	8		How often during the last year have you had a feeling of guilt or remorse after drinking?
347	alchguiltc	Char	21	$21.	How often during the last year have you had a feeling of guilt or remorse after drinking?
348	alchmemory	Num	8		How often during the last year have you been unable to remember what happened the night before because you had been drinking?
349	alchmemoryc	Char	21	$21.	How often during the last year have you been unable to remember what happened the night before because you had been drinking?
350	alchinjury	Num	8		Have you or someone else been injured as a result of your drinking?
351	alchinjuryc	Char	29	$29.	Have you or someone else been injured as a result of your drinking?
352	alchconcern	Num	8		Has a relative or friend or a doctor or another health worker been concerned about your drinking or suggested you cut down?
353	alchconcernc	Char	29	$29.	Has a relative or friend or a doctor or another health worker been concerned about your drinking or suggested you cut down?
354	smoker	Num	8		Ever smoker (> 100 cigarettes in lifetime)?
355	smokerc	Char	3	$3.	Ever smoker (> 100 cigarettes in lifetime)?
356	packyr	Num	8		If ever smoker, estimate pack years: (Pack years = [# packs per day] x [# years smoked])
357	cursmoker	Num	8		Current Smoker?
358	cursmokerc	Char	14	$14.	Current Smoker?
359	smokequitdt	Num	8	BEST12.	When Quit Smoking (Day)
360	alchfreqX	Char	64	$64.	How often do you have a drink containing alcohol? (Not Done)
361	alchnumX	Char	64	$64.	How many drinks containing alcohol do you have on a typical day when you are drinking? (Not Done)
362	alch6freqX	Char	64	$64.	How often do you have six or more drinks on one occasion? (Not Done)
363	alchstopX	Char	64	$64.	How often during the last year have you found you were not able to stop drinking once you had started? (Not Done)
364	alchfailX	Char	64	$64.	How often during the last year have you failed to do what was normally expected from you because of drinking? (Not Done)
365	alchmorningX	Char	64	$64.	How often during the last year have you needed a first drink in the morning to get yourself going after a heavy drinking session? (Not Done)
366	alchguiltX	Char	64	$64.	How often during the last year have you had a feeling of guilt or remorse after drinking? (Not Done)
367	alchmemoryX	Char	64	$64.	How often during the last year have you been unable to remember what happened the night before because you had been drinking? (Not Done)

Num	Variable	Type	Len	Format	Label
368	alchinjuryX	Char	64	$64.	Have you or someone else been injured as a result of your drinking? (Not Done)
369	alchconcernX	Char	64	$64.	Has a relative or friend or a doctor or another health worker been concerned about your drinking or suggested you cut down? (Not Done)
370	smokerX	Char	64	$64.	Ever smoker (> 100 cigarettes in lifetime) (Not Done)?
371	packyrX	Char	64	$64.	If ever smoker, estimate pack years: (Not Done)
372	cursmokerX	Char	64	$64.	Current Smoker?
373	hgb_0	Num	8		Hgb (g/dL)
374	sodium_0	Num	8		Sodium (mEq/L):
375	potas_0	Num	8		Postassium (mEq/L)
376	gluc_0	Num	8		Glucose (mg/dL):
377	bicarb_0	Num	8		Serum Bicarb (mEq/L):
378	phos_0	Num	8		Serum Phosphorous (mg/dL)
379	mg_0	Num	8		Serum Magnesium (mEq/L)
380	protein_0	Num	8		Total Protein (g/dL)
381	album_0	Num	8		Albumin (g/dL):
382	glucmin_0	Num	8		Lowest glucose this day:
383	prothrombin_0	Num	8		Prothrombin time
384	hgbx	Char	64	$64.	Hgb (g/dL) (Not Done)
385	sodiumx	Char	64	$64.	Sodium (mEq/L): (Not Done)
386	potasx	Char	64	$64.	Postassium (mEq/L) (Not Done)
387	glucx	Char	64	$64.	Glucose (mg/dL): (Not Done)
388	bicarbx	Char	64	$64.	Serum Bicarb (mEq/L): (Not Done)
389	phosx_0	Char	64	$64.	Serum Phosphorous (mg/dL) (Not Done)
390	mgx_0	Char	64	$64.	Serum Magnesium (mEq/L) (Not Done)
391	proteinx_0	Char	64	$64.	Total Protein (g/dL) (Not Done)
392	albumx_0	Char	64	$64.	Albumin (g/dL): (Not Done)
393	alt_0	Num	8		ALT
394	ast	Num	8		AST
395	ck_0	Num	8		CK
396	crp_0	Num	8		CRP
397	crphl_0	Num	8		High sensitivity or regular CRP
398	crphlc_0	Char	16	$16.	High sensitivity or regular CRP
399	insulinrt_1	Num	8		Insulin drip rate at time of glucose value
400	insulinsq_1	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
401	hgb_1	Num	8		Hgb (g/dL)
402	sodium_1	Num	8		Sodium (mEq/L):
403	potas_1	Num	8		Postassium (mEq/L)
404	gluc_1	Num	8		Glucose (mg/dL):

Num	Variable	Type	Len	Format	Label
405	bicarb_1	Num	8		Serum Bicarb (mEq/L):
406	phos_1	Num	8		Serum Phosphorus (mEq/L)
407	mg_1	Num	8		Serum Magnesium (mg/dL)
408	protein_1	Num	8		Total Protein (g/dL)
409	album_1	Num	8		Albumin (g/dL):
410	prothrombin_1	Num	8		Prothrombin time (Seconds)
411	glucmin_1	Num	8		Lowest glucose this day
412	phosx_1	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
413	mgx_1	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
414	proteinx_1	Char	64	$64.	Total Protein (g/dL) (Not Done)
415	albumx_1	Char	64	$64.	Albumin (g/dL): (Not Done)
416	alt_1	Num	8		ALT
417	ck_1	Num	8		CK
418	crp_1	Num	8		CRP
419	crphl_1	Num	8		High sensitivity or regular CRP
420	crphlc_1	Char	16	$16.	High sensitivity or regular CRP
421	insulinrt_2	Num	8		Insulin drip rate at time of glucose value
422	insulinsq_2	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
423	hgb_2	Num	8		Hgb (g/dL)
424	sodium_2	Num	8		Sodium (mEq/L):
425	potas_2	Num	8		Postassium (mEq/L)
426	gluc_2	Num	8		Glucose (mg/dL):
427	bicarb_2	Num	8		Serum Bicarb (mEq/L):
428	phos_2	Num	8		Serum Phosphorus (mEq/L)
429	mg_2	Num	8		Serum Magnesium (mg/dL)
430	protein_2	Num	8		Total Protein (g/dL)
431	album_2	Num	8		Albumin (g/dL):
432	prothrombin_2	Num	8		Prothrombin time (Seconds)
433	glucmin_2	Num	8		Lowest glucose this day
434	phosx_2	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
435	mgx_2	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
436	proteinx_2	Char	64	$64.	Total Protein (g/dL) (Not Done)
437	albumx_2	Char	64	$64.	Albumin (g/dL): (Not Done)
438	alt_2	Num	8		ALT
439	ck_2	Num	8		CK
440	crp_2	Num	8		CRP
441	crphl_2	Num	8		High sensitivity or regular CRP
442	crphlc_2	Char	16	$16.	High sensitivity or regular CRP
443	insulinrt_3	Num	8		Insulin drip rate at time of glucose value

Num	Variable	Type	Len	Format	Label
444	insulinsq_3	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
445	hgb_3	Num	8		Hgb (g/dL)
446	sodium_3	Num	8		Sodium (mEq/L):
447	potas_3	Num	8		Postassium (mEq/L)
448	gluc_3	Num	8		Glucose (mg/dL):
449	bicarb_3	Num	8		Serum Bicarb (mEq/L):
450	phos_3	Num	8		Serum Phosphorus (mEq/L)
451	mg_3	Num	8		Serum Magnesium (mg/dL)
452	protein_3	Num	8		Total Protein (g/dL)
453	album_3	Num	8		Albumin (g/dL):
454	prothrombin_3	Num	8		Prothrombin time (Seconds)
455	glucmin_3	Num	8		Lowest glucose this day
456	phosx_3	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
457	mgx_3	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
458	proteinx_3	Char	64	$64.	Total Protein (g/dL) (Not Done)
459	albumx_3	Char	64	$64.	Albumin (g/dL): (Not Done)
460	alt_3	Num	8		ALT
461	ck_3	Num	8		CK
462	crp_3	Num	8		CRP
463	crphl_3	Num	8		High sensitivity or regular CRP
464	crphlc_3	Char	16	$16.	High sensitivity or regular CRP
465	insulinrt_4	Num	8		Insulin drip rate at time of glucose value
466	insulinsq_4	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
467	hgb_4	Num	8		Hgb (g/dL)
468	sodium_4	Num	8		Sodium (mEq/L):
469	potas_4	Num	8		Postassium (mEq/L)
470	gluc_4	Num	8		Glucose (mg/dL):
471	bicarb_4	Num	8		Serum Bicarb (mEq/L):
472	phos_4	Num	8		Serum Phosphorus (mEq/L)
473	mg_4	Num	8		Serum Magnesium (mg/dL)
474	protein_4	Num	8		Total Protein (g/dL)
475	album_4	Num	8		Albumin (g/dL):
476	prothrombin_4	Num	8		Prothrombin time (Seconds)
477	glucmin_4	Num	8		Lowest glucose this day
478	phosx_4	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
479	mgx_4	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
480	proteinx_4	Char	64	$64.	Total Protein (g/dL) (Not Done)
481	albumx_4	Char	64	$64.	Albumin (g/dL): (Not Done)
482	alt_4	Num	8		ALT

Num	Variable	Type	Len	Format	Label
483	ck_4	Num	8		CK
484	crp_4	Num	8		CRP
485	crphl_4	Num	8		High sensitivity or regular CRP
486	crphlc_4	Char	16	$16.	High sensitivity or regular CRP
487	insulinrt_5	Num	8		Insulin drip rate at time of glucose value
488	insulinsq_5	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
489	hgb_5	Num	8		Hgb (g/dL)
490	sodium_5	Num	8		Sodium (mEq/L):
491	potas_5	Num	8		Postassium (mEq/L)
492	gluc_5	Num	8		Glucose (mg/dL):
493	bicarb_5	Num	8		Serum Bicarb (mEq/L):
494	phos_5	Num	8		Serum Phosphorus (mEq/L)
495	mg_5	Num	8		Serum Magnesium (mg/dL)
496	protein_5	Num	8		Total Protein (g/dL)
497	album_5	Num	8		Albumin (g/dL):
498	prothrombin_5	Num	8		Prothrombin time (Seconds)
499	glucmin_5	Num	8		Lowest glucose this day
500	phosx_5	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
501	mgx_5	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
502	proteinx_5	Char	64	$64.	Total Protein (g/dL) (Not Done)
503	albumx_5	Char	64	$64.	Albumin (g/dL): (Not Done)
504	alt_5	Num	8		ALT
505	ck_5	Num	8		CK
506	crp_5	Num	8		CRP
507	crphl_5	Num	8		High sensitivity or regular CRP
508	crphlc_5	Char	16	$16.	High sensitivity or regular CRP
509	insulinrt_6	Num	8		Insulin drip rate at time of glucose value
510	insulinsq_6	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
511	hgb_6	Num	8		Hgb (g/dL)
512	sodium_6	Num	8		Sodium (mEq/L):
513	potas_6	Num	8		Postassium (mEq/L)
514	gluc_6	Num	8		Glucose (mg/dL):
515	bicarb_6	Num	8		Serum Bicarb (mEq/L):
516	phos_6	Num	8		Serum Phosphorus (mEq/L)
517	mg_6	Num	8		Serum Magnesium (mg/dL)
518	protein_6	Num	8		Total Protein (g/dL)
519	album_6	Num	8		Albumin (g/dL):
520	prothrombin_6	Num	8		Prothrombin time (Seconds)
521	glucmin_6	Num	8		Lowest glucose this day

Num	Variable	Type	Len	Format	Label
522	phosx_6	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
523	mgx_6	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
524	proteinx_6	Char	64	$64.	Total Protein (g/dL) (Not Done)
525	albumx_6	Char	64	$64.	Albumin (g/dL): (Not Done)
526	alt_6	Num	8		ALT
527	ck_6	Num	8		CK
528	crp_6	Num	8		CRP
529	crphl_6	Num	8		High sensitivity or regular CRP
530	crphlc_6	Char	16	$16.	High sensitivity or regular CRP
531	insulinrt_7	Num	8		Insulin drip rate at time of glucose value
532	insulinsq_7	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
533	hgb_7	Num	8		Hgb (g/dL)
534	sodium_7	Num	8		Sodium (mEq/L):
535	potas_7	Num	8		Postassium (mEq/L)
536	gluc_7	Num	8		Glucose (mg/dL):
537	bicarb_7	Num	8		Serum Bicarb (mEq/L):
538	phos_7	Num	8		Serum Phosphorus (mEq/L)
539	mg_7	Num	8		Serum Magnesium (mg/dL)
540	protein_7	Num	8		Total Protein (g/dL)
541	album_7	Num	8		Albumin (g/dL):
542	prothrombin_7	Num	8		Prothrombin time (Seconds)
543	glucmin_7	Num	8		Lowest glucose this day
544	phosx_7	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
545	mgx_7	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
546	proteinx_7	Char	64	$64.	Total Protein (g/dL) (Not Done)
547	albumx_7	Char	64	$64.	Albumin (g/dL): (Not Done)
548	alt_7	Num	8		ALT
549	ck_7	Num	8		CK
550	crp_7	Num	8		CRP
551	crphl_7	Num	8		High sensitivity or regular CRP
552	crphlc_7	Char	16	$16.	High sensitivity or regular CRP
553	insulinrt_8	Num	8		Insulin drip rate at time of glucose value
554	insulinsq_8	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
555	hgb_8	Num	8		Hgb (g/dL)
556	sodium_8	Num	8		Sodium (mEq/L):
557	potas_8	Num	8		Postassium (mEq/L)
558	gluc_8	Num	8		Glucose (mg/dL):
559	bicarb_8	Num	8		Serum Bicarb (mEq/L):
560	phos_8	Num	8		Serum Phosphorus (mEq/L)

Num	Variable	Type	Len	Format	Label
561	mg_8	Num	8		Serum Magnesium (mg/dL)
562	protein_8	Num	8		Total Protein (g/dL)
563	album_8	Num	8		Albumin (g/dL):
564	prothrombin_8	Num	8		Prothrombin time (Seconds)
565	glucmin_8	Num	8		Lowest glucose this day
566	phosx_8	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
567	mgx_8	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
568	proteinx_8	Char	64	$64.	Total Protein (g/dL) (Not Done)
569	albumx_8	Char	64	$64.	Albumin (g/dL): (Not Done)
570	alt_8	Num	8		ALT
571	ck_8	Num	8		CK
572	crp_8	Num	8		CRP
573	crphl_8	Num	8		High sensitivity or regular CRP
574	crphlc_8	Char	16	$16.	High sensitivity or regular CRP
575	insulinrt_9	Num	8		Insulin drip rate at time of glucose value
576	insulinsq_9	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
577	hgb_9	Num	8		Hgb (g/dL)
578	sodium_9	Num	8		Sodium (mEq/L):
579	potas_9	Num	8		Postassium (mEq/L)
580	gluc_9	Num	8		Glucose (mg/dL):
581	bicarb_9	Num	8		Serum Bicarb (mEq/L):
582	phos_9	Num	8		Serum Phosphorus (mEq/L)
583	mg_9	Num	8		Serum Magnesium (mg/dL)
584	protein_9	Num	8		Total Protein (g/dL)
585	album_9	Num	8		Albumin (g/dL):
586	prothrombin_9	Num	8		Prothrombin time (Seconds)
587	glucmin_9	Num	8		Lowest glucose this day
588	phosx_9	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
589	mgx_9	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
590	proteinx_9	Char	64	$64.	Total Protein (g/dL) (Not Done)
591	albumx_9	Char	64	$64.	Albumin (g/dL): (Not Done)
592	alt_9	Num	8		ALT
593	ck_9	Num	8		CK
594	crp_9	Num	8		CRP
595	crphl_9	Num	8		High sensitivity or regular CRP
596	crphlc_9	Char	16	$16.	High sensitivity or regular CRP
597	insulinrt_10	Num	8		Insulin drip rate at time of glucose value
598	insulinsq_10	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
599	hgb_10	Num	8		Hgb (g/dL)

Num	Variable	Type	Len	Format	Label
600	sodium_10	Num	8		Sodium (mEq/L):
601	potas_10	Num	8		Postassium (mEq/L)
602	gluc_10	Num	8		Glucose (mg/dL):
603	bicarb_10	Num	8		Serum Bicarb (mEq/L):
604	phos_10	Num	8		Serum Phosphorus (mEq/L)
605	mg_10	Num	8		Serum Magnesium (mg/dL)
606	protein_10	Num	8		Total Protein (g/dL)
607	album_10	Num	8		Albumin (g/dL):
608	prothrombin_10	Num	8		Prothrombin time (Seconds)
609	glucmin_10	Num	8		Lowest glucose this day
610	phosx_10	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
611	mgx_10	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
612	proteinx_10	Char	64	$64.	Total Protein (g/dL) (Not Done)
613	albumx_10	Char	64	$64.	Albumin (g/dL): (Not Done)
614	alt_10	Num	8		ALT
615	ck_10	Num	8		CK
616	crp_10	Num	8		CRP
617	crphl_10	Num	8		High sensitivity or regular CRP
618	crphlc_10	Char	16	$16.	High sensitivity or regular CRP
619	insulinrt_11	Num	8		Insulin drip rate at time of glucose value
620	insulinsq_11	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
621	hgb_11	Num	8		Hgb (g/dL)
622	sodium_11	Num	8		Sodium (mEq/L):
623	potas_11	Num	8		Postassium (mEq/L)
624	gluc_11	Num	8		Glucose (mg/dL):
625	bicarb_11	Num	8		Serum Bicarb (mEq/L):
626	phos_11	Num	8		Serum Phosphorus (mEq/L)
627	mg_11	Num	8		Serum Magnesium (mg/dL)
628	protein_11	Num	8		Total Protein (g/dL)
629	album_11	Num	8		Albumin (g/dL):
630	prothrombin_11	Num	8		Prothrombin time (Seconds)
631	glucmin_11	Num	8		Lowest glucose this day
632	phosx_11	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
633	mgx_11	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
634	proteinx_11	Char	64	$64.	Total Protein (g/dL) (Not Done)
635	albumx_11	Char	64	$64.	Albumin (g/dL): (Not Done)
636	alt_11	Num	8		ALT
637	ck_11	Num	8		CK
638	crp_11	Num	8		CRP

Num	Variable	Type	Len	Format	Label
639	crphl_11	Num	8		High sensitivity or regular CRP
640	crphlc_11	Char	16	$16.	High sensitivity or regular CRP
641	insulinrt_12	Num	8		Insulin drip rate at time of glucose value
642	insulinsq_12	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
643	hgb_12	Num	8		Hgb (g/dL)
644	sodium_12	Num	8		Sodium (mEq/L):
645	potas_12	Num	8		Postassium (mEq/L)
646	gluc_12	Num	8		Glucose (mg/dL):
647	bicarb_12	Num	8		Serum Bicarb (mEq/L):
648	phos_12	Num	8		Serum Phosphorus (mEq/L)
649	mg_12	Num	8		Serum Magnesium (mg/dL)
650	protein_12	Num	8		Total Protein (g/dL)
651	album_12	Num	8		Albumin (g/dL):
652	prothrombin_12	Num	8		Prothrombin time (Seconds)
653	glucmin_12	Num	8		Lowest glucose this day
654	phosx_12	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
655	mgx_12	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
656	proteinx_12	Char	64	$64.	Total Protein (g/dL) (Not Done)
657	albumx_12	Char	64	$64.	Albumin (g/dL): (Not Done)
658	alt_12	Num	8		ALT
659	ck_12	Num	8		CK
660	crp_12	Num	8		CRP
661	crphl_12	Num	8		High sensitivity or regular CRP
662	crphlc_12	Char	16	$16.	High sensitivity or regular CRP
663	insulinrt_14	Num	8		Insulin drip rate at time of glucose value
664	insulinsq_14	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
665	hgb_14	Num	8		Hgb (g/dL)
666	sodium_14	Num	8		Sodium (mEq/L):
667	potas_14	Num	8		Postassium (mEq/L)
668	gluc_14	Num	8		Glucose (mg/dL):
669	bicarb_14	Num	8		Serum Bicarb (mEq/L):
670	phos_14	Num	8		Serum Phosphorus (mEq/L)
671	mg_14	Num	8		Serum Magnesium (mg/dL)
672	protein_14	Num	8		Total Protein (g/dL)
673	album_14	Num	8		Albumin (g/dL):
674	prothrombin_14	Num	8		Prothrombin time (Seconds)
675	glucmin_14	Num	8		Lowest glucose this day
676	phosx_14	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
677	mgx_14	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)

Num	Variable	Type	Len	Format	Label
678	proteinx_14	Char	64	$64.	Total Protein (g/dL) (Not Done)
679	albumx_14	Char	64	$64.	Albumin (g/dL): (Not Done)
680	alt_14	Num	8		ALT
681	ck_14	Num	8		CK
682	crp_14	Num	8		CRP
683	crphl_14	Num	8		High sensitivity or regular CRP
684	crphlc_14	Char	16	$16.	High sensitivity or regular CRP
685	insulinrt_21	Num	8		Insulin drip rate at time of glucose value
686	insulinsq_21	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
687	hgb_21	Num	8		Hgb (g/dL)
688	sodium_21	Num	8		Sodium (mEq/L):
689	potas_21	Num	8		Postassium (mEq/L)
690	gluc_21	Num	8		Glucose (mg/dL):
691	bicarb_21	Num	8		Serum Bicarb (mEq/L):
692	phos_21	Num	8		Serum Phosphorus (mEq/L)
693	mg_21	Num	8		Serum Magnesium (mg/dL)
694	protein_21	Num	8		Total Protein (g/dL)
695	album_21	Num	8		Albumin (g/dL):
696	prothrombin_21	Num	8		Prothrombin time (Seconds)
697	glucmin_21	Num	8		Lowest glucose this day
698	phosx_21	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
699	mgx_21	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
700	proteinx_21	Char	64	$64.	Total Protein (g/dL) (Not Done)
701	albumx_21	Char	64	$64.	Albumin (g/dL): (Not Done)
702	alt_21	Num	8		ALT
703	ck_21	Num	8		CK
704	crp_21	Num	8		CRP
705	crphl_21	Num	8		High sensitivity or regular CRP
706	crphlc_21	Char	16	$16.	High sensitivity or regular CRP
707	ipatrox	Char	64		
708	hrate_0	Num	8		Heart Rate (beats/min):
709	sysbp_0	Num	8		Systolic BP (mmHg):
710	diabp_0	Num	8		Diastolic BP (mmHg)
711	cvp_0	Num	8		Central Venous Pressure (mmHg):
712	map	Num	8		Mean Arterial Pressure (mmHg):
713	temp_0	Num	8		Temperature (C)
714	height	Num	8		Measured Height (cm)
715	weight	Num	8		Measured Weight (Kg)
716	pbw	Char	255	$255.	Predicted Body Weight

Num	Variable	Type	Len	Format	Label
717	vaso_0	Num	8		IV Vasopressors or inotropes in 24 hrs preceding randomization
718	vasoc_0	Char	3	$3.	IV Vasopressors or inotropes in 24 hrs preceding randomization
719	dobut_0	Num	8		Dobutamine Infusion Rate
720	dobutu_0	Char	9	$9.	Dobutamine Units
721	dopa_0	Num	8		Dopamine Infusion Rate:
722	dopau_0	Char	9	$9.	Dopamine Units
723	norepi_0	Num	8		Norepinephrine Infusion Rate
724	norepiu_0	Char	9	$9.	Norepinephrine Units
725	epi_0	Num	8		Epinephrine Infusion Rate
726	epiu_0	Char	9	$9.	Epinephrine Units
727	vasorate_0	Num	8		Vasopressin Infusion Rate
728	neosyn_0	Num	8		Neosynephrine (phenylephrine) Infusion Rate
729	neosynu_0	Char	9	$9.	Neosynephrine (phenylephrine) Units
730	vasooth_0	Char	50	$50.	Other Vasopressor
731	betablock_0	Num	8		Beta blockers (IV, PO, PGT) in 24 hours preceding randomization?
732	betablockc_0	Char	3	$3.	Beta blockers (IV, PO, PGT) in 24 hours preceding randomization?
733	hratex_0	Char	64	$64.	Heart Rate (beats/min): (Not done)
734	sysbpx_0	Char	64	$64.	Systolic BP (mmHg): (Not Done)
735	diabpx_0	Char	64	$64.	Diastolic BP (mmHg) (Not Done)
736	tempx_0	Char	64	$64.	Temperature (C) (Not Done)
737	heightx	Char	64	$64.	Measured Height (cm) (Not Done)
738	vasox_0	Char	64	$64.	IV Vasopressors or inotropes in 24 hrs preceding randomization (Not Done)
739	betablockx_0	Char	64	$64.	Beta blockers (IV, PO, PGT) in 24 hours preceding randomization? (Not Done)
740	cxrquads_1	Num	8		CXR: Number of quadrants with infiltrates
741	cort20_1	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
742	cort20c_1	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
743	ipatro_1	Num	8		Aerosolized or MDI delivered ipatropium?
744	ipatroc_1	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
745	ipadose_1	Num	8		Yes: Enter total number of doses this day:
746	nsbetag_1	Num	8		Non-study beta-agonist aerosol this day?
747	nsbetagc_1	Char	85	$85.	Non-study beta-agonist aerosol this day?
748	nsbetagdose_1	Num	8		Yes: Enter total dose in mg this day
749	cort20x_1	Char	64	$64.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?(Not Done)

Num	Variable	Type	Len	Format	Label
750	nsbetagx_1	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
751	hrate_1	Num	8		Heart Rate (beat/min):
752	sysbp_1	Num	8		Systolic BP (mmHg):
753	diabp_1	Num	8		Diastolic BP (mmHg):
754	temp_1	Num	8		Temperature (Celcius):
755	cvp_1	Num	8		CVP (mmHg):
756	vaso_1	Num	8		Vasopressors/inotropes this day?
757	vasoc_1	Char	3	$3.	Vasopressors/inotropes this day?
758	dobut_1	Num	8		IV Dobutamine Infusion Rate:
759	dobutu_1	Char	9	$9.	IV Dobutamine Infusion Rate Units
760	dopa_1	Num	8		IV Dopamine Infusion Rate:
761	dopau_1	Char	9	$9.	IV Dopamine Infusion Rate Units
762	norepi_1	Num	8		IV Norepinephrine Infusion Rate:
763	norepiu_1	Char	9	$9.	IV Norepinephrine Infusion Rate Units
764	epi_1	Num	8		IV Epinephrine Infusion Rate:
765	epiu_1	Char	9	$9.	ug/kg/min or ug/min
766	vasorate_1	Num	8		IV Vasopressin Infusion Rate (units/min):
767	neosyn_1	Num	8		IV Neosynephrine Infusion Rate:
768	neosynu_1	Char	9	$9.	IV Neosynephrine Infusion Rate Units
769	vasooth_1	Char	50	$50.	If Other Please Specify:
770	betablock_1	Num	8		Beta Blockers (IV, PO, PGT) this day?
771	betablockc_1	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
772	hratex_1	Char	64	$64.	Heart Rate (beat/min): (Not Done)
773	sysbpx_1	Char	64	$64.	Systolic BP (mmHg): (Not Done)
774	diabpx_1	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
775	tempx_1	Char	64	$64.	Temperature (Celcius): (Not Done)
776	vasox_1	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
777	betablockx_1	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
778	cxrquads_2	Num	8		CXR: Number of quadrants with infiltrates
779	cort20_2	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
780	cort20c_2	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
781	ipatro_2	Num	8		Aerosolized or MDI delivered ipatropium?
782	ipatroc_2	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
783	ipadose_2	Num	8		Yes: Enter total number of doses this day:
784	nsbetag_2	Num	8		Non-study beta-agonist aerosol this day?
785	nsbetagc_2	Char	85	$85.	Non-study beta-agonist aerosol this day?
786	nsbetagdose_2	Num	8		Yes: Enter total dose in mg this day

Num	Variable	Type	Len	Format	Label
787	cort20x_2	Char	64	$64.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?(Not Done)
788	nsbetagx_2	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
789	hrate_2	Num	8		Heart Rate (beat/min):
790	sysbp_2	Num	8		Systolic BP (mmHg):
791	diabp_2	Num	8		Diastolic BP (mmHg):
792	temp_2	Num	8		Temperature (Celcius):
793	cvp_2	Num	8		CVP (mmHg):
794	vaso_2	Num	8		Vasopressors/inotropes this day?
795	vasoc_2	Char	3	$3.	Vasopressors/inotropes this day?
796	dobut_2	Num	8		IV Dobutamine Infusion Rate:
797	dobutu_2	Char	9	$9.	IV Dobutamine Infusion Rate Units
798	dopa_2	Num	8		IV Dopamine Infusion Rate:
799	dopau_2	Char	9	$9.	IV Dopamine Infusion Rate Units
800	norepi_2	Num	8		IV Norepinephrine Infusion Rate:
801	norepiu_2	Char	9	$9.	IV Norepinephrine Infusion Rate Units
802	epi_2	Num	8		IV Epinephrine Infusion Rate:
803	epiu_2	Char	9	$9.	ug/kg/min or ug/min
804	vasorate_2	Num	8		IV Vasopressin Infusion Rate (units/min):
805	neosyn_2	Num	8		IV Neosynephrine Infusion Rate:
806	neosynu_2	Char	9	$9.	IV Neosynephrine Infusion Rate Units
807	vasooth_2	Char	50	$50.	If Other Please Specify:
808	betablock_2	Num	8		Beta Blockers (IV, PO, PGT) this day?
809	betablockc_2	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
810	hratex_2	Char	64	$64.	Heart Rate (beat/min): (Not Done)
811	sysbpx_2	Char	64	$64.	Systolic BP (mmHg): (Not Done)
812	diabpx_2	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
813	tempx_2	Char	64	$64.	Temperature (Celcius): (Not Done)
814	vasox_2	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
815	betablockx_2	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
816	cxrquads_3	Num	8		CXR: Number of quadrants with infiltrates
817	cort20_3	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
818	cort20c_3	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
819	ipatro_3	Num	8		Aerosolized or MDI delivered ipatropium?
820	ipatroc_3	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
821	ipadose_3	Num	8		Yes: Enter total number of doses this day:
822	nsbetag_3	Num	8		Non-study beta-agonist aerosol this day?

Num	Variable	Type	Len	Format	Label
823	nsbetagc_3	Char	85	$85.	Non-study beta-agonist aerosol this day?
824	nsbetagdose_3	Num	8		Yes: Enter total dose in mg this day
825	cort20x_3	Char	64	$64.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?(Not Done)
826	nsbetagx_3	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
827	hrate_3	Num	8		Heart Rate (beat/min):
828	sysbp_3	Num	8		Systolic BP (mmHg):
829	diabp_3	Num	8		Diastolic BP (mmHg):
830	temp_3	Num	8		Temperature (Celcius):
831	cvp_3	Num	8		CVP (mmHg):
832	vaso_3	Num	8		Vasopressors/inotropes this day?
833	vasoc_3	Char	3	$3.	Vasopressors/inotropes this day?
834	dobut_3	Num	8		IV Dobutamine Infusion Rate:
835	dobutu_3	Char	9	$9.	IV Dobutamine Infusion Rate Units
836	dopa_3	Num	8		IV Dopamine Infusion Rate:
837	dopau_3	Char	9	$9.	IV Dopamine Infusion Rate Units
838	norepi_3	Num	8		IV Norepinephrine Infusion Rate:
839	norepiu_3	Char	9	$9.	IV Norepinephrine Infusion Rate Units
840	epi_3	Num	8		IV Epinephrine Infusion Rate:
841	epiu_3	Char	9	$9.	ug/kg/min or ug/min
842	vasorate_3	Num	8		IV Vasopressin Infusion Rate (units/min):
843	neosyn_3	Num	8		IV Neosynephrine Infusion Rate:
844	neosynu_3	Char	9	$9.	IV Neosynephrine Infusion Rate Units
845	vasooth_3	Char	50	$50.	If Other Please Specify:
846	betablock_3	Num	8		Beta Blockers (IV, PO, PGT) this day?
847	betablockc_3	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
848	hratex_3	Char	64	$64.	Heart Rate (beat/min): (Not Done)
849	sysbpx_3	Char	64	$64.	Systolic BP (mmHg): (Not Done)
850	diabpx_3	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
851	tempx_3	Char	64	$64.	Temperature (Celcius): (Not Done)
852	vasox_3	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
853	betablockx_3	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
854	cxrquads_4	Num	8		CXR: Number of quadrants with infiltrates
855	cort20_4	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
856	cort20c_4	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
857	ipatro_4	Num	8		Aerosolized or MDI delivered ipatropium?
858	ipatroc_4	Char	50	$50.	Aerosolized or MDI delivered ipatropium?

Num	Variable	Type	Len	Format	Label
859	ipadose_4	Num	8		Yes: Enter total number of doses this day:
860	nsbetag_4	Num	8		Non-study beta-agonist aerosol this day?
861	nsbetagc_4	Char	85	$85.	Non-study beta-agonist aerosol this day?
862	nsbetagdose_4	Num	8		Yes: Enter total dose in mg this day
863	cort20x_4	Char	64	$64.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?(Not Done)
864	nsbetagx_4	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
865	hrate_4	Num	8		Heart Rate (beat/min):
866	sysbp_4	Num	8		Systolic BP (mmHg):
867	diabp_4	Num	8		Diastolic BP (mmHg):
868	temp_4	Num	8		Temperature (Celcius):
869	cvp_4	Num	8		CVP (mmHg):
870	vaso_4	Num	8		Vasopressors/inotropes this day?
871	vasoc_4	Char	3	$3.	Vasopressors/inotropes this day?
872	dobut_4	Num	8		IV Dobutamine Infusion Rate:
873	dobutu_4	Char	9	$9.	IV Dobutamine Infusion Rate Units
874	dopa_4	Num	8		IV Dopamine Infusion Rate:
875	dopau_4	Char	9	$9.	IV Dopamine Infusion Rate Units
876	norepi_4	Num	8		IV Norepinephrine Infusion Rate:
877	norepiu_4	Char	9	$9.	IV Norepinephrine Infusion Rate Units
878	epi_4	Num	8		IV Epinephrine Infusion Rate:
879	epiu_4	Char	9	$9.	ug/kg/min or ug/min
880	vasorate_4	Num	8		IV Vasopressin Infusion Rate (units/min):
881	neosyn_4	Num	8		IV Neosynephrine Infusion Rate:
882	neosynu_4	Char	9	$9.	IV Neosynephrine Infusion Rate Units
883	vasooth_4	Char	50	$50.	If Other Please Specify:
884	betablock_4	Num	8		Beta Blockers (IV, PO, PGT) this day?
885	betablockc_4	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
886	hratex_4	Char	64	$64.	Heart Rate (beat/min): (Not Done)
887	sysbpx_4	Char	64	$64.	Systolic BP (mmHg): (Not Done)
888	diabpx_4	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
889	tempx_4	Char	64	$64.	Temperature (Celcius): (Not Done)
890	vasox_4	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
891	betablockx_4	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
892	cxrquads_5	Num	8		CXR: Number of quadrants with infiltrates
893	cort20_5	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
894	cort20c_5	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?

Num	Variable	Type	Len	Format	Label
895	ipatro_5	Num	8		Aerosolized or MDI delivered ipatropium?
896	ipatroc_5	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
897	ipadose_5	Num	8		Yes: Enter total number of doses this day:
898	nsbetag_5	Num	8		Non-study beta-agonist aerosol this day?
899	nsbetagc_5	Char	85	$85.	Non-study beta-agonist aerosol this day?
900	nsbetagdose_5	Num	8		Yes: Enter total dose in mg this day
901	cort20x_5	Char	64	$64.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?(Not Done)
902	nsbetagx_5	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
903	hrate_5	Num	8		Heart Rate (beat/min):
904	sysbp_5	Num	8		Systolic BP (mmHg):
905	diabp_5	Num	8		Diastolic BP (mmHg):
906	temp_5	Num	8		Temperature (Celcius):
907	cvp_5	Num	8		CVP (mmHg):
908	vaso_5	Num	8		Vasopressors/inotropes this day?
909	vasoc_5	Char	3	$3.	Vasopressors/inotropes this day?
910	dobut_5	Num	8		IV Dobutamine Infusion Rate:
911	dobutu_5	Char	9	$9.	IV Dobutamine Infusion Rate Units
912	dopa_5	Num	8		IV Dopamine Infusion Rate:
913	dopau_5	Char	9	$9.	IV Dopamine Infusion Rate Units
914	norepi_5	Num	8		IV Norepinephrine Infusion Rate:
915	norepiu_5	Char	9	$9.	IV Norepinephrine Infusion Rate Units
916	epi_5	Num	8		IV Epinephrine Infusion Rate:
917	epiu_5	Char	9	$9.	ug/kg/min or ug/min
918	vasorate_5	Num	8		IV Vasopressin Infusion Rate (units/min):
919	neosyn_5	Num	8		IV Neosynephrine Infusion Rate:
920	neosynu_5	Char	9	$9.	IV Neosynephrine Infusion Rate Units
921	vasooth_5	Char	50	$50.	If Other Please Specify:
922	betablock_5	Num	8		Beta Blockers (IV, PO, PGT) this day?
923	betablockc_5	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
924	hratex_5	Char	64	$64.	Heart Rate (beat/min): (Not Done)
925	sysbpx_5	Char	64	$64.	Systolic BP (mmHg): (Not Done)
926	diabpx_5	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
927	tempx_5	Char	64	$64.	Temperature (Celcius): (Not Done)
928	vasox_5	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
929	betablockx_5	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
930	cxrquads_6	Num	8		CXR: Number of quadrants with infiltrates
931	cort20_6	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?

Num	Variable	Type	Len	Format	Label
932	cort20c_6	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
933	ipatro_6	Num	8		Aerosolized or MDI delivered ipatropium?
934	ipatroc_6	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
935	ipadose_6	Num	8		Yes: Enter total number of doses this day:
936	nsbetag_6	Num	8		Non-study beta-agonist aerosol this day?
937	nsbetagc_6	Char	85	$85.	Non-study beta-agonist aerosol this day?
938	nsbetagdose_6	Num	8		Yes: Enter total dose in mg this day
939	cort20x_6	Char	64	$64.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?(Not Done)
940	nsbetagx_6	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
941	hrate_6	Num	8		Heart Rate (beat/min):
942	sysbp_6	Num	8		Systolic BP (mmHg):
943	diabp_6	Num	8		Diastolic BP (mmHg):
944	temp_6	Num	8		Temperature (Celcius):
945	cvp_6	Num	8		CVP (mmHg):
946	vaso_6	Num	8		Vasopressors/inotropes this day?
947	vasoc_6	Char	3	$3.	Vasopressors/inotropes this day?
948	dobut_6	Num	8		IV Dobutamine Infusion Rate:
949	dobutu_6	Char	9	$9.	IV Dobutamine Infusion Rate Units
950	dopa_6	Num	8		IV Dopamine Infusion Rate:
951	dopau_6	Char	9	$9.	IV Dopamine Infusion Rate Units
952	norepi_6	Num	8		IV Norepinephrine Infusion Rate:
953	norepiu_6	Char	9	$9.	IV Norepinephrine Infusion Rate Units
954	epi_6	Num	8		IV Epinephrine Infusion Rate:
955	epiu_6	Char	9	$9.	ug/kg/min or ug/min
956	vasorate_6	Num	8		IV Vasopressin Infusion Rate (units/min):
957	neosyn_6	Num	8		IV Neosynephrine Infusion Rate:
958	neosynu_6	Char	9	$9.	IV Neosynephrine Infusion Rate Units
959	vasooth_6	Char	50	$50.	If Other Please Specify:
960	betablock_6	Num	8		Beta Blockers (IV, PO, PGT) this day?
961	betablockc_6	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
962	hratex_6	Char	64	$64.	Heart Rate (beat/min): (Not Done)
963	sysbpx_6	Char	64	$64.	Systolic BP (mmHg): (Not Done)
964	diabpx_6	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
965	tempx_6	Char	64	$64.	Temperature (Celcius): (Not Done)
966	vasox_6	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
967	betablockx_6	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
968	cxrquads_7	Num	8		CXR: Number of quadrants with infiltrates

Num	Variable	Type	Len	Format	Label
969	cort20_7	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
970	cort20c_7	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
971	ipatro_7	Num	8		Aerosolized or MDI delivered ipatropium?
972	ipatroc_7	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
973	ipadose_7	Num	8		Yes: Enter total number of doses this day:
974	nsbetag_7	Num	8		Non-study beta-agonist aerosol this day?
975	nsbetagc_7	Char	85	$85.	Non-study beta-agonist aerosol this day?
976	nsbetagdose_7	Num	8		Yes: Enter total dose in mg this day
977	cort20x_7	Char	64	$64.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?(Not Done)
978	nsbetagx_7	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
979	hrate_7	Num	8		Heart Rate (beat/min):
980	sysbp_7	Num	8		Systolic BP (mmHg):
981	diabp_7	Num	8		Diastolic BP (mmHg):
982	temp_7	Num	8		Temperature (Celcius):
983	cvp_7	Num	8		CVP (mmHg):
984	vaso_7	Num	8		Vasopressors/inotropes this day?
985	vasoc_7	Char	3	$3.	Vasopressors/inotropes this day?
986	dobut_7	Num	8		IV Dobutamine Infusion Rate:
987	dobutu_7	Char	9	$9.	IV Dobutamine Infusion Rate Units
988	dopa_7	Num	8		IV Dopamine Infusion Rate:
989	dopau_7	Char	9	$9.	IV Dopamine Infusion Rate Units
990	norepi_7	Num	8		IV Norepinephrine Infusion Rate:
991	norepiu_7	Char	9	$9.	IV Norepinephrine Infusion Rate Units
992	epi_7	Num	8		IV Epinephrine Infusion Rate:
993	epiu_7	Char	9	$9.	ug/kg/min or ug/min
994	vasorate_7	Num	8		IV Vasopressin Infusion Rate (units/min):
995	neosyn_7	Num	8		IV Neosynephrine Infusion Rate:
996	neosynu_7	Char	9	$9.	IV Neosynephrine Infusion Rate Units
997	vasooth_7	Char	50	$50.	If Other Please Specify:
998	betablock_7	Num	8		Beta Blockers (IV, PO, PGT) this day?
999	betablockc_7	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
1000	hratex_7	Char	64	$64.	Heart Rate (beat/min): (Not Done)
1001	sysbpx_7	Char	64	$64.	Systolic BP (mmHg): (Not Done)
1002	diabpx_7	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
1003	tempx_7	Char	64	$64.	Temperature (Celcius): (Not Done)
1004	vasox_7	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)

Num	Variable	Type	Len	Format	Label
1005	betablockx_7	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
1006	cxrquads_8	Num	8		CXR: Number of quadrants with infiltrates
1007	cort20_8	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
1008	cort20c_8	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
1009	ipatro_8	Num	8		Aerosolized or MDI delivered ipatropium?
1010	ipatroc_8	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
1011	ipadose_8	Num	8		Yes: Enter total number of doses this day:
1012	nsbetag_8	Num	8		Non-study beta-agonist aerosol this day?
1013	nsbetagc_8	Char	85	$85.	Non-study beta-agonist aerosol this day?
1014	nsbetagdose_8	Num	8		Yes: Enter total dose in mg this day
1015	cort20x_8	Char	64	$64.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?(Not Done)
1016	nsbetagx_8	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
1017	hrate_8	Num	8		Heart Rate (beat/min):
1018	sysbp_8	Num	8		Systolic BP (mmHg):
1019	diabp_8	Num	8		Diastolic BP (mmHg):
1020	temp_8	Num	8		Temperature (Celcius):
1021	cvp_8	Num	8		CVP (mmHg):
1022	vaso_8	Num	8		Vasopressors/inotropes this day?
1023	vasoc_8	Char	3	$3.	Vasopressors/inotropes this day?
1024	dobut_8	Num	8		IV Dobutamine Infusion Rate:
1025	dobutu_8	Char	9	$9.	IV Dobutamine Infusion Rate Units
1026	dopa_8	Num	8		IV Dopamine Infusion Rate:
1027	dopau_8	Char	9	$9.	IV Dopamine Infusion Rate Units
1028	norepi_8	Num	8		IV Norepinephrine Infusion Rate:
1029	norepiu_8	Char	9	$9.	IV Norepinephrine Infusion Rate Units
1030	epi_8	Num	8		IV Epinephrine Infusion Rate:
1031	epiu_8	Char	9	$9.	ug/kg/min or ug/min
1032	vasorate_8	Num	8		IV Vasopressin Infusion Rate (units/min):
1033	neosyn_8	Num	8		IV Neosynephrine Infusion Rate:
1034	neosynu_8	Char	9	$9.	IV Neosynephrine Infusion Rate Units
1035	vasooth_8	Char	50	$50.	If Other Please Specify:
1036	betablock_8	Num	8		Beta Blockers (IV, PO, PGT) this day?
1037	betablockc_8	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
1038	hratex_8	Char	64	$64.	Heart Rate (beat/min): (Not Done)
1039	sysbpx_8	Char	64	$64.	Systolic BP (mmHg): (Not Done)
1040	diabpx_8	Char	64	$64.	Diastolic BP (mmHg): (Not Done)

Num	Variable	Type	Len	Format	Label
1041	tempx_8	Char	64	$64.	Temperature (Celcius): (Not Done)
1042	vasox_8	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
1043	betablockx_8	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
1044	cxrquads_9	Num	8		CXR: Number of quadrants with infiltrates
1045	cort20_9	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
1046	cort20c_9	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
1047	ipatro_9	Num	8		Aerosolized or MDI delivered ipatropium?
1048	ipatroc_9	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
1049	ipadose_9	Num	8		Yes: Enter total number of doses this day:
1050	nsbetag_9	Num	8		Non-study beta-agonist aerosol this day?
1051	nsbetagc_9	Char	85	$85.	Non-study beta-agonist aerosol this day?
1052	nsbetagdose_9	Num	8		Yes: Enter total dose in mg this day
1053	cort20x_9	Char	64	$64.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?(Not Done)
1054	nsbetagx_9	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
1055	hrate_9	Num	8		Heart Rate (beat/min):
1056	sysbp_9	Num	8		Systolic BP (mmHg):
1057	diabp_9	Num	8		Diastolic BP (mmHg):
1058	temp_9	Num	8		Temperature (Celcius):
1059	cvp_9	Num	8		CVP (mmHg):
1060	vaso_9	Num	8		Vasopressors/inotropes this day?
1061	vasoc_9	Char	3	$3.	Vasopressors/inotropes this day?
1062	dobut_9	Num	8		IV Dobutamine Infusion Rate:
1063	dobutu_9	Char	9	$9.	IV Dobutamine Infusion Rate Units
1064	dopa_9	Num	8		IV Dopamine Infusion Rate:
1065	dopau_9	Char	9	$9.	IV Dopamine Infusion Rate Units
1066	norepi_9	Num	8		IV Norepinephrine Infusion Rate:
1067	norepiu_9	Char	9	$9.	IV Norepinephrine Infusion Rate Units
1068	epi_9	Num	8		IV Epinephrine Infusion Rate:
1069	epiu_9	Char	9	$9.	ug/kg/min or ug/min
1070	vasorate_9	Num	8		IV Vasopressin Infusion Rate (units/min):
1071	neosyn_9	Num	8		IV Neosynephrine Infusion Rate:
1072	neosynu_9	Char	9	$9.	IV Neosynephrine Infusion Rate Units
1073	vasooth_9	Char	50	$50.	If Other Please Specify:
1074	betablock_9	Num	8		Beta Blockers (IV, PO, PGT) this day?
1075	betablockc_9	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
1076	hratex_9	Char	64	$64.	Heart Rate (beat/min): (Not Done)

Num	Variable	Type	Len	Format	Label
1077	sysbpx_9	Char	64	$64.	Systolic BP (mmHg): (Not Done)
1078	diabpx_9	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
1079	tempx_9	Char	64	$64.	Temperature (Celcius): (Not Done)
1080	vasox_9	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
1081	betablockx_9	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
1082	cxrquads_10	Num	8		CXR: Number of quadrants with infiltrates
1083	cort20_10	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
1084	cort20c_10	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
1085	ipatro_10	Num	8		Aerosolized or MDI delivered ipatropium?
1086	ipatroc_10	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
1087	ipadose_10	Num	8		Yes: Enter total number of doses this day:
1088	nsbetag_10	Num	8		Non-study beta-agonist aerosol this day?
1089	nsbetagc_10	Char	85	$85.	Non-study beta-agonist aerosol this day?
1090	nsbetagdose_10	Num	8		Yes: Enter total dose in mg this day
1091	cort20x_10	Char	64	$64.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?(Not Done)
1092	nsbetagx_10	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
1093	hrate_10	Num	8		Heart Rate (beat/min):
1094	sysbp_10	Num	8		Systolic BP (mmHg):
1095	diabp_10	Num	8		Diastolic BP (mmHg):
1096	temp_10	Num	8		Temperature (Celcius):
1097	cvp_10	Num	8		CVP (mmHg):
1098	vaso_10	Num	8		Vasopressors/inotropes this day?
1099	vasoc_10	Char	3	$3.	Vasopressors/inotropes this day?
1100	dobut_10	Num	8		IV Dobutamine Infusion Rate:
1101	dobutu_10	Char	9	$9.	IV Dobutamine Infusion Rate Units
1102	dopa_10	Num	8		IV Dopamine Infusion Rate:
1103	dopau_10	Char	9	$9.	IV Dopamine Infusion Rate Units
1104	norepi_10	Num	8		IV Norepinephrine Infusion Rate:
1105	norepiu_10	Char	9	$9.	IV Norepinephrine Infusion Rate Units
1106	epi_10	Num	8		IV Epinephrine Infusion Rate:
1107	epiu_10	Char	9	$9.	ug/kg/min or ug/min
1108	vasorate_10	Num	8		IV Vasopressin Infusion Rate (units/min):
1109	neosyn_10	Num	8		IV Neosynephrine Infusion Rate:
1110	neosynu_10	Char	9	$9.	IV Neosynephrine Infusion Rate Units
1111	vasooth_10	Char	50	$50.	If Other Please Specify:
1112	betablock_10	Num	8		Beta Blockers (IV, PO, PGT) this day?

Num	Variable	Type	Len	Format	Label
1113	betablockc_10	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
1114	hratex_10	Char	64	$64.	Heart Rate (beat/min): (Not Done)
1115	sysbpx_10	Char	64	$64.	Systolic BP (mmHg): (Not Done)
1116	diabpx_10	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
1117	tempx_10	Char	64	$64.	Temperature (Celcius): (Not Done)
1118	vasox_10	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
1119	betablockx_10	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
1120	simv_0	Num	8		SIMV
1121	simvc_0	Char	4	$4.	SIMV
1122	prvc_0	Num	8		PRVC (pressure regulated volume control) or equivalent
1123	prvc2_0	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
1124	pressup_0	Num	8		Pressure Support (y/n)
1125	pressupc_0	Char	16	$16.	Pressure Support (y/n)
1126	pressupcmH2O	Num	8		Pressure Support cmH2O
1127	volassist_0	Num	8		Volume Assist/Control
1128	volassistc_0	Char	21	$21.	Volume Assist/Control
1129	presassist_0	Num	8		Pressure Assist (y/n)
1130	presassistc_0	Char	15	$15.	Pressure Assist (y/n)
1131	presascmH2O	Num	8		Pressure Assist cmH2O
1132	pcirv_0	Num	8		PC IRV
1133	pcirvc_0	Char	6	$6.	PC IRV
1134	aprv_0	Num	8		Airway Pressure Release Ventilation (APRV)
1135	aprvc_0	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
1136	ventoth_0	Num	8		Other vent mode
1137	ventothc_0	Char	5	$5.	Other vent mode
1138	hfov_0	Num	8		HFOV
1139	hfovc_0	Char	4	$4.	HFOV
1140	othvent_0	Char	255	$255.	Enter other vent mode:
1141	tidal_0	Num	8		Calculated Delivered Tidal Volume
1142	setrate_0	Num	8		Set Rate
1143	resp_0	Num	8		Total Respiratory Rate
1144	minvent_0	Num	8		Total Minute Ventilation (L/min)
1145	peep_0	Num	8		PEEP (cm H2O):
1146	fio2_0	Num	8		FiO2 prior to randomization
1147	SpO2_0	Num	8		SpO2 prior to randomization
1148	pplat_0	Num	8		Plateau Pressure (cm H2O):
1149	pip_0	Num	8		Peak Inspiratory Pressure
1150	meanair_0	Num	8		Mean airway pressure
1151	tidalpost	Num	8		Calculated delivered tidal volume after vent change

Num	Variable	Type	Len	Format	Label
1152	pplatpost	Num	8		Plateau Pressure after vent change
1153	peeppost	Num	8		PEEP after vent change
1154	spo2abg_0	Num	8		SpO2 at time of ABG
1155	ventX	Char	64	$64.	Vent Mode (Not Done)
1156	tidalx_0	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
1157	respX	Char	64	$64.	Total Respiratory Rate (Not Done)
1158	minventX	Char	64	$64.	Total Minute Ventilation (L/min) (Not Done)
1159	peepx_0	Char	64	$64.	PEEP (cm H2O): (Not Done)
1160	fio2x_0	Char	64	$64.	FiO2 prior to randomization (Not Done)
1161	SpO2x_0	Char	64	$64.	SpO2 prior to randomization (Not Done)
1162	meanairX	Char	64	$64.	Mean airway pressure (Not Done)
1163	pressupcmh2o_1	Num	8		Pressure Support cmH2O
1164	presascmh2o_1	Num	8		Pressure Assist cmH2O
1165	ventmodex_1	Char	64	$64.	Vent mode: (Not Done)
1166	respx_1	Char	64	$64.	Total Respiratory Rate (Not Done)
1167	minventx_1	Char	64	$64.	Total Minute Ventilation (Not Done)
1168	meanairx_1	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
1169	simv_1	Num	8		SIMV
1170	simvc_1	Char	4	$4.	SIMV
1171	prvc_1	Num	8		PRVC (pressure regulated volume control) or equivalent
1172	prvc2_1	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
1173	pressup_1	Num	8		Pressure Support (y/n)
1174	pressupc_1	Char	16	$16.	Pressure Support (y/n)
1175	volassist_1	Num	8		Volume Assist/Control
1176	volassistc_1	Char	21	$21.	Volume Assist/Control
1177	presassist_1	Num	8		Pressure Assist (y/n)
1178	presassistc_1	Char	15	$15.	Pressure Assist (y/n)
1179	pcirv_1	Num	8		PC IRV
1180	pcirvc_1	Char	6	$6.	PC IRV
1181	aprv_1	Num	8		Airway Pressure Release Ventilation (APRV)
1182	aprvc_1	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
1183	ventoth_1	Num	8		Other vent mode
1184	ventothc_1	Char	5	$5.	Other vent mode
1185	hfov_1	Num	8		HFOV
1186	hfovc_1	Char	4	$4.	HFOV
1187	othvent_1	Char	255	$255.	Enter other vent mode:
1188	tidal_1	Num	8		Calculated Delivered Tidal Volume
1189	setrate_1	Num	8		Set Rate
1190	resp_1	Num	8		Total Respiratory Rate

Num	Variable	Type	Len	Format	Label
1191	minvent_1	Num	8		Total Minute Ventilation
1192	peep_1	Num	8		PEEP (cm H2O):
1193	fio2_1	Num	8		FiO2 at 0800
1194	SpO2_1	Num	8		SpO2 at 0800
1195	pplat_1	Num	8		Plateau Pressure (cm H2O):
1196	pip_1	Num	8		Peak Inspiratory Pressure
1197	meanair_1	Num	8		Mean airway pressure (cm H2O)
1198	fio2abg_1	Num	8		FiO2 at time of ABG:
1199	pao2abg_1	Num	8		PaO2 (cm H20):
1200	paco2abg_1	Num	8		PaCO2 (cm H20):
1201	phabg_1	Num	8		Arterial pH:
1202	spo2abg_1	Num	8		SpO2 at time of ABG
1203	tidalx_1	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
1204	peepx_1	Char	64	$64.	PEEP (cm H2O): (Not Done)
1205	fio2x_1	Char	64	$64.	FiO2 at 0800 (Not Done)
1206	SpO2x_1	Char	64	$64.	SpO2 at 0800 (Not Done)
1207	pressupcmh2o_2	Num	8		Pressure Support cmH2O
1208	presascmh2o_2	Num	8		Pressure Assist cmH2O
1209	ventmodex_2	Char	64	$64.	Vent mode: (Not Done)
1210	respx_2	Char	64	$64.	Total Respiratory Rate (Not Done)
1211	minventx_2	Char	64	$64.	Total Minute Ventilation (Not Done)
1212	meanairx_2	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
1213	simv_2	Num	8		SIMV
1214	simvc_2	Char	4	$4.	SIMV
1215	prvc_2	Num	8		PRVC (pressure regulated volume control) or equivalent
1216	prvc2_2	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
1217	pressup_2	Num	8		Pressure Support (y/n)
1218	pressupc_2	Char	16	$16.	Pressure Support (y/n)
1219	volassist_2	Num	8		Volume Assist/Control
1220	volassistc_2	Char	21	$21.	Volume Assist/Control
1221	presassist_2	Num	8		Pressure Assist (y/n)
1222	presassistc_2	Char	15	$15.	Pressure Assist (y/n)
1223	pcirv_2	Num	8		PC IRV
1224	pcirvc_2	Char	6	$6.	PC IRV
1225	aprv_2	Num	8		Airway Pressure Release Ventilation (APRV)
1226	aprvc_2	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
1227	ventoth_2	Num	8		Other vent mode
1228	ventothc_2	Char	5	$5.	Other vent mode
1229	hfov_2	Num	8		HFOV

Num	Variable	Type	Len	Format	Label
1230	hfovc_2	Char	4	$4.	HFOV
1231	othvent_2	Char	255	$255.	Enter other vent mode:
1232	tidal_2	Num	8		Calculated Delivered Tidal Volume
1233	setrate_2	Num	8		Set Rate
1234	resp_2	Num	8		Total Respiratory Rate
1235	minvent_2	Num	8		Total Minute Ventilation
1236	peep_2	Num	8		PEEP (cm H2O):
1237	fio2_2	Num	8		FiO2 at 0800
1238	SpO2_2	Num	8		SpO2 at 0800
1239	pplat_2	Num	8		Plateau Pressure (cm H2O):
1240	pip_2	Num	8		Peak Inspiratory Pressure
1241	meanair_2	Num	8		Mean airway pressure (cm H2O)
1242	fio2abg_2	Num	8		FiO2 at time of ABG:
1243	pao2abg_2	Num	8		PaO2 (cm H20):
1244	paco2abg_2	Num	8		PaCO2 (cm H20):
1245	phabg_2	Num	8		Arterial pH:
1246	spo2abg_2	Num	8		SpO2 at time of ABG
1247	tidalx_2	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
1248	peepx_2	Char	64	$64.	PEEP (cm H2O): (Not Done)
1249	fio2x_2	Char	64	$64.	FiO2 at 0800 (Not Done)
1250	SpO2x_2	Char	64	$64.	SpO2 at 0800 (Not Done)
1251	pressupcmh2o_3	Num	8		Pressure Support cmH2O
1252	presascmh2o_3	Num	8		Pressure Assist cmH2O
1253	ventmodex_3	Char	64	$64.	Vent mode: (Not Done)
1254	respx_3	Char	64	$64.	Total Respiratory Rate (Not Done)
1255	minventx_3	Char	64	$64.	Total Minute Ventilation (Not Done)
1256	meanairx_3	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
1257	simv_3	Num	8		SIMV
1258	simvc_3	Char	4	$4.	SIMV
1259	prvc_3	Num	8		PRVC (pressure regulated volume control) or equivalent
1260	prvc2_3	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
1261	pressup_3	Num	8		Pressure Support (y/n)
1262	pressupc_3	Char	16	$16.	Pressure Support (y/n)
1263	volassist_3	Num	8		Volume Assist/Control
1264	volassistc_3	Char	21	$21.	Volume Assist/Control
1265	presassist_3	Num	8		Pressure Assist (y/n)
1266	presassistc_3	Char	15	$15.	Pressure Assist (y/n)
1267	pcirv_3	Num	8		PC IRV
1268	pcirvc_3	Char	6	$6.	PC IRV

Num	Variable	Type	Len	Format	Label
1269	aprv_3	Num	8		Airway Pressure Release Ventilation (APRV)
1270	aprvc_3	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
1271	ventoth_3	Num	8		Other vent mode
1272	ventothc_3	Char	5	$5.	Other vent mode
1273	hfov_3	Num	8		HFOV
1274	hfovc_3	Char	4	$4.	HFOV
1275	othvent_3	Char	255	$255.	Enter other vent mode:
1276	tidal_3	Num	8		Calculated Delivered Tidal Volume
1277	setrate_3	Num	8		Set Rate
1278	resp_3	Num	8		Total Respiratory Rate
1279	minvent_3	Num	8		Total Minute Ventilation
1280	peep_3	Num	8		PEEP (cm H2O):
1281	fio2_3	Num	8		FiO2 at 0800
1282	SpO2_3	Num	8		SpO2 at 0800
1283	pplat_3	Num	8		Plateau Pressure (cm H2O):
1284	pip_3	Num	8		Peak Inspiratory Pressure
1285	meanair_3	Num	8		Mean airway pressure (cm H2O)
1286	fio2abg_3	Num	8		FiO2 at time of ABG:
1287	pao2abg_3	Num	8		PaO2 (cm H20):
1288	paco2abg_3	Num	8		PaCO2 (cm H20):
1289	phabg_3	Num	8		Arterial pH:
1290	spo2abg_3	Num	8		SpO2 at time of ABG
1291	tidalx_3	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
1292	peepx_3	Char	64	$64.	PEEP (cm H2O): (Not Done)
1293	fio2x_3	Char	64	$64.	FiO2 at 0800 (Not Done)
1294	SpO2x_3	Char	64	$64.	SpO2 at 0800 (Not Done)
1295	pressupcmh2o_4	Num	8		Pressure Support cmH2O
1296	presascmh2o_4	Num	8		Pressure Assist cmH2O
1297	ventmodex_4	Char	64	$64.	Vent mode: (Not Done)
1298	respx_4	Char	64	$64.	Total Respiratory Rate (Not Done)
1299	minventx_4	Char	64	$64.	Total Minute Ventilation (Not Done)
1300	meanairx_4	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
1301	simv_4	Num	8		SIMV
1302	simvc_4	Char	4	$4.	SIMV
1303	prvc_4	Num	8		PRVC (pressure regulated volume control) or equivalent
1304	prvc2_4	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
1305	pressup_4	Num	8		Pressure Support (y/n)
1306	pressupc_4	Char	16	$16.	Pressure Support (y/n)
1307	volassist_4	Num	8		Volume Assist/Control

Num	Variable	Type	Len	Format	Label
1308	volassistc_4	Char	21	$21.	Volume Assist/Control
1309	presassist_4	Num	8		Pressure Assist (y/n)
1310	presassistc_4	Char	15	$15.	Pressure Assist (y/n)
1311	pcirv_4	Num	8		PC IRV
1312	pcirvc_4	Char	6	$6.	PC IRV
1313	aprv_4	Num	8		Airway Pressure Release Ventilation (APRV)
1314	aprvc_4	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
1315	ventoth_4	Num	8		Other vent mode
1316	ventothc_4	Char	5	$5.	Other vent mode
1317	hfov_4	Num	8		HFOV
1318	hfovc_4	Char	4	$4.	HFOV
1319	othvent_4	Char	255	$255.	Enter other vent mode:
1320	tidal_4	Num	8		Calculated Delivered Tidal Volume
1321	setrate_4	Num	8		Set Rate
1322	resp_4	Num	8		Total Respiratory Rate
1323	minvent_4	Num	8		Total Minute Ventilation
1324	peep_4	Num	8		PEEP (cm H2O):
1325	fio2_4	Num	8		FiO2 at 0800
1326	SpO2_4	Num	8		SpO2 at 0800
1327	pplat_4	Num	8		Plateau Pressure (cm H2O):
1328	pip_4	Num	8		Peak Inspiratory Pressure
1329	meanair_4	Num	8		Mean airway pressure (cm H2O)
1330	fio2abg_4	Num	8		FiO2 at time of ABG:
1331	pao2abg_4	Num	8		PaO2 (cm H20):
1332	paco2abg_4	Num	8		PaCO2 (cm H20):
1333	phabg_4	Num	8		Arterial pH:
1334	spo2abg_4	Num	8		SpO2 at time of ABG
1335	tidalx_4	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
1336	peepx_4	Char	64	$64.	PEEP (cm H2O): (Not Done)
1337	fio2x_4	Char	64	$64.	FiO2 at 0800 (Not Done)
1338	SpO2x_4	Char	64	$64.	SpO2 at 0800 (Not Done)
1339	pressupcmh2o_7	Num	8		Pressure Support cmH2O
1340	presascmh2o_7	Num	8		Pressure Assist cmH2O
1341	ventmodex_7	Char	64	$64.	Vent mode: (Not Done)
1342	respx_7	Char	64	$64.	Total Respiratory Rate (Not Done)
1343	minventx_7	Char	64	$64.	Total Minute Ventilation (Not Done)
1344	meanairx_7	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
1345	simv_7	Num	8		SIMV
1346	simvc_7	Char	4	$4.	SIMV

Num	Variable	Type	Len	Format	Label
1347	prvc_7	Num	8		PRVC (pressure regulated volume control) or equivalent
1348	prvc2_7	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
1349	pressup_7	Num	8		Pressure Support (y/n)
1350	pressupc_7	Char	16	$16.	Pressure Support (y/n)
1351	volassist_7	Num	8		Volume Assist/Control
1352	volassistc_7	Char	21	$21.	Volume Assist/Control
1353	presassist_7	Num	8		Pressure Assist (y/n)
1354	presassistc_7	Char	15	$15.	Pressure Assist (y/n)
1355	pcirv_7	Num	8		PC IRV
1356	pcirvc_7	Char	6	$6.	PC IRV
1357	aprv_7	Num	8		Airway Pressure Release Ventilation (APRV)
1358	aprvc_7	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
1359	ventoth_7	Num	8		Other vent mode
1360	ventothc_7	Char	5	$5.	Other vent mode
1361	hfov_7	Num	8		HFOV
1362	hfovc_7	Char	4	$4.	HFOV
1363	othvent_7	Char	255	$255.	Enter other vent mode:
1364	tidal_7	Num	8		Calculated Delivered Tidal Volume
1365	setrate_7	Num	8		Set Rate
1366	resp_7	Num	8		Total Respiratory Rate
1367	minvent_7	Num	8		Total Minute Ventilation
1368	peep_7	Num	8		PEEP (cm H2O):
1369	fio2_7	Num	8		FiO2 at 0800
1370	SpO2_7	Num	8		SpO2 at 0800
1371	pplat_7	Num	8		Plateau Pressure (cm H2O):
1372	pip_7	Num	8		Peak Inspiratory Pressure
1373	meanair_7	Num	8		Mean airway pressure (cm H2O)
1374	fio2abg_7	Num	8		FiO2 at time of ABG:
1375	pao2abg_7	Num	8		PaO2 (cm H20):
1376	paco2abg_7	Num	8		PaCO2 (cm H20):
1377	phabg_7	Num	8		Arterial pH:
1378	spo2abg_7	Num	8		SpO2 at time of ABG
1379	tidalx_7	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
1380	peepx_7	Char	64	$64.	PEEP (cm H2O): (Not Done)
1381	fio2x_7	Char	64	$64.	FiO2 at 0800 (Not Done)
1382	SpO2x_7	Char	64	$64.	SpO2 at 0800 (Not Done)
1383	pressupcmh2o_12	Num	8		Pressure Support cmH2O
1384	presascmh2o_12	Num	8		Pressure Assist cmH2O
1385	ventmodex_12	Char	64	$64.	Vent mode: (Not Done)

Num	Variable	Type	Len	Format	Label
1386	respx_12	Char	64	$64.	Total Respiratory Rate (Not Done)
1387	minventx_12	Char	64	$64.	Total Minute Ventilation (Not Done)
1388	meanairx_12	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
1389	simv_12	Num	8		SIMV
1390	simvc_12	Char	4	$4.	SIMV
1391	prvc_12	Num	8		PRVC (pressure regulated volume control) or equivalent
1392	prvc2_12	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
1393	pressup_12	Num	8		Pressure Support (y/n)
1394	pressupc_12	Char	16	$16.	Pressure Support (y/n)
1395	volassist_12	Num	8		Volume Assist/Control
1396	volassistc_12	Char	21	$21.	Volume Assist/Control
1397	presassist_12	Num	8		Pressure Assist (y/n)
1398	presassistc_12	Char	15	$15.	Pressure Assist (y/n)
1399	pcirv_12	Num	8		PC IRV
1400	pcirvc_12	Char	6	$6.	PC IRV
1401	aprv_12	Num	8		Airway Pressure Release Ventilation (APRV)
1402	aprvc_12	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
1403	ventoth_12	Num	8		Other vent mode
1404	ventothc_12	Char	5	$5.	Other vent mode
1405	hfov_12	Num	8		HFOV
1406	hfovc_12	Char	4	$4.	HFOV
1407	othvent_12	Char	255	$255.	Enter other vent mode:
1408	tidal_12	Num	8		Calculated Delivered Tidal Volume
1409	setrate_12	Num	8		Set Rate
1410	resp_12	Num	8		Total Respiratory Rate
1411	minvent_12	Num	8		Total Minute Ventilation
1412	peep_12	Num	8		PEEP (cm H2O):
1413	fio2_12	Num	8		FiO2 at 0800
1414	SpO2_12	Num	8		SpO2 at 0800
1415	pplat_12	Num	8		Plateau Pressure (cm H2O):
1416	pip_12	Num	8		Peak Inspiratory Pressure
1417	meanair_12	Num	8		Mean airway pressure (cm H2O)
1418	fio2abg_12	Num	8		FiO2 at time of ABG:
1419	pao2abg_12	Num	8		PaO2 (cm H20):
1420	paco2abg_12	Num	8		PaCO2 (cm H20):
1421	phabg_12	Num	8		Arterial pH:
1422	spo2abg_12	Num	8		SpO2 at time of ABG
1423	tidalx_12	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
1424	peepx_12	Char	64	$64.	PEEP (cm H2O): (Not Done)

Num	Variable	Type	Len	Format	Label
1425	fio2x_12	Char	64	$64.	FiO2 at 0800 (Not Done)
1426	SpO2x_12	Char	64	$64.	SpO2 at 0800 (Not Done)
1427	pressupcmh2o_21	Num	8		Pressure Support cmH2O
1428	presascmh2o_21	Num	8		Pressure Assist cmH2O
1429	ventmodex_21	Char	64	$64.	Vent mode: (Not Done)
1430	respx_21	Char	64	$64.	Total Respiratory Rate (Not Done)
1431	minventx_21	Char	64	$64.	Total Minute Ventilation (Not Done)
1432	meanairx_21	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
1433	simv_21	Num	8		SIMV
1434	simvc_21	Char	4	$4.	SIMV
1435	prvc_21	Num	8		PRVC (pressure regulated volume control) or equivalent
1436	prvc2_21	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
1437	pressup_21	Num	8		Pressure Support (y/n)
1438	pressupc_21	Char	16	$16.	Pressure Support (y/n)
1439	volassist_21	Num	8		Volume Assist/Control
1440	volassistc_21	Char	21	$21.	Volume Assist/Control
1441	presassist_21	Num	8		Pressure Assist (y/n)
1442	presassistc_21	Char	15	$15.	Pressure Assist (y/n)
1443	pcirv_21	Num	8		PC IRV
1444	pcirvc_21	Char	6	$6.	PC IRV
1445	aprv_21	Num	8		Airway Pressure Release Ventilation (APRV)
1446	aprvc_21	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
1447	ventoth_21	Num	8		Other vent mode
1448	ventothc_21	Char	5	$5.	Other vent mode
1449	hfov_21	Num	8		HFOV
1450	hfovc_21	Char	4	$4.	HFOV
1451	othvent_21	Char	255	$255.	Enter other vent mode:
1452	tidal_21	Num	8		Calculated Delivered Tidal Volume
1453	setrate_21	Num	8		Set Rate
1454	resp_21	Num	8		Total Respiratory Rate
1455	minvent_21	Num	8		Total Minute Ventilation
1456	peep_21	Num	8		PEEP (cm H2O):
1457	fio2_21	Num	8		FiO2 at 0800
1458	SpO2_21	Num	8		SpO2 at 0800
1459	pplat_21	Num	8		Plateau Pressure (cm H2O):
1460	pip_21	Num	8		Peak Inspiratory Pressure
1461	meanair_21	Num	8		Mean airway pressure (cm H2O)
1462	fio2abg_21	Num	8		FiO2 at time of ABG:
1463	pao2abg_21	Num	8		PaO2 (cm H20):

Num	Variable	Type	Len	Format	Label
1464	paco2abg_21	Num	8		PaCO2 (cm H20):
1465	phabg_21	Num	8		Arterial pH:
1466	spo2abg_21	Num	8		SpO2 at time of ABG
1467	tidalx_21	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
1468	peepx_21	Char	64	$64.	PEEP (cm H2O): (Not Done)
1469	fio2x_21	Char	64	$64.	FiO2 at 0800 (Not Done)
1470	SpO2x_21	Char	64	$64.	SpO2 at 0800 (Not Done)
1471	pressupcmh2o_28	Num	8		Pressure Support cmH2O
1472	presascmh2o_28	Num	8		Pressure Assist cmH2O
1473	ventmodex_28	Char	64	$64.	Vent mode: (Not Done)
1474	respx_28	Char	64	$64.	Total Respiratory Rate (Not Done)
1475	minventx_28	Char	64	$64.	Total Minute Ventilation (Not Done)
1476	meanairx_28	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
1477	simv_28	Num	8		SIMV
1478	simvc_28	Char	4	$4.	SIMV
1479	prvc_28	Num	8		PRVC (pressure regulated volume control) or equivalent
1480	prvc2_28	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
1481	pressup_28	Num	8		Pressure Support (y/n)
1482	pressupc_28	Char	16	$16.	Pressure Support (y/n)
1483	volassist_28	Num	8		Volume Assist/Control
1484	volassistc_28	Char	21	$21.	Volume Assist/Control
1485	presassist_28	Num	8		Pressure Assist (y/n)
1486	presassistc_28	Char	15	$15.	Pressure Assist (y/n)
1487	pcirv_28	Num	8		PC IRV
1488	pcirvc_28	Char	6	$6.	PC IRV
1489	aprv_28	Num	8		Airway Pressure Release Ventilation (APRV)
1490	aprvc_28	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
1491	ventoth_28	Num	8		Other vent mode
1492	ventothc_28	Char	5	$5.	Other vent mode
1493	hfov_28	Num	8		HFOV
1494	hfovc_28	Char	4	$4.	HFOV
1495	othvent_28	Char	255	$255.	Enter other vent mode:
1496	tidal_28	Num	8		Calculated Delivered Tidal Volume
1497	setrate_28	Num	8		Set Rate
1498	resp_28	Num	8		Total Respiratory Rate
1499	minvent_28	Num	8		Total Minute Ventilation
1500	peep_28	Num	8		PEEP (cm H2O):
1501	fio2_28	Num	8		FiO2 at 0800
1502	SpO2_28	Num	8		SpO2 at 0800

Num	Variable	Type	Len	Format	Label
1503	pplat_28	Num	8		Plateau Pressure (cm H2O):
1504	pip_28	Num	8		Peak Inspiratory Pressure
1505	meanair_28	Num	8		Mean airway pressure (cm H2O)
1506	fio2abg_28	Num	8		FiO2 at time of ABG:
1507	pao2abg_28	Num	8		PaO2 (cm H20):
1508	paco2abg_28	Num	8		PaCO2 (cm H20):
1509	phabg_28	Num	8		Arterial pH:
1510	spo2abg_28	Num	8		SpO2 at time of ABG
1511	tidalx_28	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
1512	peepx_28	Char	64	$64.	PEEP (cm H2O): (Not Done)
1513	fio2x_28	Char	64	$64.	FiO2 at 0800 (Not Done)
1514	SpO2x_28	Char	64	$64.	SpO2 at 0800 (Not Done)
1515	proprate	Num	8		Propofol infusion rate at time of randomization
1516	feedgrp	Num	8		Enteral Feeding Group
1517	feedgrpc	Char	12	$12.	Enteral Feeding Group
1518	prebasefeed	Num	8		In the 12 hours prior to enrollment, did patient receive any enteral feedings?
1519	prebasefeedc	Char	72	$72.	In the 12 hours prior to enrollment, did patient receive any enteral feedings?
1520	prebasevol	Num	8		Yes, enter total volume of enteral feeds in 12 hours prior to enrollment
1521	feedinitdt	Num	8	BEST12.	Date and time of initiation of protocol specified enteral feeds (Day)
1522	feedinittm	Num	8	TIME5.	Date and time of initiation of protocol specified enteral feeds (Time)
1523	recfeed_0	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
1524	recfeedc_0	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
1525	goalrate_0	Num	8		Tube feeding goal rate
1526	goalchange_0	Num	8		Did the goal rate change during the 24 hour period?
1527	goalchangec_0	Char	19	$19.	Did the goal rate change during the 24 hour period?
1528	newgoal_0	Num	8		New goal rate
1529	brand1_0	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
1530	brand1vol_0	Num	8		Total volume of enteral formula 1 infused for 24 hour period
1531	brand2_0	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
1532	brand2vol_0	Num	8		Total volume of enteral formula 2 infused for 24 hour period
1533	feedhrs_0	Num	8		Number of hours enteral tube feeds on for this 24 hour period
1534	feedoff_0	Num	8		Feeds turned off for > 30 minutes within 24 hour period
1535	feedoffc_0	Char	61	$61.	Feeds turned off for > 30 minutes within 24 hour period
1536	planext_0	Num	8		Planned Extubation

Num	Variable	Type	Len	Format	Label
1537	planextc_0	Char	18	$18.	Planned Extubation
1538	giint_0	Num	8		GI Intolerance
1539	giintc_0	Char	14	$14.	GI Intolerance
1540	invbside_0	Num	8		Invasive bedside procedure
1541	invbsidec_0	Char	26	$26.	Invasive bedside procedure
1542	surgery	Num	8		Surgery
1543	surgeryc	Char	7	$7.	Surgery
1544	leftfloor_0	Num	8		Patient left the floor
1545	leftfloorc_0	Char	22	$22.	Patient left the floor
1546	care_0	Num	8		Nursing Care(ie bathing, HOB down)
1547	carec_0	Char	34	$34.	Nursing Care(ie bathing, HOB down)
1548	medadm_0	Num	8		Medical Administration
1549	medadmc_0	Char	22	$22.	Medical Administration
1550	feedoffoth_0	Num	8		Other reason feed turned off:
1551	feedoffothc_0	Char	5	$5.	Other reason feed turned off:
1552	feedoffreas_0	Char	255	$255.	Other reason feed turned off: Reason
1553	giintoleden_0	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
1554	giintoledenc_0	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
1555	diarrhea_0	Num	8		Diarrhea
1556	diarrheac_0	Char	8	$8.	Diarrhea
1557	vomiting_0	Num	8		Vomiting
1558	vomitingc_0	Char	8	$8.	Vomiting
1559	aspiration_0	Num	8		Aspiration
1560	aspirationc_0	Char	10	$10.	Aspiration
1561	elevresid	Num	8		Elevated Residuals
1562	elevresidc	Char	18	$18.	Elevated Residuals
1563	regurg_0	Num	8		Regurgitation
1564	regurgc_0	Char	13	$13.	Regurgitation
1565	constipation	Num	8		Constipation
1566	constipationc	Char	12	$12.	Constipation
1567	cramping	Num	8		Abdominal distention or cramping
1568	crampingc	Char	32	$32.	Abdominal distention or cramping
1569	feedsite_0	Num	8		Insertion site of feeding tube:
1570	feedsitec_0	Char	12	$12.	Insertion site of feeding tube:
1571	tubesize_0	Num	8		Feeding tube size
1572	tubesizec_0	Char	10	$10.	Feeding tube size
1573	distalpos_0	Num	8		Distal position of feeding tube

Num	Variable	Type	Len	Format	Label
1574	distalposc_0	Char	12	$12.	Distal position of feeding tube
1575	distalconf_0	Num	8		Was distal position confirmed during this 24 hour period?
1576	distalconfc_0	Char	19	$19.	Was distal position confirmed during this 24 hour period?
1577	distalhow_0	Num	8		How distal position confirmed
1578	distalhowc_0	Char	15	$15.	How distal position confirmed
1579	distaloth_0	Char	40	$40.	How distal position confirmed: other
1580	fullcal_0	Num	8		Was rate advanced to full-calorie rate during this calendar day?
1581	fullcalc_0	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
1582	fullcaltm_0	Num	8	TIMEAMPM.	time full calorie reached
1583	pronevent_0	Num	8		Prone ventilation between randomization and midnight?
1584	proneventc_0	Char	3	$3.	Prone ventilation between randomization and midnight?
1585	propratex	Char	64	$64.	Propofol infusion rate at time of randomization (Not Done)
1586	feedgrpx	Char	64	$64.	Enteral Feeding Group (Not Done)
1587	prebasefeedx	Char	64	$64.	In the 12 hours prior to enrollment, did patient receive any enteral feedings? (Not Done)
1588	feedinitdtmx	Char	64	$64.	Date and time of initiation of protocol specified enteral feeds (Not Done)
1589	recfeedx_0	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
1590	goalratex_0	Char	64	$64.	Tube feeding goal rate (Not Done)
1591	goalchangex_0	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
1592	brand1x_0	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period (Not Done)
1593	feedhrsx_0	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
1594	feedoffX	Char	64	$64.	Feeds turned off for > 30 minutes within 24 hour period (Not Done)
1595	giintoledenx_0	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
1596	feedsiteX	Char	64	$64.	Insertion site of feeding tube: (Not Done)
1597	tubesizeX	Char	64	$64.	Feeding tube size (Not Done)
1598	distalposX	Char	64	$64.	Distal position of feeding tube (Not Done)
1599	distalconfx_0	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
1600	fullcalx_0	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
1601	surg_1	Num	8		Surgery
1602	surgc_1	Char	7	$7.	Surgery
1603	residual_1	Num	8		Elevated Residuals
1604	residualc_1	Char	18	$18.	Elevated Residuals
1605	const_1	Num	8		Constipation
1606	constc_1	Char	12	$12.	Constipation

Num	Variable	Type	Len	Format	Label
1607	cramp_1	Num	8		Abdominal distention or cramping
1608	crampc_1	Char	32	$32.	Abdominal distention or cramping
1609	feedoffx_1	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
1610	feedsitex_1	Char	64	$64.	Insertion site of feeding tube (Not Done)
1611	tubesizex_1	Char	64	$64.	Feeding tube size (Not Done)
1612	distalposx_1	Char	64	$64.	Distal position of feeding tube (Not Done)
1613	proneventx_1	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
1614	recfeed_1	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
1615	recfeedc_1	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
1616	goalrate_1	Num	8		Tube feeding goal rate
1617	goalchange_1	Num	8		Did the goal rate change during the 24 hour period?
1618	goalchangec_1	Char	19	$19.	Did the goal rate change during the 24 hour period?
1619	newgoal_1	Num	8		Yes, new goal rate
1620	brand1_1	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
1621	brand1vol_1	Num	8		Total volume of enteral formula 1 infused for 24 hour period
1622	brand2_1	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
1623	brand2vol_1	Num	8		Total volume of enteral formula 2 infused for 24 hour period
1624	feedhrs_1	Num	8		Number of hours enteral tube feeds on for this 24 hour period
1625	feedoff_1	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
1626	feedoffc_1	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
1627	planext_1	Num	8		Planned Extubation
1628	planextc_1	Char	18	$18.	Planned Extubation
1629	giint_1	Num	8		GI Intolerance
1630	giintc_1	Char	14	$14.	GI Intolerance
1631	invbside_1	Num	8		Invasive bedside procedure
1632	invbsidec_1	Char	26	$26.	Invasive bedside procedure
1633	leftfloor_1	Num	8		Patient left the floor
1634	leftfloorc_1	Char	22	$22.	Patient left the floor
1635	care_1	Num	8		Nursing Care (i.e. bathing, HOB down)
1636	carec_1	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
1637	medadm_1	Num	8		Medical Administration
1638	medadmc_1	Char	22	$22.	Medical Administration
1639	feedoffoth_1	Num	8		Other reason feed turned off:
1640	feedoffothc_1	Char	5	$5.	Other reason feed turned off:
1641	feedoffreas_1	Char	255	$255.	Other reason feed turned off: Reason

Num	Variable	Type	Len	Format	Label
1642	giintoleden_1	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
1643	giintoledenc_1	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
1644	diarrhea_1	Num	8		Diarrhea
1645	diarrheac_1	Char	8	$8.	Diarrhea
1646	vomiting_1	Num	8		Vomiting
1647	vomitingc_1	Char	8	$8.	Vomiting
1648	aspiration_1	Num	8		Aspiration
1649	aspirationc_1	Char	10	$10.	Aspiration
1650	regurg_1	Num	8		Regurgitation
1651	regurgc_1	Char	13	$13.	Regurgitation
1652	feedsite_1	Num	8		Insertion site of feeding tube
1653	feedsitec_1	Char	12	$12.	Insertion site of feeding tube
1654	tubesize_1	Num	8		Feeding tube size
1655	tubesizec_1	Char	10	$10.	Feeding tube size
1656	distalpos_1	Num	8		Distal position of feeding tube
1657	distalposc_1	Char	12	$12.	Distal position of feeding tube
1658	distalconf_1	Num	8		Was distal position confirmed during this 24 hour period?
1659	distalconfc_1	Char	19	$19.	Was distal position confirmed during this 24 hour period?
1660	distalhow_1	Num	8		Yes, how confirmed:
1661	distalhowc_1	Char	15	$15.	Yes, how confirmed:
1662	distaloth_1	Char	40	$40.	Yes, how confirmed: Other
1663	fullcal_1	Num	8		Was rate advanced to full-calorie rate during this calendar day?
1664	fullcalc_1	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
1665	fullcaltm_1	Num	8	TIMEAMPM.	Yes, time full calorie reached:
1666	pronevent_1	Num	8		Prone ventilation this 24 hour period?
1667	proneventc_1	Char	3	$3.	Prone ventilation this 24 hour period?
1668	recfeedx_1	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
1669	goalratex_1	Char	64	$64.	Tube feeding goal rate (Not Done)
1670	goalchangex_1	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
1671	brand1x_1	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
1672	feedhrsx_1	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
1673	giintoledenx_1	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
1674	distalconfx_1	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
1675	fullcalx_1	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)

Num	Variable	Type	Len	Format	Label
1676	surg_2	Num	8		Surgery
1677	surgc_2	Char	7	$7.	Surgery
1678	residual_2	Num	8		Elevated Residuals
1679	residualc_2	Char	18	$18.	Elevated Residuals
1680	const_2	Num	8		Constipation
1681	constc_2	Char	12	$12.	Constipation
1682	cramp_2	Num	8		Abdominal distention or cramping
1683	crampc_2	Char	32	$32.	Abdominal distention or cramping
1684	feedoffx_2	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
1685	feedsitex_2	Char	64	$64.	Insertion site of feeding tube (Not Done)
1686	tubesizex_2	Char	64	$64.	Feeding tube size (Not Done)
1687	distalposx_2	Char	64	$64.	Distal position of feeding tube (Not Done)
1688	proneventx_2	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
1689	recfeed_2	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
1690	recfeedc_2	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
1691	goalrate_2	Num	8		Tube feeding goal rate
1692	goalchange_2	Num	8		Did the goal rate change during the 24 hour period?
1693	goalchangec_2	Char	19	$19.	Did the goal rate change during the 24 hour period?
1694	newgoal_2	Num	8		Yes, new goal rate
1695	brand1_2	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
1696	brand1vol_2	Num	8		Total volume of enteral formula 1 infused for 24 hour period
1697	brand2_2	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
1698	brand2vol_2	Num	8		Total volume of enteral formula 2 infused for 24 hour period
1699	feedhrs_2	Num	8		Number of hours enteral tube feeds on for this 24 hour period
1700	feedoff_2	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
1701	feedoffc_2	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
1702	planext_2	Num	8		Planned Extubation
1703	planextc_2	Char	18	$18.	Planned Extubation
1704	giint_2	Num	8		GI Intolerance
1705	giintc_2	Char	14	$14.	GI Intolerance
1706	invbside_2	Num	8		Invasive bedside procedure
1707	invbsidec_2	Char	26	$26.	Invasive bedside procedure
1708	leftfloor_2	Num	8		Patient left the floor
1709	leftfloorc_2	Char	22	$22.	Patient left the floor
1710	care_2	Num	8		Nursing Care (i.e. bathing, HOB down)

Num	Variable	Type	Len	Format	Label
1711	carec_2	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
1712	medadm_2	Num	8		Medical Administration
1713	medadmc_2	Char	22	$22.	Medical Administration
1714	feedoffoth_2	Num	8		Other reason feed turned off:
1715	feedoffothc_2	Char	5	$5.	Other reason feed turned off:
1716	feedoffreas_2	Char	255	$255.	Other reason feed turned off: Reason
1717	giintoleden_2	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
1718	giintoledenc_2	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
1719	diarrhea_2	Num	8		Diarrhea
1720	diarrheac_2	Char	8	$8.	Diarrhea
1721	vomiting_2	Num	8		Vomiting
1722	vomitingc_2	Char	8	$8.	Vomiting
1723	aspiration_2	Num	8		Aspiration
1724	aspirationc_2	Char	10	$10.	Aspiration
1725	regurg_2	Num	8		Regurgitation
1726	regurgc_2	Char	13	$13.	Regurgitation
1727	feedsite_2	Num	8		Insertion site of feeding tube
1728	feedsitec_2	Char	12	$12.	Insertion site of feeding tube
1729	tubesize_2	Num	8		Feeding tube size
1730	tubesizec_2	Char	10	$10.	Feeding tube size
1731	distalpos_2	Num	8		Distal position of feeding tube
1732	distalposc_2	Char	12	$12.	Distal position of feeding tube
1733	distalconf_2	Num	8		Was distal position confirmed during this 24 hour period?
1734	distalconfc_2	Char	19	$19.	Was distal position confirmed during this 24 hour period?
1735	distalhow_2	Num	8		Yes, how confirmed:
1736	distalhowc_2	Char	15	$15.	Yes, how confirmed:
1737	distaloth_2	Char	40	$40.	Yes, how confirmed: Other
1738	fullcal_2	Num	8		Was rate advanced to full-calorie rate during this calendar day?
1739	fullcalc_2	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
1740	fullcaltm_2	Num	8	TIMEAMPM.	Yes, time full calorie reached:
1741	pronevent_2	Num	8		Prone ventilation this 24 hour period?
1742	proneventc_2	Char	3	$3.	Prone ventilation this 24 hour period?
1743	recfeedx_2	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
1744	goalratex_2	Char	64	$64.	Tube feeding goal rate (Not Done)
1745	goalchangex_2	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
1746	brand1x_2	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period

Num	Variable	Type	Len	Format	Label
1747	feedhrsx_2	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
1748	giintoledenx_2	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
1749	distalconfx_2	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
1750	fullcalx_2	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
1751	surg_3	Num	8		Surgery
1752	surgc_3	Char	7	$7.	Surgery
1753	residual_3	Num	8		Elevated Residuals
1754	residualc_3	Char	18	$18.	Elevated Residuals
1755	const_3	Num	8		Constipation
1756	constc_3	Char	12	$12.	Constipation
1757	cramp_3	Num	8		Abdominal distention or cramping
1758	crampc_3	Char	32	$32.	Abdominal distention or cramping
1759	feedoffx_3	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
1760	feedsitex_3	Char	64	$64.	Insertion site of feeding tube (Not Done)
1761	tubesizex_3	Char	64	$64.	Feeding tube size (Not Done)
1762	distalposx_3	Char	64	$64.	Distal position of feeding tube (Not Done)
1763	proneventx_3	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
1764	recfeed_3	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
1765	recfeedc_3	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
1766	goalrate_3	Num	8		Tube feeding goal rate
1767	goalchange_3	Num	8		Did the goal rate change during the 24 hour period?
1768	goalchangec_3	Char	19	$19.	Did the goal rate change during the 24 hour period?
1769	newgoal_3	Num	8		Yes, new goal rate
1770	brand1_3	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
1771	brand1vol_3	Num	8		Total volume of enteral formula 1 infused for 24 hour period
1772	brand2_3	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
1773	brand2vol_3	Num	8		Total volume of enteral formula 2 infused for 24 hour period
1774	feedhrs_3	Num	8		Number of hours enteral tube feeds on for this 24 hour period
1775	feedoff_3	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
1776	feedoffc_3	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
1777	planext_3	Num	8		Planned Extubation
1778	planextc_3	Char	18	$18.	Planned Extubation
1779	giint_3	Num	8		GI Intolerance

Num	Variable	Type	Len	Format	Label
1780	giintc_3	Char	14	$14.	GI Intolerance
1781	invbside_3	Num	8		Invasive bedside procedure
1782	invbsidec_3	Char	26	$26.	Invasive bedside procedure
1783	leftfloor_3	Num	8		Patient left the floor
1784	leftfloorc_3	Char	22	$22.	Patient left the floor
1785	care_3	Num	8		Nursing Care (i.e. bathing, HOB down)
1786	carec_3	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
1787	medadm_3	Num	8		Medical Administration
1788	medadmc_3	Char	22	$22.	Medical Administration
1789	feedoffoth_3	Num	8		Other reason feed turned off:
1790	feedoffothc_3	Char	5	$5.	Other reason feed turned off:
1791	feedoffreas_3	Char	255	$255.	Other reason feed turned off: Reason
1792	giintoleden_3	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
1793	giintoledenc_3	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
1794	diarrhea_3	Num	8		Diarrhea
1795	diarrheac_3	Char	8	$8.	Diarrhea
1796	vomiting_3	Num	8		Vomiting
1797	vomitingc_3	Char	8	$8.	Vomiting
1798	aspiration_3	Num	8		Aspiration
1799	aspirationc_3	Char	10	$10.	Aspiration
1800	regurg_3	Num	8		Regurgitation
1801	regurgc_3	Char	13	$13.	Regurgitation
1802	feedsite_3	Num	8		Insertion site of feeding tube
1803	feedsitec_3	Char	12	$12.	Insertion site of feeding tube
1804	tubesize_3	Num	8		Feeding tube size
1805	tubesizec_3	Char	10	$10.	Feeding tube size
1806	distalpos_3	Num	8		Distal position of feeding tube
1807	distalposc_3	Char	12	$12.	Distal position of feeding tube
1808	distalconf_3	Num	8		Was distal position confirmed during this 24 hour period?
1809	distalconfc_3	Char	19	$19.	Was distal position confirmed during this 24 hour period?
1810	distalhow_3	Num	8		Yes, how confirmed:
1811	distalhowc_3	Char	15	$15.	Yes, how confirmed:
1812	distaloth_3	Char	40	$40.	Yes, how confirmed: Other
1813	fullcal_3	Num	8		Was rate advanced to full-calorie rate during this calendar day?
1814	fullcalc_3	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
1815	fullcaltm_3	Num	8	TIMEAMPM.	Yes, time full calorie reached:
1816	pronevent_3	Num	8		Prone ventilation this 24 hour period?

Num	Variable	Type	Len	Format	Label
1817	proneventc_3	Char	3	$3.	Prone ventilation this 24 hour period?
1818	recfeedx_3	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
1819	goalratex_3	Char	64	$64.	Tube feeding goal rate (Not Done)
1820	goalchangex_3	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
1821	brand1x_3	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
1822	feedhrsx_3	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
1823	giintoledenx_3	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
1824	distalconfx_3	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
1825	fullcalx_3	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
1826	surg_4	Num	8		Surgery
1827	surgc_4	Char	7	$7.	Surgery
1828	residual_4	Num	8		Elevated Residuals
1829	residualc_4	Char	18	$18.	Elevated Residuals
1830	const_4	Num	8		Constipation
1831	constc_4	Char	12	$12.	Constipation
1832	cramp_4	Num	8		Abdominal distention or cramping
1833	crampc_4	Char	32	$32.	Abdominal distention or cramping
1834	feedoffx_4	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
1835	feedsitex_4	Char	64	$64.	Insertion site of feeding tube (Not Done)
1836	tubesizex_4	Char	64	$64.	Feeding tube size (Not Done)
1837	distalposx_4	Char	64	$64.	Distal position of feeding tube (Not Done)
1838	proneventx_4	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
1839	recfeed_4	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
1840	recfeedc_4	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
1841	goalrate_4	Num	8		Tube feeding goal rate
1842	goalchange_4	Num	8		Did the goal rate change during the 24 hour period?
1843	goalchangec_4	Char	19	$19.	Did the goal rate change during the 24 hour period?
1844	newgoal_4	Num	8		Yes, new goal rate
1845	brand1_4	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
1846	brand1vol_4	Num	8		Total volume of enteral formula 1 infused for 24 hour period
1847	brand2_4	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
1848	brand2vol_4	Num	8		Total volume of enteral formula 2 infused for 24 hour period
1849	feedhrs_4	Num	8		Number of hours enteral tube feeds on for this 24 hour period

Num	Variable	Type	Len	Format	Label
1850	feedoff_4	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
1851	feedoffc_4	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
1852	planext_4	Num	8		Planned Extubation
1853	planextc_4	Char	18	$18.	Planned Extubation
1854	giint_4	Num	8		GI Intolerance
1855	giintc_4	Char	14	$14.	GI Intolerance
1856	invbside_4	Num	8		Invasive bedside procedure
1857	invbsidec_4	Char	26	$26.	Invasive bedside procedure
1858	leftfloor_4	Num	8		Patient left the floor
1859	leftfloorc_4	Char	22	$22.	Patient left the floor
1860	care_4	Num	8		Nursing Care (i.e. bathing, HOB down)
1861	carec_4	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
1862	medadm_4	Num	8		Medical Administration
1863	medadmc_4	Char	22	$22.	Medical Administration
1864	feedoffoth_4	Num	8		Other reason feed turned off:
1865	feedoffothc_4	Char	5	$5.	Other reason feed turned off:
1866	feedoffreas_4	Char	255	$255.	Other reason feed turned off: Reason
1867	giintoleden_4	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
1868	giintoledenc_4	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
1869	diarrhea_4	Num	8		Diarrhea
1870	diarrheac_4	Char	8	$8.	Diarrhea
1871	vomiting_4	Num	8		Vomiting
1872	vomitingc_4	Char	8	$8.	Vomiting
1873	aspiration_4	Num	8		Aspiration
1874	aspirationc_4	Char	10	$10.	Aspiration
1875	regurg_4	Num	8		Regurgitation
1876	regurgc_4	Char	13	$13.	Regurgitation
1877	feedsite_4	Num	8		Insertion site of feeding tube
1878	feedsitec_4	Char	12	$12.	Insertion site of feeding tube
1879	tubesize_4	Num	8		Feeding tube size
1880	tubesizec_4	Char	10	$10.	Feeding tube size
1881	distalpos_4	Num	8		Distal position of feeding tube
1882	distalposc_4	Char	12	$12.	Distal position of feeding tube
1883	distalconf_4	Num	8		Was distal position confirmed during this 24 hour period?
1884	distalconfc_4	Char	19	$19.	Was distal position confirmed during this 24 hour period?
1885	distalhow_4	Num	8		Yes, how confirmed:

Num	Variable	Type	Len	Format	Label
1886	distalhowc_4	Char	15	$15.	Yes, how confirmed:
1887	distaloth_4	Char	40	$40.	Yes, how confirmed: Other
1888	fullcal_4	Num	8		Was rate advanced to full-calorie rate during this calendar day?
1889	fullcalc_4	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
1890	fullcaltm_4	Num	8	TIMEAMPM.	Yes, time full calorie reached:
1891	pronevent_4	Num	8		Prone ventilation this 24 hour period?
1892	proneventc_4	Char	3	$3.	Prone ventilation this 24 hour period?
1893	recfeedx_4	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
1894	goalratex_4	Char	64	$64.	Tube feeding goal rate (Not Done)
1895	goalchangex_4	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
1896	brand1x_4	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
1897	feedhrsx_4	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
1898	giintoledenx_4	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
1899	distalconfx_4	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
1900	fullcalx_4	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
1901	surg_5	Num	8		Surgery
1902	surgc_5	Char	7	$7.	Surgery
1903	residual_5	Num	8		Elevated Residuals
1904	residualc_5	Char	18	$18.	Elevated Residuals
1905	const_5	Num	8		Constipation
1906	constc_5	Char	12	$12.	Constipation
1907	cramp_5	Num	8		Abdominal distention or cramping
1908	crampc_5	Char	32	$32.	Abdominal distention or cramping
1909	feedoffx_5	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
1910	feedsitex_5	Char	64	$64.	Insertion site of feeding tube (Not Done)
1911	tubesizex_5	Char	64	$64.	Feeding tube size (Not Done)
1912	distalposx_5	Char	64	$64.	Distal position of feeding tube (Not Done)
1913	proneventx_5	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
1914	recfeed_5	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
1915	recfeedc_5	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
1916	goalrate_5	Num	8		Tube feeding goal rate
1917	goalchange_5	Num	8		Did the goal rate change during the 24 hour period?
1918	goalchangec_5	Char	19	$19.	Did the goal rate change during the 24 hour period?

Num	Variable	Type	Len	Format	Label
1919	newgoal_5	Num	8		Yes, new goal rate
1920	brand1_5	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
1921	brand1vol_5	Num	8		Total volume of enteral formula 1 infused for 24 hour period
1922	brand2_5	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
1923	brand2vol_5	Num	8		Total volume of enteral formula 2 infused for 24 hour period
1924	feedhrs_5	Num	8		Number of hours enteral tube feeds on for this 24 hour period
1925	feedoff_5	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
1926	feedoffc_5	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
1927	planext_5	Num	8		Planned Extubation
1928	planextc_5	Char	18	$18.	Planned Extubation
1929	giint_5	Num	8		GI Intolerance
1930	giintc_5	Char	14	$14.	GI Intolerance
1931	invbside_5	Num	8		Invasive bedside procedure
1932	invbsidec_5	Char	26	$26.	Invasive bedside procedure
1933	leftfloor_5	Num	8		Patient left the floor
1934	leftfloorc_5	Char	22	$22.	Patient left the floor
1935	care_5	Num	8		Nursing Care (i.e. bathing, HOB down)
1936	carec_5	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
1937	medadm_5	Num	8		Medical Administration
1938	medadmc_5	Char	22	$22.	Medical Administration
1939	feedoffoth_5	Num	8		Other reason feed turned off:
1940	feedoffothc_5	Char	5	$5.	Other reason feed turned off:
1941	feedoffreas_5	Char	255	$255.	Other reason feed turned off: Reason
1942	giintoleden_5	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
1943	giintoledenc_5	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
1944	diarrhea_5	Num	8		Diarrhea
1945	diarrheac_5	Char	8	$8.	Diarrhea
1946	vomiting_5	Num	8		Vomiting
1947	vomitingc_5	Char	8	$8.	Vomiting
1948	aspiration_5	Num	8		Aspiration
1949	aspirationc_5	Char	10	$10.	Aspiration
1950	regurg_5	Num	8		Regurgitation
1951	regurgc_5	Char	13	$13.	Regurgitation
1952	feedsite_5	Num	8		Insertion site of feeding tube
1953	feedsitec_5	Char	12	$12.	Insertion site of feeding tube
1954	tubesize_5	Num	8		Feeding tube size

Num	Variable	Type	Len	Format	Label
1955	tubesizec_5	Char	10	$10.	Feeding tube size
1956	distalpos_5	Num	8		Distal position of feeding tube
1957	distalposc_5	Char	12	$12.	Distal position of feeding tube
1958	distalconf_5	Num	8		Was distal position confirmed during this 24 hour period?
1959	distalconfc_5	Char	19	$19.	Was distal position confirmed during this 24 hour period?
1960	distalhow_5	Num	8		Yes, how confirmed:
1961	distalhowc_5	Char	15	$15.	Yes, how confirmed:
1962	distaloth_5	Char	40	$40.	Yes, how confirmed: Other
1963	fullcal_5	Num	8		Was rate advanced to full-calorie rate during this calendar day?
1964	fullcalc_5	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
1965	fullcaltm_5	Num	8	TIMEAMPM.	Yes, time full calorie reached:
1966	pronevent_5	Num	8		Prone ventilation this 24 hour period?
1967	proneventc_5	Char	3	$3.	Prone ventilation this 24 hour period?
1968	recfeedx_5	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
1969	goalratex_5	Char	64	$64.	Tube feeding goal rate (Not Done)
1970	goalchangex_5	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
1971	brand1x_5	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
1972	feedhrsx_5	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
1973	giintoledenx_5	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
1974	distalconfx_5	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
1975	fullcalx_5	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
1976	surg_6	Num	8		Surgery
1977	surgc_6	Char	7	$7.	Surgery
1978	residual_6	Num	8		Elevated Residuals
1979	residualc_6	Char	18	$18.	Elevated Residuals
1980	const_6	Num	8		Constipation
1981	constc_6	Char	12	$12.	Constipation
1982	cramp_6	Num	8		Abdominal distention or cramping
1983	crampc_6	Char	32	$32.	Abdominal distention or cramping
1984	feedoffx_6	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
1985	feedsitex_6	Char	64	$64.	Insertion site of feeding tube (Not Done)
1986	tubesizex_6	Char	64	$64.	Feeding tube size (Not Done)
1987	distalposx_6	Char	64	$64.	Distal position of feeding tube (Not Done)
1988	proneventx_6	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)

Num	Variable	Type	Len	Format	Label
1989	recfeed_6	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
1990	recfeedc_6	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
1991	goalrate_6	Num	8		Tube feeding goal rate
1992	goalchange_6	Num	8		Did the goal rate change during the 24 hour period?
1993	goalchangec_6	Char	19	$19.	Did the goal rate change during the 24 hour period?
1994	newgoal_6	Num	8		Yes, new goal rate
1995	brand1_6	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
1996	brand1vol_6	Num	8		Total volume of enteral formula 1 infused for 24 hour period
1997	brand2_6	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
1998	brand2vol_6	Num	8		Total volume of enteral formula 2 infused for 24 hour period
1999	feedhrs_6	Num	8		Number of hours enteral tube feeds on for this 24 hour period
2000	feedoff_6	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
2001	feedoffc_6	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
2002	planext_6	Num	8		Planned Extubation
2003	planextc_6	Char	18	$18.	Planned Extubation
2004	giint_6	Num	8		GI Intolerance
2005	giintc_6	Char	14	$14.	GI Intolerance
2006	invbside_6	Num	8		Invasive bedside procedure
2007	invbsidec_6	Char	26	$26.	Invasive bedside procedure
2008	leftfloor_6	Num	8		Patient left the floor
2009	leftfloorc_6	Char	22	$22.	Patient left the floor
2010	care_6	Num	8		Nursing Care (i.e. bathing, HOB down)
2011	carec_6	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
2012	medadm_6	Num	8		Medical Administration
2013	medadmc_6	Char	22	$22.	Medical Administration
2014	feedoffoth_6	Num	8		Other reason feed turned off:
2015	feedoffothc_6	Char	5	$5.	Other reason feed turned off:
2016	feedoffreas_6	Char	255	$255.	Other reason feed turned off: Reason
2017	giintoleden_6	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
2018	giintoledenc_6	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
2019	diarrhea_6	Num	8		Diarrhea
2020	diarrheac_6	Char	8	$8.	Diarrhea
2021	vomiting_6	Num	8		Vomiting
2022	vomitingc_6	Char	8	$8.	Vomiting
2023	aspiration_6	Num	8		Aspiration

Num	Variable	Type	Len	Format	Label
2024	aspirationc_6	Char	10	$10.	Aspiration
2025	regurg_6	Num	8		Regurgitation
2026	regurgc_6	Char	13	$13.	Regurgitation
2027	feedsite_6	Num	8		Insertion site of feeding tube
2028	feedsitec_6	Char	12	$12.	Insertion site of feeding tube
2029	tubesize_6	Num	8		Feeding tube size
2030	tubesizec_6	Char	10	$10.	Feeding tube size
2031	distalpos_6	Num	8		Distal position of feeding tube
2032	distalposc_6	Char	12	$12.	Distal position of feeding tube
2033	distalconf_6	Num	8		Was distal position confirmed during this 24 hour period?
2034	distalconfc_6	Char	19	$19.	Was distal position confirmed during this 24 hour period?
2035	distalhow_6	Num	8		Yes, how confirmed:
2036	distalhowc_6	Char	15	$15.	Yes, how confirmed:
2037	distaloth_6	Char	40	$40.	Yes, how confirmed: Other
2038	fullcal_6	Num	8		Was rate advanced to full-calorie rate during this calendar day?
2039	fullcalc_6	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
2040	fullcaltm_6	Num	8	TIMEAMPM.	Yes, time full calorie reached:
2041	pronevent_6	Num	8		Prone ventilation this 24 hour period?
2042	proneventc_6	Char	3	$3.	Prone ventilation this 24 hour period?
2043	recfeedx_6	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
2044	goalratex_6	Char	64	$64.	Tube feeding goal rate (Not Done)
2045	goalchangex_6	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
2046	brand1x_6	Char	64	$64.	Enteral Feeding Formula 1 for this 24 hour period
2047	feedhrsx_6	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
2048	giintoledenx_6	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
2049	distalconfx_6	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
2050	fullcalx_6	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
2051	surg_7	Num	8		Surgery
2052	surgc_7	Char	7	$7.	Surgery
2053	residual_7	Num	8		Elevated Residuals
2054	residualc_7	Char	18	$18.	Elevated Residuals
2055	const_7	Num	8		Constipation
2056	constc_7	Char	12	$12.	Constipation
2057	cramp_7	Num	8		Abdominal distention or cramping
2058	crampc_7	Char	32	$32.	Abdominal distention or cramping

Num	Variable	Type	Len	Format	Label
2059	feedoffx_7	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
2060	feedsitex_7	Char	64	$64.	Insertion site of feeding tube (Not Done)
2061	tubesizex_7	Char	64	$64.	Feeding tube size (Not Done)
2062	distalposx_7	Char	64	$64.	Distal position of feeding tube (Not Done)
2063	proneventx_7	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
2064	recfeed_7	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
2065	recfeedc_7	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
2066	goalrate_7	Num	8		Tube feeding goal rate
2067	goalchange_7	Num	8		Did the goal rate change during the 24 hour period?
2068	goalchangec_7	Char	19	$19.	Did the goal rate change during the 24 hour period?
2069	newgoal_7	Num	8		Yes, new goal rate
2070	brand1_7	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
2071	brand1vol_7	Num	8		Total volume of enteral formula 1 infused for 24 hour period
2072	brand2_7	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
2073	brand2vol_7	Num	8		Total volume of enteral formula 2 infused for 24 hour period
2074	feedhrs_7	Num	8		Number of hours enteral tube feeds on for this 24 hour period
2075	feedoff_7	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
2076	feedoffc_7	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
2077	planext_7	Num	8		Planned Extubation
2078	planextc_7	Char	18	$18.	Planned Extubation
2079	giint_7	Num	8		GI Intolerance
2080	giintc_7	Char	14	$14.	GI Intolerance
2081	invbside_7	Num	8		Invasive bedside procedure
2082	invbsidec_7	Char	26	$26.	Invasive bedside procedure
2083	leftfloor_7	Num	8		Patient left the floor
2084	leftfloorc_7	Char	22	$22.	Patient left the floor
2085	care_7	Num	8		Nursing Care (i.e. bathing, HOB down)
2086	carec_7	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
2087	medadm_7	Num	8		Medical Administration
2088	medadmc_7	Char	22	$22.	Medical Administration
2089	feedoffoth_7	Num	8		Other reason feed turned off:
2090	feedoffothc_7	Char	5	$5.	Other reason feed turned off:
2091	feedoffreas_7	Char	255	$255.	Other reason feed turned off: Reason
2092	giintoleden_7	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?

Num	Variable	Type	Len	Format	Label
2093	giintoledenc_7	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
2094	diarrhea_7	Num	8		Diarrhea
2095	diarrheac_7	Char	8	$8.	Diarrhea
2096	vomiting_7	Num	8		Vomiting
2097	vomitingc_7	Char	8	$8.	Vomiting
2098	aspiration_7	Num	8		Aspiration
2099	aspirationc_7	Char	10	$10.	Aspiration
2100	regurg_7	Num	8		Regurgitation
2101	regurgc_7	Char	13	$13.	Regurgitation
2102	feedsite_7	Num	8		Insertion site of feeding tube
2103	feedsitec_7	Char	12	$12.	Insertion site of feeding tube
2104	tubesize_7	Num	8		Feeding tube size
2105	tubesizec_7	Char	10	$10.	Feeding tube size
2106	distalpos_7	Num	8		Distal position of feeding tube
2107	distalposc_7	Char	12	$12.	Distal position of feeding tube
2108	distalconf_7	Num	8		Was distal position confirmed during this 24 hour period?
2109	distalconfc_7	Char	19	$19.	Was distal position confirmed during this 24 hour period?
2110	distalhow_7	Num	8		Yes, how confirmed:
2111	distalhowc_7	Char	15	$15.	Yes, how confirmed:
2112	distaloth_7	Char	40	$40.	Yes, how confirmed: Other
2113	fullcal_7	Num	8		Was rate advanced to full-calorie rate during this calendar day?
2114	fullcalc_7	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
2115	fullcaltm_7	Num	8	TIMEAMPM.	Yes, time full calorie reached:
2116	pronevent_7	Num	8		Prone ventilation this 24 hour period?
2117	proneventc_7	Char	3	$3.	Prone ventilation this 24 hour period?
2118	recfeedx_7	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
2119	goalratex_7	Char	64	$64.	Tube feeding goal rate (Not Done)
2120	goalchangex_7	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
2121	brand1x_7	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
2122	feedhrsx_7	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
2123	giintoledenx_7	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
2124	distalconfx_7	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
2125	fullcalx_7	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
2126	surg_8	Num	8		Surgery
2127	surgc_8	Char	7	$7.	Surgery

Num	Variable	Type	Len	Format	Label
2128	residual_8	Num	8		Elevated Residuals
2129	residualc_8	Char	18	$18.	Elevated Residuals
2130	const_8	Num	8		Constipation
2131	constc_8	Char	12	$12.	Constipation
2132	cramp_8	Num	8		Abdominal distention or cramping
2133	crampc_8	Char	32	$32.	Abdominal distention or cramping
2134	feedoffx_8	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
2135	feedsitex_8	Char	64	$64.	Insertion site of feeding tube (Not Done)
2136	tubesizex_8	Char	64	$64.	Feeding tube size (Not Done)
2137	distalposx_8	Char	64	$64.	Distal position of feeding tube (Not Done)
2138	proneventx_8	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
2139	recfeed_8	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
2140	recfeedc_8	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
2141	goalrate_8	Num	8		Tube feeding goal rate
2142	goalchange_8	Num	8		Did the goal rate change during the 24 hour period?
2143	goalchangec_8	Char	19	$19.	Did the goal rate change during the 24 hour period?
2144	newgoal_8	Num	8		Yes, new goal rate
2145	brand1_8	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
2146	brand1vol_8	Num	8		Total volume of enteral formula 1 infused for 24 hour period
2147	brand2_8	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
2148	brand2vol_8	Num	8		Total volume of enteral formula 2 infused for 24 hour period
2149	feedhrs_8	Num	8		Number of hours enteral tube feeds on for this 24 hour period
2150	feedoff_8	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
2151	feedoffc_8	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
2152	planext_8	Num	8		Planned Extubation
2153	planextc_8	Char	18	$18.	Planned Extubation
2154	giint_8	Num	8		GI Intolerance
2155	giintc_8	Char	14	$14.	GI Intolerance
2156	invbside_8	Num	8		Invasive bedside procedure
2157	invbsidec_8	Char	26	$26.	Invasive bedside procedure
2158	leftfloor_8	Num	8		Patient left the floor
2159	leftfloorc_8	Char	22	$22.	Patient left the floor
2160	care_8	Num	8		Nursing Care (i.e. bathing, HOB down)
2161	carec_8	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
2162	medadm_8	Num	8		Medical Administration

Num	Variable	Type	Len	Format	Label
2163	medadmc_8	Char	22	$22.	Medical Administration
2164	feedoffoth_8	Num	8		Other reason feed turned off:
2165	feedoffothc_8	Char	5	$5.	Other reason feed turned off:
2166	feedoffreas_8	Char	255	$255.	Other reason feed turned off: Reason
2167	giintoleden_8	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
2168	giintoledenc_8	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
2169	diarrhea_8	Num	8		Diarrhea
2170	diarrheac_8	Char	8	$8.	Diarrhea
2171	vomiting_8	Num	8		Vomiting
2172	vomitingc_8	Char	8	$8.	Vomiting
2173	aspiration_8	Num	8		Aspiration
2174	aspirationc_8	Char	10	$10.	Aspiration
2175	regurg_8	Num	8		Regurgitation
2176	regurgc_8	Char	13	$13.	Regurgitation
2177	feedsite_8	Num	8		Insertion site of feeding tube
2178	feedsitec_8	Char	12	$12.	Insertion site of feeding tube
2179	tubesize_8	Num	8		Feeding tube size
2180	tubesizec_8	Char	10	$10.	Feeding tube size
2181	distalpos_8	Num	8		Distal position of feeding tube
2182	distalposc_8	Char	12	$12.	Distal position of feeding tube
2183	distalconf_8	Num	8		Was distal position confirmed during this 24 hour period?
2184	distalconfc_8	Char	19	$19.	Was distal position confirmed during this 24 hour period?
2185	distalhow_8	Num	8		Yes, how confirmed:
2186	distalhowc_8	Char	15	$15.	Yes, how confirmed:
2187	distaloth_8	Char	40	$40.	Yes, how confirmed: Other
2188	fullcal_8	Num	8		Was rate advanced to full-calorie rate during this calendar day?
2189	fullcalc_8	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
2190	fullcaltm_8	Num	8	TIMEAMPM.	Yes, time full calorie reached:
2191	pronevent_8	Num	8		Prone ventilation this 24 hour period?
2192	proneventc_8	Char	3	$3.	Prone ventilation this 24 hour period?
2193	recfeedx_8	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
2194	goalratex_8	Char	64	$64.	Tube feeding goal rate (Not Done)
2195	goalchangex_8	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
2196	brand1x_8	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
2197	feedhrsx_8	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)

Num	Variable	Type	Len	Format	Label
2198	giintoledenx_8	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
2199	distalconfx_8	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
2200	fullcalx_8	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
2201	surg_9	Num	8		Surgery
2202	surgc_9	Char	7	$7.	Surgery
2203	residual_9	Num	8		Elevated Residuals
2204	residualc_9	Char	18	$18.	Elevated Residuals
2205	const_9	Num	8		Constipation
2206	constc_9	Char	12	$12.	Constipation
2207	cramp_9	Num	8		Abdominal distention or cramping
2208	crampc_9	Char	32	$32.	Abdominal distention or cramping
2209	feedoffx_9	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
2210	feedsitex_9	Char	64	$64.	Insertion site of feeding tube (Not Done)
2211	tubesizex_9	Char	64	$64.	Feeding tube size (Not Done)
2212	distalposx_9	Char	64	$64.	Distal position of feeding tube (Not Done)
2213	proneventx_9	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
2214	recfeed_9	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
2215	recfeedc_9	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
2216	goalrate_9	Num	8		Tube feeding goal rate
2217	goalchange_9	Num	8		Did the goal rate change during the 24 hour period?
2218	goalchangec_9	Char	19	$19.	Did the goal rate change during the 24 hour period?
2219	newgoal_9	Num	8		Yes, new goal rate
2220	brand1_9	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
2221	brand1vol_9	Num	8		Total volume of enteral formula 1 infused for 24 hour period
2222	brand2_9	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
2223	brand2vol_9	Num	8		Total volume of enteral formula 2 infused for 24 hour period
2224	feedhrs_9	Num	8		Number of hours enteral tube feeds on for this 24 hour period
2225	feedoff_9	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
2226	feedoffc_9	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
2227	planext_9	Num	8		Planned Extubation
2228	planextc_9	Char	18	$18.	Planned Extubation
2229	giint_9	Num	8		GI Intolerance
2230	giintc_9	Char	14	$14.	GI Intolerance

Num	Variable	Type	Len	Format	Label
2231	invbside_9	Num	8		Invasive bedside procedure
2232	invbsidec_9	Char	26	$26.	Invasive bedside procedure
2233	leftfloor_9	Num	8		Patient left the floor
2234	leftfloorc_9	Char	22	$22.	Patient left the floor
2235	care_9	Num	8		Nursing Care (i.e. bathing, HOB down)
2236	carec_9	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
2237	medadm_9	Num	8		Medical Administration
2238	medadmc_9	Char	22	$22.	Medical Administration
2239	feedoffoth_9	Num	8		Other reason feed turned off:
2240	feedoffothc_9	Char	5	$5.	Other reason feed turned off:
2241	feedoffreas_9	Char	255	$255.	Other reason feed turned off: Reason
2242	giintoleden_9	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
2243	giintoledenc_9	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
2244	diarrhea_9	Num	8		Diarrhea
2245	diarrheac_9	Char	8	$8.	Diarrhea
2246	vomiting_9	Num	8		Vomiting
2247	vomitingc_9	Char	8	$8.	Vomiting
2248	aspiration_9	Num	8		Aspiration
2249	aspirationc_9	Char	10	$10.	Aspiration
2250	regurg_9	Num	8		Regurgitation
2251	regurgc_9	Char	13	$13.	Regurgitation
2252	feedsite_9	Num	8		Insertion site of feeding tube
2253	feedsitec_9	Char	12	$12.	Insertion site of feeding tube
2254	tubesize_9	Num	8		Feeding tube size
2255	tubesizec_9	Char	10	$10.	Feeding tube size
2256	distalpos_9	Num	8		Distal position of feeding tube
2257	distalposc_9	Char	12	$12.	Distal position of feeding tube
2258	distalconf_9	Num	8		Was distal position confirmed during this 24 hour period?
2259	distalconfc_9	Char	19	$19.	Was distal position confirmed during this 24 hour period?
2260	distalhow_9	Num	8		Yes, how confirmed:
2261	distalhowc_9	Char	15	$15.	Yes, how confirmed:
2262	distaloth_9	Char	40	$40.	Yes, how confirmed: Other
2263	fullcal_9	Num	8		Was rate advanced to full-calorie rate during this calendar day?
2264	fullcalc_9	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
2265	fullcaltm_9	Num	8	TIMEAMPM.	Yes, time full calorie reached:
2266	pronevent_9	Num	8		Prone ventilation this 24 hour period?
2267	proneventc_9	Char	3	$3.	Prone ventilation this 24 hour period?

Num	Variable	Type	Len	Format	Label
2268	recfeedx_9	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
2269	goalratex_9	Char	64	$64.	Tube feeding goal rate (Not Done)
2270	goalchangex_9	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
2271	brand1x_9	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
2272	feedhrsx_9	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
2273	giintoledenx_9	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
2274	distalconfx_9	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
2275	fullcalx_9	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
2276	surg_10	Num	8		Surgery
2277	surgc_10	Char	7	$7.	Surgery
2278	residual_10	Num	8		Elevated Residuals
2279	residualc_10	Char	18	$18.	Elevated Residuals
2280	const_10	Num	8		Constipation
2281	constc_10	Char	12	$12.	Constipation
2282	cramp_10	Num	8		Abdominal distention or cramping
2283	crampc_10	Char	32	$32.	Abdominal distention or cramping
2284	feedoffx_10	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
2285	feedsitex_10	Char	64	$64.	Insertion site of feeding tube (Not Done)
2286	tubesizex_10	Char	64	$64.	Feeding tube size (Not Done)
2287	distalposx_10	Char	64	$64.	Distal position of feeding tube (Not Done)
2288	proneventx_10	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
2289	recfeed_10	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
2290	recfeedc_10	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
2291	goalrate_10	Num	8		Tube feeding goal rate
2292	goalchange_10	Num	8		Did the goal rate change during the 24 hour period?
2293	goalchangec_10	Char	19	$19.	Did the goal rate change during the 24 hour period?
2294	newgoal_10	Num	8		Yes, new goal rate
2295	brand1_10	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
2296	brand1vol_10	Num	8		Total volume of enteral formula 1 infused for 24 hour period
2297	brand2_10	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
2298	brand2vol_10	Num	8		Total volume of enteral formula 2 infused for 24 hour period
2299	feedhrs_10	Num	8		Number of hours enteral tube feeds on for this 24 hour period
2300	feedoff_10	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?

Num	Variable	Type	Len	Format	Label
2301	feedoffc_10	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
2302	planext_10	Num	8		Planned Extubation
2303	planextc_10	Char	18	$18.	Planned Extubation
2304	giint_10	Num	8		GI Intolerance
2305	giintc_10	Char	14	$14.	GI Intolerance
2306	invbside_10	Num	8		Invasive bedside procedure
2307	invbsidec_10	Char	26	$26.	Invasive bedside procedure
2308	leftfloor_10	Num	8		Patient left the floor
2309	leftfloorc_10	Char	22	$22.	Patient left the floor
2310	care_10	Num	8		Nursing Care (i.e. bathing, HOB down)
2311	carec_10	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
2312	medadm_10	Num	8		Medical Administration
2313	medadmc_10	Char	22	$22.	Medical Administration
2314	feedoffoth_10	Num	8		Other reason feed turned off:
2315	feedoffothc_10	Char	5	$5.	Other reason feed turned off:
2316	feedoffreas_10	Char	255	$255.	Other reason feed turned off: Reason
2317	giintoleden_10	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
2318	giintoledenc_10	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
2319	diarrhea_10	Num	8		Diarrhea
2320	diarrheac_10	Char	8	$8.	Diarrhea
2321	vomiting_10	Num	8		Vomiting
2322	vomitingc_10	Char	8	$8.	Vomiting
2323	aspiration_10	Num	8		Aspiration
2324	aspirationc_10	Char	10	$10.	Aspiration
2325	regurg_10	Num	8		Regurgitation
2326	regurgc_10	Char	13	$13.	Regurgitation
2327	feedsite_10	Num	8		Insertion site of feeding tube
2328	feedsitec_10	Char	12	$12.	Insertion site of feeding tube
2329	tubesize_10	Num	8		Feeding tube size
2330	tubesizec_10	Char	10	$10.	Feeding tube size
2331	distalpos_10	Num	8		Distal position of feeding tube
2332	distalposc_10	Char	12	$12.	Distal position of feeding tube
2333	distalconf_10	Num	8		Was distal position confirmed during this 24 hour period?
2334	distalconfc_10	Char	19	$19.	Was distal position confirmed during this 24 hour period?
2335	distalhow_10	Num	8		Yes, how confirmed:
2336	distalhowc_10	Char	15	$15.	Yes, how confirmed:
2337	distaloth_10	Char	40	$40.	Yes, how confirmed: Other

Num	Variable	Type	Len	Format	Label
2338	fullcal_10	Num	8		Was rate advanced to full-calorie rate during this calendar day?
2339	fullcalc_10	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
2340	fullcaltm_10	Num	8	TIMEAMPM.	Yes, time full calorie reached:
2341	pronevent_10	Num	8		Prone ventilation this 24 hour period?
2342	proneventc_10	Char	3	$3.	Prone ventilation this 24 hour period?
2343	recfeedx_10	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
2344	goalratex_10	Char	64	$64.	Tube feeding goal rate (Not Done)
2345	goalchangex_10	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
2346	brand1x_10	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
2347	feedhrsx_10	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
2348	giintoledenx_10	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
2349	distalconfx_10	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
2350	fullcalx_10	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
2351	surg_11	Num	8		Surgery
2352	surgc_11	Char	7	$7.	Surgery
2353	residual_11	Num	8		Elevated Residuals
2354	residualc_11	Char	18	$18.	Elevated Residuals
2355	const_11	Num	8		Constipation
2356	constc_11	Char	12	$12.	Constipation
2357	cramp_11	Num	8		Abdominal distention or cramping
2358	crampc_11	Char	32	$32.	Abdominal distention or cramping
2359	feedoffx_11	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
2360	feedsitex_11	Char	64	$64.	Insertion site of feeding tube (Not Done)
2361	tubesizex_11	Char	64	$64.	Feeding tube size (Not Done)
2362	distalposx_11	Char	64	$64.	Distal position of feeding tube (Not Done)
2363	proneventx_11	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
2364	recfeed_11	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
2365	recfeedc_11	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
2366	goalrate_11	Num	8		Tube feeding goal rate
2367	goalchange_11	Num	8		Did the goal rate change during the 24 hour period?
2368	goalchangec_11	Char	19	$19.	Did the goal rate change during the 24 hour period?
2369	newgoal_11	Num	8		Yes, new goal rate
2370	brand1_11	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period

Num	Variable	Type	Len	Format	Label
2371	brand1vol_11	Num	8		Total volume of enteral formula 1 infused for 24 hour period
2372	brand2_11	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
2373	brand2vol_11	Num	8		Total volume of enteral formula 2 infused for 24 hour period
2374	feedhrs_11	Num	8		Number of hours enteral tube feeds on for this 24 hour period
2375	feedoff_11	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
2376	feedoffc_11	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
2377	planext_11	Num	8		Planned Extubation
2378	planextc_11	Char	18	$18.	Planned Extubation
2379	giint_11	Num	8		GI Intolerance
2380	giintc_11	Char	14	$14.	GI Intolerance
2381	invbside_11	Num	8		Invasive bedside procedure
2382	invbsidec_11	Char	26	$26.	Invasive bedside procedure
2383	leftfloor_11	Num	8		Patient left the floor
2384	leftfloorc_11	Char	22	$22.	Patient left the floor
2385	care_11	Num	8		Nursing Care (i.e. bathing, HOB down)
2386	carec_11	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
2387	medadm_11	Num	8		Medical Administration
2388	medadmc_11	Char	22	$22.	Medical Administration
2389	feedoffoth_11	Num	8		Other reason feed turned off:
2390	feedoffothc_11	Char	5	$5.	Other reason feed turned off:
2391	feedoffreas_11	Char	255	$255.	Other reason feed turned off: Reason
2392	giintoleden_11	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
2393	giintoledenc_11	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
2394	diarrhea_11	Num	8		Diarrhea
2395	diarrheac_11	Char	8	$8.	Diarrhea
2396	vomiting_11	Num	8		Vomiting
2397	vomitingc_11	Char	8	$8.	Vomiting
2398	aspiration_11	Num	8		Aspiration
2399	aspirationc_11	Char	10	$10.	Aspiration
2400	regurg_11	Num	8		Regurgitation
2401	regurgc_11	Char	13	$13.	Regurgitation
2402	feedsite_11	Num	8		Insertion site of feeding tube
2403	feedsitec_11	Char	12	$12.	Insertion site of feeding tube
2404	tubesize_11	Num	8		Feeding tube size
2405	tubesizec_11	Char	10	$10.	Feeding tube size
2406	distalpos_11	Num	8		Distal position of feeding tube

Num	Variable	Type	Len	Format	Label
2407	distalposc_11	Char	12	$12.	Distal position of feeding tube
2408	distalconf_11	Num	8		Was distal position confirmed during this 24 hour period?
2409	distalconfc_11	Char	19	$19.	Was distal position confirmed during this 24 hour period?
2410	distalhow_11	Num	8		Yes, how confirmed:
2411	distalhowc_11	Char	15	$15.	Yes, how confirmed:
2412	distaloth_11	Char	40	$40.	Yes, how confirmed: Other
2413	fullcal_11	Num	8		Was rate advanced to full-calorie rate during this calendar day?
2414	fullcalc_11	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
2415	fullcaltm_11	Num	8	TIMEAMPM.	Yes, time full calorie reached:
2416	pronevent_11	Num	8		Prone ventilation this 24 hour period?
2417	proneventc_11	Char	3	$3.	Prone ventilation this 24 hour period?
2418	recfeedx_11	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
2419	goalratex_11	Char	64	$64.	Tube feeding goal rate (Not Done)
2420	goalchangex_11	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
2421	brand1x_11	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
2422	feedhrsx_11	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
2423	giintoledenx_11	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
2424	distalconfx_11	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
2425	fullcalx_11	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
2426	surg_12	Num	8		Surgery
2427	surgc_12	Char	7	$7.	Surgery
2428	residual_12	Num	8		Elevated Residuals
2429	residualc_12	Char	18	$18.	Elevated Residuals
2430	const_12	Num	8		Constipation
2431	constc_12	Char	12	$12.	Constipation
2432	cramp_12	Num	8		Abdominal distention or cramping
2433	crampc_12	Char	32	$32.	Abdominal distention or cramping
2434	feedoffx_12	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
2435	feedsitex_12	Char	64	$64.	Insertion site of feeding tube (Not Done)
2436	tubesizex_12	Char	64	$64.	Feeding tube size (Not Done)
2437	distalposx_12	Char	64	$64.	Distal position of feeding tube (Not Done)
2438	proneventx_12	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
2439	recfeed_12	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?

Num	Variable	Type	Len	Format	Label
2440	recfeedc_12	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
2441	goalrate_12	Num	8		Tube feeding goal rate
2442	goalchange_12	Num	8		Did the goal rate change during the 24 hour period?
2443	goalchangec_12	Char	19	$19.	Did the goal rate change during the 24 hour period?
2444	newgoal_12	Num	8		Yes, new goal rate
2445	brand1_12	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
2446	brand1vol_12	Num	8		Total volume of enteral formula 1 infused for 24 hour period
2447	brand2_12	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
2448	brand2vol_12	Num	8		Total volume of enteral formula 2 infused for 24 hour period
2449	feedhrs_12	Num	8		Number of hours enteral tube feeds on for this 24 hour period
2450	feedoff_12	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
2451	feedoffc_12	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
2452	planext_12	Num	8		Planned Extubation
2453	planextc_12	Char	18	$18.	Planned Extubation
2454	giint_12	Num	8		GI Intolerance
2455	giintc_12	Char	14	$14.	GI Intolerance
2456	invbside_12	Num	8		Invasive bedside procedure
2457	invbsidec_12	Char	26	$26.	Invasive bedside procedure
2458	leftfloor_12	Num	8		Patient left the floor
2459	leftfloorc_12	Char	22	$22.	Patient left the floor
2460	care_12	Num	8		Nursing Care (i.e. bathing, HOB down)
2461	carec_12	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
2462	medadm_12	Num	8		Medical Administration
2463	medadmc_12	Char	22	$22.	Medical Administration
2464	feedoffoth_12	Num	8		Other reason feed turned off:
2465	feedoffothc_12	Char	5	$5.	Other reason feed turned off:
2466	feedoffreas_12	Char	255	$255.	Other reason feed turned off: Reason
2467	giintoleden_12	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
2468	giintoledenc_12	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
2469	diarrhea_12	Num	8		Diarrhea
2470	diarrheac_12	Char	8	$8.	Diarrhea
2471	vomiting_12	Num	8		Vomiting
2472	vomitingc_12	Char	8	$8.	Vomiting
2473	aspiration_12	Num	8		Aspiration
2474	aspirationc_12	Char	10	$10.	Aspiration

Num	Variable	Type	Len	Format	Label
2475	regurg_12	Num	8		Regurgitation
2476	regurgc_12	Char	13	$13.	Regurgitation
2477	feedsite_12	Num	8		Insertion site of feeding tube
2478	feedsitec_12	Char	12	$12.	Insertion site of feeding tube
2479	tubesize_12	Num	8		Feeding tube size
2480	tubesizec_12	Char	10	$10.	Feeding tube size
2481	distalpos_12	Num	8		Distal position of feeding tube
2482	distalposc_12	Char	12	$12.	Distal position of feeding tube
2483	distalconf_12	Num	8		Was distal position confirmed during this 24 hour period?
2484	distalconfc_12	Char	19	$19.	Was distal position confirmed during this 24 hour period?
2485	distalhow_12	Num	8		Yes, how confirmed:
2486	distalhowc_12	Char	15	$15.	Yes, how confirmed:
2487	distaloth_12	Char	40	$40.	Yes, how confirmed: Other
2488	fullcal_12	Num	8		Was rate advanced to full-calorie rate during this calendar day?
2489	fullcalc_12	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
2490	fullcaltm_12	Num	8	TIMEAMPM.	Yes, time full calorie reached:
2491	pronevent_12	Num	8		Prone ventilation this 24 hour period?
2492	proneventc_12	Char	3	$3.	Prone ventilation this 24 hour period?
2493	recfeedx_12	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
2494	goalratex_12	Char	64	$64.	Tube feeding goal rate (Not Done)
2495	goalchangex_12	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
2496	brand1x_12	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
2497	feedhrsx_12	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
2498	giintoledenx_12	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
2499	distalconfx_12	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
2500	fullcalx_12	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
2501	templ	Num	8		Lowest Temperature in Celcius
2502	temph	Num	8		Highest Temperature in Clecius
2503	sysbpl	Num	8		Lowest Systolic BP
2504	sysbph	Num	8		Highest Systolic BP
2505	mapl	Num	8		Lowest Mean Arterial Pressure
2506	maph	Num	8		Highest Mean Arterial Pressure
2507	hratel	Num	8		Lowest Heart Rate (beats/min)
2508	hrateh	Num	8		Highest Heart Rate (beats/min)
2509	respl	Num	8		Lowest Respiratory Rate (breaths/min)

Num	Variable	Type	Len	Format	Label
2510	resph	Num	8		Highest Respiratory Rate (breaths/min)
2511	ventl	Num	8		Patient ventilated at lowest resp. rate
2512	ventlc	Char	3	$3.	Patient ventilated at lowest resp. rate
2513	venth	Num	8		Patient ventilated at highest resp. rate
2514	venthc	Char	3	$3.	Patient ventilated at highest resp. rate
2515	urineout_0	Num	8		Urine output for 24 hours preceding randomization
2516	fluidout_0	Num	8		Total fluid output last 24 hours
2517	fluidin_0	Num	8		Total fluid intake for the 24 hours preceding randomization
2518	hcto	Num	8		Hct: Only %
2519	hctl	Num	8		Hct: Lowest %
2520	hcth	Num	8		Hct: Highest %
2521	wbco	Num	8		WBC: Only mm^3
2522	wbcl	Num	8		WBC: Lowest mm^3
2523	wbch	Num	8		WBC: Highest mm^3
2524	plate	Num	8		Platelets (lowest): x 1000 / mm^3
2525	sodiumo	Num	8		Serum Sodium: Only (mEq/L)
2526	sodiuml	Num	8		Serum Sodium: Lowest (mEq/L)
2527	sodiumh	Num	8		Serum Sodium: Highest (mEq/L)
2528	potaso	Num	8		Serum Potassium: Only (mEq/L)
2529	potasl	Num	8		Serum Potassium: Lowest (mEq/L)
2530	potash	Num	8		Serum Potassium: Highest (mEq/L)
2531	bun	Num	8		Serum BUN (highest): (mg/dL)
2532	creato	Num	8		Serum Creatinine Only: (mg/dL)
2533	creatl	Num	8		Serum Creatinine Lowest: (mg/dL)
2534	creath	Num	8		Serum Creatinine Highest: (mg/dL)
2535	gluco	Num	8		Serum Glucose Only: (mg/dL)
2536	glucl	Num	8		Serum Glucose Lowest: (mg/dL)
2537	gluch	Num	8		Serum Glucose Highest: (mg/dL)
2538	albumo	Num	8		Serum Albumin Only: (g/dL)
2539	albuml	Num	8		Serum Albumin Lowest: (g/dL)
2540	albumh	Num	8		Serum Albumin Highest: (g/dL)
2541	bilih	Num	8		Serum Bilirubin Highest: (mg/dL)
2542	bicarbl	Num	8		Serum Bicarbonate Lowest: (mEq/L)
2543	tempX	Char	64	$64.	Highest Temperature in Clecius (Not Done)
2544	sysbpX	Char	64	$64.	Highest Systolic BP (Not Done)
2545	mapX	Char	64	$64.	Highest Mean Arterial Pressure (Not Done)
2546	hrateX	Char	64	$64.	Highest Heart Rate (beats/min) (Not Done)
2547	resphlX	Char	64	$64.	Highest Respiratory Rate (breaths/min) (Not Done)
2548	ventlX	Char	64	$64.	Patient ventilated at lowest resp. rate (Not Done)

Num	Variable	Type	Len	Format	Label
2549	venthX	Char	64	$64.	Patient ventilated at highest resp. rate (Not Done)
2550	urineoutX	Char	64	$64.	Urine output for 24 hours preceding randomization (Not Done)
2551	fluidoutX	Char	64	$64.	Total fluid output last 24 hours (Not Done)
2552	fluidinX	Char	64	$64.	Total fluid intake for the 24 hours preceding randomization (Not Done)
2553	hctX	Char	64	$64.	Hct: (Not Done)
2554	wbcX	Char	64	$64.	WBC: (Not Done)
2555	plateX	Char	64	$64.	Platelets (lowest): x 1000 / mm^3 (Not Done)
2556	bunX	Char	64	$64.	Serum BUN (highest): (mg/dL) (Not Done)
2557	creatX	Char	64	$64.	Serum Creatinine: (mg/dL) (Not Done)
2558	albumX	Char	64	$64.	Serum Albumin: (g/dL) (Not Done)
2559	bilihX	Char	64	$64.	Serum Bilirubin Highest: (mg/dL) (Not Done)
2560	bicarblx	Char	64	$64.	Serum Bicarbonate Lowest: (mEq/L) (Not Done)
2561	prbc24_1	Num	8		PRBC given in last 24 hours
2562	ffp24_1	Num	8		FFP given in last 24 hours
2563	notedenpt_1	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2564	notedenptc_1	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2565	entfeedvol_1	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
2566	fluidinx_1	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
2567	fluidoutx_1	Char	64	$64.	Total fluid out last 24 hours (Not Done)
2568	urineoutx_1	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
2569	fluidin_1	Num	8		Total Fluid Intake in last 24h
2570	fluidout_1	Num	8		Total fluid out last 24 hours
2571	urineout_1	Num	8		Total urine output in the last 24 hours
2572	prbc24_2	Num	8		PRBC given in last 24 hours
2573	ffp24_2	Num	8		FFP given in last 24 hours
2574	notedenpt_2	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2575	notedenptc_2	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2576	entfeedvol_2	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
2577	fluidinx_2	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
2578	fluidoutx_2	Char	64	$64.	Total fluid out last 24 hours (Not Done)
2579	urineoutx_2	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
2580	fluidin_2	Num	8		Total Fluid Intake in last 24h
2581	fluidout_2	Num	8		Total fluid out last 24 hours
2582	urineout_2	Num	8		Total urine output in the last 24 hours
2583	prbc24_3	Num	8		PRBC given in last 24 hours
2584	ffp24_3	Num	8		FFP given in last 24 hours
2585	notedenpt_3	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?

Num	Variable	Type	Len	Format	Label
2586	notedenptc_3	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2587	entfeedvol_3	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
2588	fluidinx_3	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
2589	fluidoutx_3	Char	64	$64.	Total fluid out last 24 hours (Not Done)
2590	urineoutx_3	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
2591	fluidin_3	Num	8		Total Fluid Intake in last 24h
2592	fluidout_3	Num	8		Total fluid out last 24 hours
2593	urineout_3	Num	8		Total urine output in the last 24 hours
2594	prbc24_4	Num	8		PRBC given in last 24 hours
2595	ffp24_4	Num	8		FFP given in last 24 hours
2596	notedenpt_4	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2597	notedenptc_4	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2598	entfeedvol_4	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
2599	fluidinx_4	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
2600	fluidoutx_4	Char	64	$64.	Total fluid out last 24 hours (Not Done)
2601	urineoutx_4	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
2602	fluidin_4	Num	8		Total Fluid Intake in last 24h
2603	fluidout_4	Num	8		Total fluid out last 24 hours
2604	urineout_4	Num	8		Total urine output in the last 24 hours
2605	prbc24_5	Num	8		PRBC given in last 24 hours
2606	ffp24_5	Num	8		FFP given in last 24 hours
2607	notedenpt_5	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2608	notedenptc_5	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2609	entfeedvol_5	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
2610	fluidinx_5	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
2611	fluidoutx_5	Char	64	$64.	Total fluid out last 24 hours (Not Done)
2612	urineoutx_5	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
2613	fluidin_5	Num	8		Total Fluid Intake in last 24h
2614	fluidout_5	Num	8		Total fluid out last 24 hours
2615	urineout_5	Num	8		Total urine output in the last 24 hours
2616	prbc24_6	Num	8		PRBC given in last 24 hours
2617	ffp24_6	Num	8		FFP given in last 24 hours
2618	notedenpt_6	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2619	notedenptc_6	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2620	entfeedvol_6	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
2621	fluidinx_6	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)

Num	Variable	Type	Len	Format	Label
2622	fluidoutx_6	Char	64	$64.	Total fluid out last 24 hours (Not Done)
2623	urineoutx_6	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
2624	fluidin_6	Num	8		Total Fluid Intake in last 24h
2625	fluidout_6	Num	8		Total fluid out last 24 hours
2626	urineout_6	Num	8		Total urine output in the last 24 hours
2627	prbc24_7	Num	8		PRBC given in last 24 hours
2628	ffp24_7	Num	8		FFP given in last 24 hours
2629	notedenpt_7	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2630	notedenptc_7	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2631	entfeedvol_7	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
2632	fluidinx_7	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
2633	fluidoutx_7	Char	64	$64.	Total fluid out last 24 hours (Not Done)
2634	urineoutx_7	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
2635	fluidin_7	Num	8		Total Fluid Intake in last 24h
2636	fluidout_7	Num	8		Total fluid out last 24 hours
2637	urineout_7	Num	8		Total urine output in the last 24 hours
2638	prbc24_8	Num	8		PRBC given in last 24 hours
2639	ffp24_8	Num	8		FFP given in last 24 hours
2640	notedenpt_8	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2641	notedenptc_8	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2642	entfeedvol_8	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
2643	fluidinx_8	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
2644	fluidoutx_8	Char	64	$64.	Total fluid out last 24 hours (Not Done)
2645	urineoutx_8	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
2646	fluidin_8	Num	8		Total Fluid Intake in last 24h
2647	fluidout_8	Num	8		Total fluid out last 24 hours
2648	urineout_8	Num	8		Total urine output in the last 24 hours
2649	sedative_0	Num	8		Is patient on a sedative or neuromuscular blocker?
2650	sedativec_0	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
2651	eye_0	Num	8		Eye opening score:
2652	eyec_0	Char	11	$11.	Eye opening score:
2653	motor_0	Num	8		Motor response score:
2654	motorc_0	Char	26	$26.	Motor response score:
2655	verbal_0	Num	8		Verbal response score:
2656	verbalc_0	Char	50	$50.	Verbal response score:
2657	gcs_0	Num	8		Total
2658	gcsdt_0	Num	8	BEST12.	Date Taken (Day)

Num	Variable	Type	Len	Format	Label
2659	sedativex_0	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
2660	eyex_0	Char	64	$64.	Eye opening score: (Not Done)
2661	motorx_0	Char	64	$64.	Motor response score: (Not Done)
2662	verbalx_0	Char	64	$64.	Verbal response score: (Not Done)
2663	VISITORDER_0	Num	8		VISITORDER
2664	sedative_7	Num	8		Is patient on a sedative or neuromuscular blocker?
2665	sedativec_7	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
2666	eye_7	Num	8		Eye opening score:
2667	eyec_7	Char	11	$11.	Eye opening score:
2668	motor_7	Num	8		Motor response score:
2669	motorc_7	Char	26	$26.	Motor response score:
2670	verbal_7	Num	8		Verbal response score:
2671	verbalc_7	Char	50	$50.	Verbal response score:
2672	gcs_7	Num	8		Total
2673	gcsdt_7	Num	8	BEST12.	Date Taken (Day)
2674	sedativex_7	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
2675	eyex_7	Char	64	$64.	Eye opening score: (Not Done)
2676	motorx_7	Char	64	$64.	Motor response score: (Not Done)
2677	verbalx_7	Char	64	$64.	Verbal response score: (Not Done)
2678	VISITORDER_7	Num	8		VISITORDER
2679	sedative_13	Num	8		Is patient on a sedative or neuromuscular blocker?
2680	sedativec_13	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
2681	eye_13	Num	8		Eye opening score:
2682	eyec_13	Char	11	$11.	Eye opening score:
2683	motor_13	Num	8		Motor response score:
2684	motorc_13	Char	26	$26.	Motor response score:
2685	verbal_13	Num	8		Verbal response score:
2686	verbalc_13	Char	50	$50.	Verbal response score:
2687	gcs_13	Num	8		Total
2688	gcsdt_13	Num	8	BEST12.	Date Taken (Day)
2689	sedativex_13	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
2690	eyex_13	Char	64	$64.	Eye opening score: (Not Done)
2691	motorx_13	Char	64	$64.	Motor response score: (Not Done)
2692	verbalx_13	Char	64	$64.	Verbal response score: (Not Done)
2693	VISITORDER_13	Num	8		VISITORDER
2694	sedative_14	Num	8		Is patient on a sedative or neuromuscular blocker?
2695	sedativec_14	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
2696	eye_14	Num	8		Eye opening score:
2697	eyec_14	Char	11	$11.	Eye opening score:

Num	Variable	Type	Len	Format	Label
2698	motor_14	Num	8		Motor response score:
2699	motorc_14	Char	26	$26.	Motor response score:
2700	verbal_14	Num	8		Verbal response score:
2701	verbalc_14	Char	50	$50.	Verbal response score:
2702	gcs_14	Num	8		Total
2703	gcsdt_14	Num	8	BEST12.	Date Taken (Day)
2704	sedativex_14	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
2705	eyex_14	Char	64	$64.	Eye opening score: (Not Done)
2706	motorx_14	Char	64	$64.	Motor response score: (Not Done)
2707	verbalx_14	Char	64	$64.	Verbal response score: (Not Done)
2708	VISITORDER_14	Num	8		VISITORDER
2709	sedative_15	Num	8		Is patient on a sedative or neuromuscular blocker?
2710	sedativec_15	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
2711	eye_15	Num	8		Eye opening score:
2712	eyec_15	Char	11	$11.	Eye opening score:
2713	motor_15	Num	8		Motor response score:
2714	motorc_15	Char	26	$26.	Motor response score:
2715	verbal_15	Num	8		Verbal response score:
2716	verbalc_15	Char	50	$50.	Verbal response score:
2717	gcs_15	Num	8		Total
2718	gcsdt_15	Num	8	BEST12.	Date Taken (Day)
2719	sedativex_15	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
2720	eyex_15	Char	64	$64.	Eye opening score: (Not Done)
2721	motorx_15	Char	64	$64.	Motor response score: (Not Done)
2722	verbalx_15	Char	64	$64.	Verbal response score: (Not Done)
2723	VISITORDER_15	Num	8		VISITORDER
2724	sedative_16	Num	8		Is patient on a sedative or neuromuscular blocker?
2725	sedativec_16	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
2726	eye_16	Num	8		Eye opening score:
2727	eyec_16	Char	11	$11.	Eye opening score:
2728	motor_16	Num	8		Motor response score:
2729	motorc_16	Char	26	$26.	Motor response score:
2730	verbal_16	Num	8		Verbal response score:
2731	verbalc_16	Char	50	$50.	Verbal response score:
2732	gcs_16	Num	8		Total
2733	gcsdt_16	Num	8	BEST12.	Date Taken (Day)
2734	sedativex_16	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
2735	eyex_16	Char	64	$64.	Eye opening score: (Not Done)
2736	motorx_16	Char	64	$64.	Motor response score: (Not Done)

Num	Variable	Type	Len	Format	Label
2737	verbalx_16	Char	64	$64.	Verbal response score: (Not Done)
2738	VISITORDER_16	Num	8		VISITORDER
2739	sedative_17	Num	8		Is patient on a sedative or neuromuscular blocker?
2740	sedativec_17	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
2741	eye_17	Num	8		Eye opening score:
2742	eyec_17	Char	11	$11.	Eye opening score:
2743	motor_17	Num	8		Motor response score:
2744	motorc_17	Char	26	$26.	Motor response score:
2745	verbal_17	Num	8		Verbal response score:
2746	verbalc_17	Char	50	$50.	Verbal response score:
2747	gcs_17	Num	8		Total
2748	gcsdt_17	Num	8	BEST12.	Date Taken (Day)
2749	sedativex_17	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
2750	eyex_17	Char	64	$64.	Eye opening score: (Not Done)
2751	motorx_17	Char	64	$64.	Motor response score: (Not Done)
2752	verbalx_17	Char	64	$64.	Verbal response score: (Not Done)
2753	VISITORDER_17	Num	8		VISITORDER
2754	sedative_18	Num	8		Is patient on a sedative or neuromuscular blocker?
2755	sedativec_18	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
2756	eye_18	Num	8		Eye opening score:
2757	eyec_18	Char	11	$11.	Eye opening score:
2758	motor_18	Num	8		Motor response score:
2759	motorc_18	Char	26	$26.	Motor response score:
2760	verbal_18	Num	8		Verbal response score:
2761	verbalc_18	Char	50	$50.	Verbal response score:
2762	gcs_18	Num	8		Total
2763	gcsdt_18	Num	8	BEST12.	Date Taken (Day)
2764	sedativex_18	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
2765	eyex_18	Char	64	$64.	Eye opening score: (Not Done)
2766	motorx_18	Char	64	$64.	Motor response score: (Not Done)
2767	verbalx_18	Char	64	$64.	Verbal response score: (Not Done)
2768	VISITORDER_18	Num	8		VISITORDER
2769	sedative_19	Num	8		Is patient on a sedative or neuromuscular blocker?
2770	sedativec_19	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
2771	eye_19	Num	8		Eye opening score:
2772	eyec_19	Char	11	$11.	Eye opening score:
2773	motor_19	Num	8		Motor response score:
2774	motorc_19	Char	26	$26.	Motor response score:
2775	verbal_19	Num	8		Verbal response score:

Num	Variable	Type	Len	Format	Label
2776	verbalc_19	Char	50	$50.	Verbal response score:
2777	gcs_19	Num	8		Total
2778	gcsdt_19	Num	8	BEST12.	Date Taken (Day)
2779	sedativex_19	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
2780	eyex_19	Char	64	$64.	Eye opening score: (Not Done)
2781	motorx_19	Char	64	$64.	Motor response score: (Not Done)
2782	verbalx_19	Char	64	$64.	Verbal response score: (Not Done)
2783	VISITORDER_19	Num	8		VISITORDER
2784	sedative_20	Num	8		Is patient on a sedative or neuromuscular blocker?
2785	sedativec_20	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
2786	eye_20	Num	8		Eye opening score:
2787	eyec_20	Char	11	$11.	Eye opening score:
2788	motor_20	Num	8		Motor response score:
2789	motorc_20	Char	26	$26.	Motor response score:
2790	verbal_20	Num	8		Verbal response score:
2791	verbalc_20	Char	50	$50.	Verbal response score:
2792	gcs_20	Num	8		Total
2793	gcsdt_20	Num	8	BEST12.	Date Taken (Day)
2794	sedativex_20	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
2795	eyex_20	Char	64	$64.	Eye opening score: (Not Done)
2796	motorx_20	Char	64	$64.	Motor response score: (Not Done)
2797	verbalx_20	Char	64	$64.	Verbal response score: (Not Done)
2798	VISITORDER_20	Num	8		VISITORDER
2799	sedative_28	Num	8		Is patient on a sedative or neuromuscular blocker?
2800	sedativec_28	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
2801	eye_28	Num	8		Eye opening score:
2802	eyec_28	Char	11	$11.	Eye opening score:
2803	motor_28	Num	8		Motor response score:
2804	motorc_28	Char	26	$26.	Motor response score:
2805	verbal_28	Num	8		Verbal response score:
2806	verbalc_28	Char	50	$50.	Verbal response score:
2807	gcs_28	Num	8		Total
2808	gcsdt_28	Num	8	BEST12.	Date Taken (Day)
2809	sedativex_28	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
2810	eyex_28	Char	64	$64.	Eye opening score: (Not Done)
2811	motorx_28	Char	64	$64.	Motor response score: (Not Done)
2812	verbalx_28	Char	64	$64.	Verbal response score: (Not Done)
2813	VISITORDER_28	Num	8		VISITORDER
2814	sedative_999	Num	8		Is patient on a sedative or neuromuscular blocker?

Num	Variable	Type	Len	Format	Label
2815	sedativec_999	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
2816	eye_999	Num	8		Eye opening score:
2817	eyec_999	Char	11	$11.	Eye opening score:
2818	motor_999	Num	8		Motor response score:
2819	motorc_999	Char	26	$26.	Motor response score:
2820	verbal_999	Num	8		Verbal response score:
2821	verbalc_999	Char	50	$50.	Verbal response score:
2822	gcs_999	Num	8		Total
2823	gcsdt_999	Num	8	BEST12.	Date Taken (Day)
2824	sedativex_999	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
2825	eyex_999	Char	64	$64.	Eye opening score: (Not Done)
2826	motorx_999	Char	64	$64.	Motor response score: (Not Done)
2827	verbalx_999	Char	64	$64.	Verbal response score: (Not Done)
2828	VISITORDER_999	Num	8		VISITORDER
2829	index	Num	8		
2830	narcotics_1	Num	8		Did patient receive any narcotics this calendar date?
2831	narcoticsc_1	Char	3	$3.	Did patient receive any narcotics this calendar date?
2832	paralytics_1	Num	8		Did patient receive any paralytics this calendar date?
2833	paralyticsc_1	Char	3	$3.	Did patient receive any paralytics this calendar date?
2834	prokinetics_1	Num	8		Did patient receive any prokinetics this calendar date?
2835	prokineticsc_1	Char	3	$3.	Did patient receive any prokinetics this calendar date?
2836	antiemetics_1	Num	8		Did patient receive any anti-emetics this calendar date?
2837	antiemeticsc_1	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
2838	antidiarrheals_1	Num	8		Did patient receive any anti-diarrheals this calendar date?
2839	antidiarrhealsc_1	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
2840	laxatives_1	Num	8		Did patient receive any laxatives this calendar date?
2841	laxativesc_1	Char	3	$3.	Did patient receive any laxatives this calendar date?
2842	narcoticsx_1	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
2843	paralyticsx_1	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
2844	prokineticsx_1	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
2845	antiemeticsx_1	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
2846	antidiarrhealsx_1	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
2847	laxativesx_1	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
2848	narcotics_2	Num	8		Did patient receive any narcotics this calendar date?
2849	narcoticsc_2	Char	3	$3.	Did patient receive any narcotics this calendar date?
2850	paralytics_2	Num	8		Did patient receive any paralytics this calendar date?

Num	Variable	Type	Len	Format	Label
2851	paralyticsc_2	Char	3	$3.	Did patient receive any paralytics this calendar date?
2852	prokinetics_2	Num	8		Did patient receive any prokinetics this calendar date?
2853	prokineticsc_2	Char	3	$3.	Did patient receive any prokinetics this calendar date?
2854	antiemetics_2	Num	8		Did patient receive any anti-emetics this calendar date?
2855	antiemeticsc_2	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
2856	antidiarrheals_2	Num	8		Did patient receive any anti-diarrheals this calendar date?
2857	antidiarrhealsc_2	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
2858	laxatives_2	Num	8		Did patient receive any laxatives this calendar date?
2859	laxativesc_2	Char	3	$3.	Did patient receive any laxatives this calendar date?
2860	narcoticsx_2	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
2861	paralyticsx_2	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
2862	prokineticsx_2	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
2863	antiemeticsx_2	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
2864	antidiarrhealsx_2	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
2865	laxativesx_2	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
2866	narcotics_3	Num	8		Did patient receive any narcotics this calendar date?
2867	narcoticsc_3	Char	3	$3.	Did patient receive any narcotics this calendar date?
2868	paralytics_3	Num	8		Did patient receive any paralytics this calendar date?
2869	paralyticsc_3	Char	3	$3.	Did patient receive any paralytics this calendar date?
2870	prokinetics_3	Num	8		Did patient receive any prokinetics this calendar date?
2871	prokineticsc_3	Char	3	$3.	Did patient receive any prokinetics this calendar date?
2872	antiemetics_3	Num	8		Did patient receive any anti-emetics this calendar date?
2873	antiemeticsc_3	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
2874	antidiarrheals_3	Num	8		Did patient receive any anti-diarrheals this calendar date?
2875	antidiarrhealsc_3	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
2876	laxatives_3	Num	8		Did patient receive any laxatives this calendar date?
2877	laxativesc_3	Char	3	$3.	Did patient receive any laxatives this calendar date?
2878	narcoticsx_3	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
2879	paralyticsx_3	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
2880	prokineticsx_3	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
2881	antiemeticsx_3	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
2882	antidiarrhealsx_3	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
2883	laxativesx_3	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)

Num	Variable	Type	Len	Format	Label
2884	narcotics_4	Num	8		Did patient receive any narcotics this calendar date?
2885	narcoticsc_4	Char	3	$3.	Did patient receive any narcotics this calendar date?
2886	paralytics_4	Num	8		Did patient receive any paralytics this calendar date?
2887	paralyticsc_4	Char	3	$3.	Did patient receive any paralytics this calendar date?
2888	prokinetics_4	Num	8		Did patient receive any prokinetics this calendar date?
2889	prokineticsc_4	Char	3	$3.	Did patient receive any prokinetics this calendar date?
2890	antiemetics_4	Num	8		Did patient receive any anti-emetics this calendar date?
2891	antiemeticsc_4	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
2892	antidiarrheals_4	Num	8		Did patient receive any anti-diarrheals this calendar date?
2893	antidiarrhealsc_4	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
2894	laxatives_4	Num	8		Did patient receive any laxatives this calendar date?
2895	laxativesc_4	Char	3	$3.	Did patient receive any laxatives this calendar date?
2896	narcoticsx_4	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
2897	paralyticsx_4	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
2898	prokineticsx_4	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
2899	antiemeticsx_4	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
2900	antidiarrhealsx_4	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
2901	laxativesx_4	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
2902	narcotics_5	Num	8		Did patient receive any narcotics this calendar date?
2903	narcoticsc_5	Char	3	$3.	Did patient receive any narcotics this calendar date?
2904	paralytics_5	Num	8		Did patient receive any paralytics this calendar date?
2905	paralyticsc_5	Char	3	$3.	Did patient receive any paralytics this calendar date?
2906	prokinetics_5	Num	8		Did patient receive any prokinetics this calendar date?
2907	prokineticsc_5	Char	3	$3.	Did patient receive any prokinetics this calendar date?
2908	antiemetics_5	Num	8		Did patient receive any anti-emetics this calendar date?
2909	antiemeticsc_5	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
2910	antidiarrheals_5	Num	8		Did patient receive any anti-diarrheals this calendar date?
2911	antidiarrhealsc_5	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
2912	laxatives_5	Num	8		Did patient receive any laxatives this calendar date?
2913	laxativesc_5	Char	3	$3.	Did patient receive any laxatives this calendar date?
2914	narcoticsx_5	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
2915	paralyticsx_5	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
2916	prokineticsx_5	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
2917	antiemeticsx_5	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)

Num	Variable	Type	Len	Format	Label
2918	antidiarrhealsx_5	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
2919	laxativesx_5	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
2920	narcotics_6	Num	8		Did patient receive any narcotics this calendar date?
2921	narcoticsc_6	Char	3	$3.	Did patient receive any narcotics this calendar date?
2922	paralytics_6	Num	8		Did patient receive any paralytics this calendar date?
2923	paralyticsc_6	Char	3	$3.	Did patient receive any paralytics this calendar date?
2924	prokinetics_6	Num	8		Did patient receive any prokinetics this calendar date?
2925	prokineticsc_6	Char	3	$3.	Did patient receive any prokinetics this calendar date?
2926	antiemetics_6	Num	8		Did patient receive any anti-emetics this calendar date?
2927	antiemeticsc_6	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
2928	antidiarrheals_6	Num	8		Did patient receive any anti-diarrheals this calendar date?
2929	antidiarrhealsc_6	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
2930	laxatives_6	Num	8		Did patient receive any laxatives this calendar date?
2931	laxativesc_6	Char	3	$3.	Did patient receive any laxatives this calendar date?
2932	narcoticsx_6	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
2933	paralyticsx_6	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
2934	prokineticsx_6	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
2935	antiemeticsx_6	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
2936	antidiarrhealsx_6	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
2937	laxativesx_6	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
2938	narcotics_7	Num	8		Did patient receive any narcotics this calendar date?
2939	narcoticsc_7	Char	3	$3.	Did patient receive any narcotics this calendar date?
2940	paralytics_7	Num	8		Did patient receive any paralytics this calendar date?
2941	paralyticsc_7	Char	3	$3.	Did patient receive any paralytics this calendar date?
2942	prokinetics_7	Num	8		Did patient receive any prokinetics this calendar date?
2943	prokineticsc_7	Char	3	$3.	Did patient receive any prokinetics this calendar date?
2944	antiemetics_7	Num	8		Did patient receive any anti-emetics this calendar date?
2945	antiemeticsc_7	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
2946	antidiarrheals_7	Num	8		Did patient receive any anti-diarrheals this calendar date?
2947	antidiarrhealsc_7	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
2948	laxatives_7	Num	8		Did patient receive any laxatives this calendar date?
2949	laxativesc_7	Char	3	$3.	Did patient receive any laxatives this calendar date?
2950	narcoticsx_7	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
2951	paralyticsx_7	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)

Num	Variable	Type	Len	Format	Label
2952	prokineticsx_7	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
2953	antiemeticsx_7	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
2954	antidiarrhealsx_7	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
2955	laxativesx_7	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
2956	narcotics_8	Num	8		Did patient receive any narcotics this calendar date?
2957	narcoticsc_8	Char	3	$3.	Did patient receive any narcotics this calendar date?
2958	paralytics_8	Num	8		Did patient receive any paralytics this calendar date?
2959	paralyticsc_8	Char	3	$3.	Did patient receive any paralytics this calendar date?
2960	prokinetics_8	Num	8		Did patient receive any prokinetics this calendar date?
2961	prokineticsc_8	Char	3	$3.	Did patient receive any prokinetics this calendar date?
2962	antiemetics_8	Num	8		Did patient receive any anti-emetics this calendar date?
2963	antiemeticsc_8	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
2964	antidiarrheals_8	Num	8		Did patient receive any anti-diarrheals this calendar date?
2965	antidiarrhealsc_8	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
2966	laxatives_8	Num	8		Did patient receive any laxatives this calendar date?
2967	laxativesc_8	Char	3	$3.	Did patient receive any laxatives this calendar date?
2968	narcoticsx_8	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
2969	paralyticsx_8	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
2970	prokineticsx_8	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
2971	antiemeticsx_8	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
2972	antidiarrhealsx_8	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
2973	laxativesx_8	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
2974	narcotics_9	Num	8		Did patient receive any narcotics this calendar date?
2975	narcoticsc_9	Char	3	$3.	Did patient receive any narcotics this calendar date?
2976	paralytics_9	Num	8		Did patient receive any paralytics this calendar date?
2977	paralyticsc_9	Char	3	$3.	Did patient receive any paralytics this calendar date?
2978	prokinetics_9	Num	8		Did patient receive any prokinetics this calendar date?
2979	prokineticsc_9	Char	3	$3.	Did patient receive any prokinetics this calendar date?
2980	antiemetics_9	Num	8		Did patient receive any anti-emetics this calendar date?
2981	antiemeticsc_9	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
2982	antidiarrheals_9	Num	8		Did patient receive any anti-diarrheals this calendar date?
2983	antidiarrhealsc_9	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
2984	laxatives_9	Num	8		Did patient receive any laxatives this calendar date?
2985	laxativesc_9	Char	3	$3.	Did patient receive any laxatives this calendar date?

Num	Variable	Type	Len	Format	Label
2986	narcoticsx_9	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
2987	paralyticsx_9	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
2988	prokineticsx_9	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
2989	antiemeticsx_9	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
2990	antidiarrhealsx_9	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
2991	laxativesx_9	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
2992	narcotics_10	Num	8		Did patient receive any narcotics this calendar date?
2993	narcoticsc_10	Char	3	$3.	Did patient receive any narcotics this calendar date?
2994	paralytics_10	Num	8		Did patient receive any paralytics this calendar date?
2995	paralyticsc_10	Char	3	$3.	Did patient receive any paralytics this calendar date?
2996	prokinetics_10	Num	8		Did patient receive any prokinetics this calendar date?
2997	prokineticsc_10	Char	3	$3.	Did patient receive any prokinetics this calendar date?
2998	antiemetics_10	Num	8		Did patient receive any anti-emetics this calendar date?
2999	antiemeticsc_10	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
3000	antidiarrheals_10	Num	8		Did patient receive any anti-diarrheals this calendar date?
3001	antidiarrhealsc_10	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
3002	laxatives_10	Num	8		Did patient receive any laxatives this calendar date?
3003	laxativesc_10	Char	3	$3.	Did patient receive any laxatives this calendar date?
3004	narcoticsx_10	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
3005	paralyticsx_10	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
3006	prokineticsx_10	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
3007	antiemeticsx_10	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
3008	antidiarrhealsx_10	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
3009	laxativesx_10	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
3010	narcotics_11	Num	8		Did patient receive any narcotics this calendar date?
3011	narcoticsc_11	Char	3	$3.	Did patient receive any narcotics this calendar date?
3012	paralytics_11	Num	8		Did patient receive any paralytics this calendar date?
3013	paralyticsc_11	Char	3	$3.	Did patient receive any paralytics this calendar date?
3014	prokinetics_11	Num	8		Did patient receive any prokinetics this calendar date?
3015	prokineticsc_11	Char	3	$3.	Did patient receive any prokinetics this calendar date?
3016	antiemetics_11	Num	8		Did patient receive any anti-emetics this calendar date?
3017	antiemeticsc_11	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
3018	antidiarrheals_11	Num	8		Did patient receive any anti-diarrheals this calendar date?

Num	Variable	Type	Len	Format	Label
3019	antidiarrhealsc_11	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
3020	laxatives_11	Num	8		Did patient receive any laxatives this calendar date?
3021	laxativesc_11	Char	3	$3.	Did patient receive any laxatives this calendar date?
3022	narcoticsx_11	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
3023	paralyticsx_11	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
3024	prokineticsx_11	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
3025	antiemeticsx_11	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
3026	antidiarrhealsx_11	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
3027	laxativesx_11	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
3028	narcotics_12	Num	8		Did patient receive any narcotics this calendar date?
3029	narcoticsc_12	Char	3	$3.	Did patient receive any narcotics this calendar date?
3030	paralytics_12	Num	8		Did patient receive any paralytics this calendar date?
3031	paralyticsc_12	Char	3	$3.	Did patient receive any paralytics this calendar date?
3032	prokinetics_12	Num	8		Did patient receive any prokinetics this calendar date?
3033	prokineticsc_12	Char	3	$3.	Did patient receive any prokinetics this calendar date?
3034	antiemetics_12	Num	8		Did patient receive any anti-emetics this calendar date?
3035	antiemeticsc_12	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
3036	antidiarrheals_12	Num	8		Did patient receive any anti-diarrheals this calendar date?
3037	antidiarrhealsc_12	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
3038	laxatives_12	Num	8		Did patient receive any laxatives this calendar date?
3039	laxativesc_12	Char	3	$3.	Did patient receive any laxatives this calendar date?
3040	narcoticsx_12	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
3041	paralyticsx_12	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
3042	prokineticsx_12	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
3043	antiemeticsx_12	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
3044	antidiarrhealsx_12	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
3045	laxativesx_12	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
3046	brussdt0	Num	8	BEST12.	Day 0 Date (Day)
3047	systbp0	Num	8		Day 0 Systolic BP
3048	pf0	Num	8		Day 0 PaO2/FiO2
3049	plate0	Num	8		Day 0 Platelets x1000
3050	creat0	Num	8		Day 0 Creatinine
3051	bili0	Num	8		Day 0 Bilirubin

Num	Variable	Type	Len	Format	Label
3052	vaso0	Num	8		Day 0 Vasopressor
3053	vaso0c	Char	3	$3.	Day 0 Vasopressor
3054	brussdtX0	Char	64	$64.	Day 0 Date (Not Done)
3055	brussX0	Char	64	$64.	Day 0 Brussels (Not Done)
3056	brussdt1	Num	8	BEST12.	Day 1 Date (Day)
3057	systbp1	Num	8		Day 1 Systolic BP
3058	pf1	Num	8		Day 1 PaO2/FiO2
3059	plate1	Num	8		Day 1 Platelets x1000
3060	creat1	Num	8		Day 1 Creatinine
3061	bili1	Num	8		Day 1 Bilirubin
3062	vaso1	Num	8		Day 1 Vasopressor
3063	vaso1c	Char	3	$3.	Day 1 Vasopressor
3064	brussdtX1	Char	64	$64.	Day 1 Date (Not Done)
3065	brussX1	Char	64	$64.	Day 1 Brussels (Not Done)
3066	brussdt2	Num	8	BEST12.	Day 2 Date (Day)
3067	systbp2	Num	8		Day 2 Systolic BP
3068	pf2	Num	8		Day 2 PaO2/FiO2
3069	plate2	Num	8		Day 2 Platelets x1000
3070	creat2	Num	8		Day 2 Creatinine
3071	bili2	Num	8		Day 2 Bilirubin
3072	vaso2	Num	8		Day 2 Vasopressor
3073	vaso2c	Char	3	$3.	Day 2 Vasopressor
3074	brussdtX2	Char	64	$64.	Day 2 Date (Not Done)
3075	brussX2	Char	64	$64.	Day 2 Brussels (Not Done)
3076	brussdt3	Num	8	BEST12.	Day 3 Date (Day)
3077	systbp3	Num	8		Day 3 Systolic BP
3078	pf3	Num	8		Day 3 PaO2/FiO2
3079	plate3	Num	8		Day 3 Platelets x1000
3080	creat3	Num	8		Day 3 Creatinine
3081	bili3	Num	8		Day 3 Bilirubin
3082	vaso3	Num	8		Day 3 Vasopressor
3083	vaso3c	Char	3	$3.	Day 3 Vasopressor
3084	brussdtX3	Char	64	$64.	Day 3 Date (Not Done)
3085	brussX3	Char	64	$64.	Day 3 Brussels (Not Done)
3086	brussdt4	Num	8	BEST12.	Day 4 Date (Day)
3087	systbp4	Num	8		Day 4 Systolic BP
3088	pf4	Num	8		Day 4 PaO2/FiO2
3089	plate4	Num	8		Day 4 Platelets x1000
3090	creat4	Num	8		Day 4 Creatinine

Num	Variable	Type	Len	Format	Label
3091	bili4	Num	8		Day 4 Bilirubin
3092	vaso4	Num	8		Day 4 Vasopressor
3093	vaso4c	Char	3	$3.	Day 4 Vasopressor
3094	brussdtX4	Char	64	$64.	Day 4 Date (Not Done)
3095	brussX4	Char	64	$64.	Day 4 Brussels (Not Done)
3096	brussdt5	Num	8	BEST12.	Day 5 Date (Day)
3097	systbp5	Num	8		Day 5 Systolic BP
3098	pf5	Num	8		Day 5 PaO2/FiO2
3099	plate5	Num	8		Day 5 Platelets x1000
3100	creat5	Num	8		Day 5 Creatinine
3101	bili5	Num	8		Day 5 Bilirubin
3102	vaso5	Num	8		Day 5 Vasopressor
3103	vaso5c	Char	3	$3.	Day 5 Vasopressor
3104	brussdtX5	Char	64	$64.	Day 5 Date (Not Done)
3105	brussX5	Char	64	$64.	Day 5 Brussels (Not Done)
3106	brussdt6	Num	8	BEST12.	Day 6 Date (Day)
3107	systbp6	Num	8		Day 6 Systolic BP
3108	pf6	Num	8		Day 6 PaO2/FiO2
3109	plate6	Num	8		Day 6 Platelets x1000
3110	creat6	Num	8		Day 6 Creatinine
3111	bili6	Num	8		Day 6 Bilirubin
3112	vaso6	Num	8		Day 6 Vasopressor
3113	vaso6c	Char	3	$3.	Day 6 Vasopressor
3114	brussdtX6	Char	64	$64.	Day 6 Date (Not Done)
3115	brussX6	Char	64	$64.	Day 6 Brussels (Not Done)
3116	brussdt7	Num	8	BEST12.	Day 7 Date (Day)
3117	systbp7	Num	8		Day 7 Systolic BP
3118	pf7	Num	8		Day 7 PaO2/FiO2
3119	plate7	Num	8		Day 7 Platelets x1000
3120	creat7	Num	8		Day 7 Creatinine
3121	bili7	Num	8		Day 7 Bilirubin
3122	vaso7	Num	8		Day 7 Vasopressor
3123	vaso7c	Char	3	$3.	Day 7 Vasopressor
3124	brussdtX7	Char	64	$64.	Day 7 Date (Not Done)
3125	brussX7	Char	64	$64.	Day 7 Brussels (Not Done)
3126	brussdt8	Num	8	BEST12.	Day 8 Date (Day)
3127	systbp8	Num	8		Day 8 Systolic BP
3128	pf8	Num	8		Day 8 PaO2/FiO2
3129	plate8	Num	8		Day 8 Platelets x1000

Num	Variable	Type	Len	Format	Label
3130	creat8	Num	8		Day 8 Creatinine
3131	bili8	Num	8		Day 8 Bilirubin
3132	vaso8	Num	8		Day 8 Vasopressor
3133	vaso8c	Char	3	$3.	Day 8 Vasopressor
3134	brussdtX8	Char	64	$64.	Day 8 Date (Not Done)
3135	brussX8	Char	64	$64.	Day 8 Brussels (Not Done)
3136	brussdt9	Num	8	BEST12.	Day 9 Date (Day)
3137	systbp9	Num	8		Day 9 Systolic BP
3138	pf9	Num	8		Day 9 PaO2/FiO2
3139	plate9	Num	8		Day 9 Platelets x1000
3140	creat9	Num	8		Day 9 Creatinine
3141	bili9	Num	8		Day 9 Bilirubin
3142	vaso9	Num	8		Day 9 Vasopressor
3143	vaso9c	Char	3	$3.	Day 9 Vasopressor
3144	brussdtX9	Char	64	$64.	Day 9 Date (Not Done)
3145	brussX9	Char	64	$64.	Day 9 Brussels (Not Done)
3146	brussdt10	Num	8	BEST12.	Day 10 Date (Day)
3147	systbp10	Num	8		Day 10 Systolic BP
3148	pf10	Num	8		Day 10 PaO2/FiO2
3149	plate10	Num	8		Day 10 Platelets x1000
3150	creat10	Num	8		Day 10 Creatinine
3151	bili10	Num	8		Day 10 Bilirubin
3152	vaso10	Num	8		Day 10 Vasopressor
3153	vaso10c	Char	3	$3.	Day 10 Vasopressor
3154	brussdtX10	Char	64	$64.	Day 10 Date (Not Done)
3155	brussX10	Char	64	$64.	Day 10 Brussels (Not Done)
3156	brussdt11	Num	8	BEST12.	Day 11 Date (Day)
3157	systbp11	Num	8		Day 11 Systolic BP
3158	pf11	Num	8		Day 11 PaO2/FiO2
3159	plate11	Num	8		Day 11 Platelets x1000
3160	creat11	Num	8		Day 11 Creatinine
3161	bili11	Num	8		Day 11 Bilirubin
3162	vaso11	Num	8		Day 11 Vasopressor
3163	brussdtX11	Char	64	$64.	Day 11 Date (Not Done)
3164	brussX11	Char	64	$64.	Day 11 Brussels (Not Done)
3165	vaso11c	Char	3	$3.	Day 11 Vasopressor
3166	brussdt12	Num	8	BEST12.	Day 12 Date (Day)
3167	systbp12	Num	8		Day 12 Systolic BP
3168	pf12	Num	8		Day 12 PaO2/FiO2

Num	Variable	Type	Len	Format	Label
3169	plate12	Num	8		Day 12 Platelets x1000
3170	creat12	Num	8		Day 12 Creatinine
3171	bili12	Num	8		Day 12 Bilirubin
3172	vaso12	Num	8		Day 12 Vasopressor
3173	vaso12c	Char	3	$3.	Day 12 Vasopressor
3174	brussdtX12	Char	64	$64.	Day 12 Date (Not Done)
3175	brussX12	Char	64	$64.	Day 12 Brussels (Not Done)
3176	brussdt13	Num	8	BEST12.	Day 13 Date (Day)
3177	systbp13	Num	8		Day 13 Systolic BP
3178	pf13	Num	8		Day 13 PaO2/FiO2
3179	plate13	Num	8		Day 13 Platelets x1000
3180	creat13	Num	8		Day 13 Creatinine
3181	bili13	Num	8		Day 13 Bilirubin
3182	vaso13	Num	8		Day 13 Vasopressor
3183	vaso13c	Char	3	$3.	Day 13 Vasopressor
3184	brussdtX13	Char	64	$64.	Day 13 Date (Not Done)
3185	brussX13	Char	64	$64.	Day 13 Brussels (Not Done)
3186	brussdt14	Num	8	BEST12.	Day 14 Date (Day)
3187	systbp14	Num	8		Day 14 Systolic BP
3188	pf14	Num	8		Day 14 PaO2/FiO2
3189	plate14	Num	8		Day 14 Platelets x1000
3190	creat14	Num	8		Day 14 Creatinine
3191	bili14	Num	8		Day 14 Bilirubin
3192	vaso14	Num	8		Day 14 Vasopressor
3193	vaso14c	Char	3	$3.	Day 14 Vasopressor
3194	brussdtX14	Char	64	$64.	Day 14 Date (Not Done)
3195	brussX14	Char	64	$64.	Day 14 Brussels (Not Done)
3196	brussdt15	Num	8	BEST12.	Day 15 Date (Day)
3197	systbp15	Num	8		Day 15 Systolic BP
3198	pf15	Num	8		Day 15 PaO2/FiO2
3199	plate15	Num	8		Day 15 Platelets x1000
3200	creat15	Num	8		Day 15 Creatinine
3201	bili15	Num	8		Day 15 Bilirubin
3202	vaso15	Num	8		Day 15 Vasopressor
3203	vaso15c	Char	3	$3.	Day 15 Vasopressor
3204	brussdtX15	Char	64	$64.	Day 15 Date (Not Done)
3205	brussX15	Char	64	$64.	Day 15 Brussels (Not Done)
3206	brussdt16	Num	8	BEST12.	Day 16 Date (Day)
3207	systbp16	Num	8		Day 16 Systolic BP

Num	Variable	Type	Len	Format	Label
3208	pf16	Num	8		Day 16 PaO2/FiO2
3209	plate16	Num	8		Day 16 Platelets x1000
3210	creat16	Num	8		Day 16 Creatinine
3211	bili16	Num	8		Day 16 Bilirubin
3212	vaso16	Num	8		Day 16 Vasopressor
3213	vaso16c	Char	3	$3.	Day 16 Vasopressor
3214	brussdtX16	Char	64	$64.	Day 16 Date (Not Done)
3215	brussX16	Char	64	$64.	Day 16 Brussels (Not Done)
3216	brussdt17	Num	8	BEST12.	Day 17 Date (Day)
3217	systbp17	Num	8		Day 17 Systolic BP
3218	pf17	Num	8		Day 17 PaO2/FiO2
3219	plate17	Num	8		Day 17 Platelets x1000
3220	creat17	Num	8		Day 17 Creatinine
3221	bili17	Num	8		Day 17 Bilirubin
3222	vaso17	Num	8		Day 17 Vasopressor
3223	vaso17c	Char	3	$3.	Day 17 Vasopressor
3224	brussdtX17	Char	64	$64.	Day 17 Date (Not Done)
3225	brussX17	Char	64	$64.	Day 17 Brussels (Not Done)
3226	brussdt18	Num	8	BEST12.	Day 18 Date (Day)
3227	systbp18	Num	8		Day 18 Systolic BP
3228	pf18	Num	8		Day 18 PaO2/FiO2
3229	plate18	Num	8		Day 18 Platelets x1000
3230	creat18	Num	8		Day 18 Creatinine
3231	bili18	Num	8		Day 18 Bilirubin
3232	vaso18	Num	8		Day 18 Vasopressor
3233	vaso18c	Char	3	$3.	Day 18 Vasopressor
3234	brussdtX18	Char	64	$64.	Day 18 Date (Not Done)
3235	brussX18	Char	64	$64.	Day 18 Brussels (Not Done)
3236	brussdt19	Num	8	BEST12.	Day 19 Date (Day)
3237	systbp19	Num	8		Day 19 Systolic BP
3238	pf19	Num	8		Day 19 PaO2/FiO2
3239	plate19	Num	8		Day 19 Platelets x1000
3240	creat19	Num	8		Day 19 Creatinine
3241	bili19	Num	8		Day 19 Bilirubin
3242	vaso19	Num	8		Day 19 Vasopressor
3243	vaso19c	Char	3	$3.	Day 19 Vasopressor
3244	brussdtX19	Char	64	$64.	Day 19 Date (Not Done)
3245	brussX19	Char	64	$64.	Day 19 Brussels (Not Done)
3246	brussdt20	Num	8	BEST12.	Day 20 Date (Day)

Num	Variable	Type	Len	Format	Label
3247	systbp20	Num	8		Day 20 Systolic BP
3248	pf20	Num	8		Day 20 PaO2/FiO2
3249	plate20	Num	8		Day 20 Platelets x1000
3250	creat20	Num	8		Day 20 Creatinine
3251	bili20	Num	8		Day 20 Bilirubin
3252	vaso20	Num	8		Day 20 Vasopressor
3253	vaso20c	Char	3	$3.	Day 20 Vasopressor
3254	brussdtX20	Char	64	$64.	Day 20 Date (Not Done)
3255	brussX20	Char	64	$64.	Day 20 Brussels (Not Done)
3256	brussdt21	Num	8	BEST12.	Day 21 Date (Day)
3257	systbp21	Num	8		Day 21 Systolic BP
3258	pf21	Num	8		Day 21 PaO2/FiO2
3259	plate21	Num	8		Day 21 Platelets x1000
3260	creat21	Num	8		Day 21 Creatinine
3261	bili21	Num	8		Day 21 Bilirubin
3262	vaso21	Num	8		Day 21 Vasopressor
3263	vaso21c	Char	3	$3.	Day 21 Vasopressor
3264	brussdtX21	Char	64	$64.	Day 21 Date (Not Done)
3265	brussX21	Char	64	$64.	Day 21 Brussels (Not Done)
3266	brussdt22	Num	8	BEST12.	Day 22 Date (Day)
3267	systbp22	Num	8		Day 22 Systolic BP
3268	pf22	Num	8		Day 22 PaO2/FiO2
3269	plate22	Num	8		Day 22 Platelets x1000
3270	creat22	Num	8		Day 22 Creatinine
3271	bili22	Num	8		Day 22 Bilirubin
3272	vaso22	Num	8		Day 22 Vasopressor
3273	vaso22c	Char	3	$3.	Day 22 Vasopressor
3274	brussdtX22	Char	64	$64.	Day 22 Date (Not Done)
3275	brussX22	Char	64	$64.	Day 22 Brussels (Not Done)
3276	brussdt23	Num	8	BEST12.	Day 23 Date (Day)
3277	systbp23	Num	8		Day 23 Systolic BP
3278	pf23	Num	8		Day 23 PaO2/FiO2
3279	plate23	Num	8		Day 23 Platelets x1000
3280	creat23	Num	8		Day 23 Creatinine
3281	bili23	Num	8		Day 23 Bilirubin
3282	vaso23	Num	8		Day 23 Vasopressor
3283	vaso23c	Char	3	$3.	Day 23 Vasopressor
3284	brussdtX23	Char	64	$64.	Day 23 Date (Not Done)
3285	brussX23	Char	64	$64.	Day 23 Brussels (Not Done)

Num	Variable	Type	Len	Format	Label
3286	brussdt24	Num	8	BEST12.	Day 24 Date (Day)
3287	systbp24	Num	8		Day 24 Systolic BP
3288	pf24	Num	8		Day 24 PaO2/FiO2
3289	plate24	Num	8		Day 24 Platelets x1000
3290	creat24	Num	8		Day 24 Creatinine
3291	bili24	Num	8		Day 24 Bilirubin
3292	vaso24	Num	8		Day 24 Vasopressor
3293	vaso24c	Char	3	$3.	Day 24 Vasopressor
3294	brussdtX24	Char	64	$64.	Day 24 Date (Not Done)
3295	brussX24	Char	64	$64.	Day 24 Brussels (Not Done)
3296	brussdt25	Num	8	BEST12.	Day 25 Date (Day)
3297	systbp25	Num	8		Day 25 Systolic BP
3298	pf25	Num	8		Day 25 PaO2/FiO2
3299	plate25	Num	8		Day 25 Platelets x1000
3300	creat25	Num	8		Day 25 Creatinine
3301	bili25	Num	8		Day 25 Bilirubin
3302	vaso25	Num	8		Day 25 Vasopressor
3303	vaso25c	Char	3	$3.	Day 25 Vasopressor
3304	brussdtX25	Char	64	$64.	Day 25 Date (Not Done)
3305	brussX25	Char	64	$64.	Day 25 Brussels (Not Done)
3306	brussdt26	Num	8	BEST12.	Day 26 Date (Day)
3307	systbp26	Num	8		Day 26 Systolic BP
3308	pf26	Num	8		Day 26 PaO2/FiO2
3309	plate26	Num	8		Day 26 Platelets x1000
3310	creat26	Num	8		Day 26 Creatinine
3311	bili26	Num	8		Day 26 Bilirubin
3312	vaso26	Num	8		Day 26 Vasopressor
3313	vaso26c	Char	3	$3.	Day 26 Vasopressor
3314	brussdtX26	Char	64	$64.	Day 26 Date (Not Done)
3315	brussX26	Char	64	$64.	Day 26 Brussels (Not Done)
3316	brussdt27	Num	8	BEST12.	Day 27 Date (Day)
3317	systbp27	Num	8		Day 27 Systolic BP
3318	pf27	Num	8		Day 27 PaO2/FiO2
3319	plate27	Num	8		Day 27 Platelets x1000
3320	creat27	Num	8		Day 27 Creatinine
3321	bili27	Num	8		Day 27 Bilirubin
3322	vaso27	Num	8		Day 27 Vasopressor
3323	vaso27c	Char	3	$3.	Day 27 Vasopressor
3324	brussdtX27	Char	64	$64.	Day 27 Date (Not Done)

Num	Variable	Type	Len	Format	Label
3325	brussX27	Char	64	$64.	Day 27 Brussels (Not Done)
3326	brussdt28	Num	8	BEST12.	Day 28 Date (Day)
3327	systbp28	Num	8		Day 28 Systolic BP
3328	pf28	Num	8		Day 28 PaO2/FiO2
3329	plate28	Num	8		Day 28 Platelets x1000
3330	creat28	Num	8		Day 28 Creatinine
3331	bili28	Num	8		Day 28 Bilirubin
3332	vaso28	Num	8		Day 28 Vasopressor
3333	vaso28c	Char	3	$3.	Day 28 Vasopressor
3334	brussdtX28	Char	64	$64.	Day 28 Date (Not Done)
3335	brussX28	Char	64	$64.	Day 28 Brussels (Not Done)
3336	bal0	Num	8		Mini-BAL completed?
3337	bal0c	Char	20	$20.	Mini-BAL completed?
3338	baldt0	Num	8	BEST12.	Date Mini-BAL completed (Day)
3339	balnotreas0	Char	255	$255.	Reason Mini-BAL not completed
3340	balvolin0	Num	8		Volume instilled
3341	balvolout0	Num	8		Volume returned
3342	balinr0	Num	8		INR value obtained within the 36 hours prior to BAL?
3343	balinr0c	Char	24	$24.	INR value obtained within the 36 hours prior to BAL?
3344	balinrle2_0	Num	8		Was INR value <= 2.0?
3345	balinrle2_0c	Char	23	$23.	Was INR value <= 2.0?
3346	balplate0	Num	8		Platelet value obtained in the 36 hours prior to BAL?
3347	balplate0c	Char	53	$53.	Platelet value obtained in the 36 hours prior to BAL?
3348	balplatege5_0	Num	8		Was platelet value >= 50*10^3/mm^3?
3349	balplatege5_0c	Char	23	$23.	Was platelet value >= 50*10^3/mm^3?
3350	bal3	Num	8		Mini-BAL completed?
3351	bal3c	Char	20	$20.	Mini-BAL completed?
3352	baldt3	Num	8	BEST12.	Date Mini-BAL completed (Day)
3353	balnotreas3	Char	255	$255.	Reason Mini-BAL not completed
3354	balvolin3	Num	8		Volume instilled
3355	balvolout3	Num	8		Volume returned
3356	balinr3	Num	8		INR value obtained within the 36 hours prior to BAL?
3357	balinr3c	Char	24	$24.	INR value obtained within the 36 hours prior to BAL?
3358	balinrle2_3	Num	8		Was INR value <= 2.0?
3359	balinrle2_3c	Char	23	$23.	Was INR value <= 2.0?
3360	balplate3	Num	8		Platelet value obtained in the 36 hours prior to BAL?
3361	balplate3c	Char	53	$53.	Platelet value obtained in the 36 hours prior to BAL?
3362	balplatege5_3	Num	8		Was platelet value >= 50*10^3/mm^3?
3363	balplatege5_3c	Char	23	$23.	Was platelet value >= 50*10^3/mm^3?

Num	Variable	Type	Len	Format	Label
3364	status	Num	8		Patient status (through Day 90):
3365	statusc	Char	69	$69.	Patient status (through Day 90):
3366	homedt	Num	8	BEST12.	Home with UAB, date: (Day)
3367	deathdt	Num	8	BEST12.	Dead prior to home with UAB, date: (Day)
3368	othstatdt	Num	8	BEST12.	Other, date of last known patient status: (Day)
3369	altapt	Num	8		ALTA patient?
3370	altaptc	Char	12	$12.	ALTA patient?
3371	altawdraw	Num	8		Was this patient permanently withdrawn from ALTA (through Day 28)?
3372	altawdrawc	Char	13	$13.	Was this patient permanently withdrawn from ALTA (through Day 28)?
3373	altawdrawdt	Num	8	BEST12.	Patient withdrawn from ALTA: Date (Day)
3374	altawdrawreas	Char	255	$255.	Patient withdrawn from ALTA: Reason
3375	eopt	Num	8		EDEN/Omega Patient?
3376	eoptc	Char	18	$18.	EDEN/Omega Patient?
3377	eowdraw	Num	8		Was this patient permanently withdrawn from EDEN/Omega (through Day 28)?
3378	eowdrawc	Char	13	$13.	Was this patient permanently withdrawn from EDEN/Omega (through Day 28)?
3379	eowdrawdt	Num	8	BEST12.	Patient withdrawn from EDEN/Omega: Date (Day)
3380	eowdrawreas	Char	255	$255.	Patient withdrawn from EDEN/Omega: Reason
3381	eoenroll	Num	8		If the patient was enrolled in EDEN/OMEGA study or Co-Enrolled
3382	eoenrollc	Char	25	$25.	If the patient was enrolled in EDEN/OMEGA study or Co-Enrolled
3383	eofullcal	Num	8		Did patient reach full-calorie enteral feeding rate?
3384	eofullcalc	Char	51	$51.	Did patient reach full-calorie enteral feeding rate?
3385	eofullcaldt	Num	8	BEST12.	Patient reach full-calorie enteral feeding rate: Date (Day)
3386	eofullcaltm	Num	8	TIME5.	Patient reach full-calorie enteral feeding rate: Date (Time)
3387	hospdc	Num	8		Was patient discharged alive from study hospital (through Day 90)?
3388	hospdcc	Char	10	$10.	Was patient discharged alive from study hospital (through Day 90)?
3389	hospdcdt	Num	8	BEST12.	If yes, give date: (Day)
3390	sbtcrit	Num	8		Did patient meet criteria for spontaneous breathing trial (SBT) before day 29?
3391	sbtcritc	Char	10	$10.	Did patient meet criteria for spontaneous breathing trial (SBT) before day 29?
3392	sbtcritdt	Num	8	BEST12.	If yes, enter date FIRST met criteria (Day)
3393	sbttol	Num	8		Did patient tolerate SBT?
3394	sbttolc	Char	10	$10.	Did patient tolerate SBT?
3395	sbttoldt	Num	8	BEST12.	Patient tolerated SBT, date & time (Day)

Num	Variable	Type	Len	Format	Label
3396	uab	Num	8		Did patient reach 48 hour UAB before day 29?
3397	uabc	Char	10	$10.	Did patient reach 48 hour UAB before day 29?
3398	uabdt	Num	8	BEST12.	Patient reached 48 hour UAB before day 29: Date (Day)
3399	extub	Num	8		Was patient extubated before day 29?
3400	extubc	Char	10	$10.	Was patient extubated before day 29?
3401	extubdt	Num	8	BEST12.	Patient extubated before day 29: Date (Day)
3402	trach	Num	8		Did Subject undergo tracheostomy prior to day 29?
3403	trachc	Char	10	$10.	Did Subject undergo tracheostomy prior to day 29?
3404	trachdt	Num	8	BEST12.	Subject underwent tracheostomy prior to day 29: Date (Day)
3405	discharge1	Num	8		Discharged from ICU?
3406	discharge1c	Char	20	$20.	Discharged from ICU?
3407	dischargedt1	Num	8	BEST12.	If yes, date of ICU DC: (Day)
3408	readmit1	Num	8		Readmitted to ICU?
3409	readmit1c	Char	29	$29.	Readmitted to ICU?
3410	readmitdt1	Num	8	BEST12.	If yes, date of ICU readmission: (Day)
3411	discharge2	Num	8		Discharged from ICU?
3412	discharge2c	Char	20	$20.	Discharged from ICU?
3413	dischargedt2	Num	8	BEST12.	If yes, date of ICU DC: (Day)
3414	readmit2	Num	8		Readmitted to ICU?
3415	readmit2c	Char	29	$29.	Readmitted to ICU?
3416	readmitdt2	Num	8	BEST12.	If yes, date of ICU readmission: (Day)
3417	discharge3	Num	8		Discharged from ICU?
3418	discharge3c	Char	20	$20.	Discharged from ICU?
3419	dischargedt3	Num	8	BEST12.	If yes, date of ICU DC: (Day)
3420	readmit3	Num	8		Readmitted to ICU?
3421	readmit3c	Char	29	$29.	Readmitted to ICU?
3422	readmitdt3	Num	8	BEST12.	If yes, date of ICU readmission: (Day)
3423	discharge4	Num	8		Discharged from ICU?
3424	discharge4c	Char	20	$20.	Discharged from ICU?
3425	dischargedt4	Num	8	BEST12.	If yes, date of ICU DC: (Day)
3426	readmit4	Num	8		Readmitted to ICU?
3427	readmit4c	Char	29	$29.	Readmitted to ICU?
3428	readmitdt4	Num	8	BEST12.	If yes, date of ICU readmission: (Day)
3429	discharge5	Num	8		Discharged from ICU?
3430	discharge5c	Char	20	$20.	Discharged from ICU?
3431	dischargedt5	Num	8	BEST12.	If yes, date of ICU DC: (Day)
3432	uab1	Num	8		Patient achieved unassisted breathing:
3433	uab1c	Char	69	$69.	Patient achieved unassisted breathing:
3434	uabdt1	Num	8	BEST12.	If yes, date of UAB (first date with no AB): (Day)

Num	Variable	Type	Len	Format	Label
3435	retab1	Num	8		Patient returned to assisted breathing?
3436	retab1c	Char	26	$26.	Patient returned to assisted breathing?
3437	retabdt1	Num	8	BEST12.	If yes, date of return to AB: (Day)
3438	uab2	Num	8		Patient achieved unassisted breathing again:
3439	uab2c	Char	61	$61.	Patient achieved unassisted breathing again:
3440	uabdt2	Num	8	BEST12.	If yes, date of UAB (2nd date with no AB): (Day)
3441	retab2	Num	8		Patient returned to assisted breathing?
3442	retab2c	Char	26	$26.	Patient returned to assisted breathing?
3443	retabdt2	Num	8	BEST12.	If yes, date of return to AB: (Day)
3444	uab3	Num	8		Patient achieved unassisted breathing again:
3445	uab3c	Char	61	$61.	Patient achieved unassisted breathing again:
3446	uabdt3	Num	8	BEST12.	If yes, date of UAB (3rd date with no AB): (Day)
3447	retab3	Num	8		Patient returned to assisted breathing?
3448	retab3c	Char	26	$26.	Patient returned to assisted breathing?
3449	retabdt3	Num	8	BEST12.	If yes, date of return to AB: (Day)
3450	uab4	Num	8		Patient achieved unassisted breathing again:
3451	uab4c	Char	61	$61.	Patient achieved unassisted breathing again:
3452	uabdt4	Num	8	BEST12.	If yes, date of UAB (4th date with no AB): (Day)
3453	dnr	Num	8		End of Life Decision-making (for all patients, alive or dead)
3454	dnrc	Char	59	$59.	End of Life Decision-making (for all patients, alive or dead)
3455	wconsent	Num	8		Was written consent obtained from subject during study hospitalization?
3456	wconsentc	Char	11	$11.	Was written consent obtained from subject during study hospitalization?
3457	wconsentreas	Num	8		Written consent not obtained: Reason
3458	wconsentreasc	Char	47	$47.	Written consent not obtained: Reason
3459	wconsentreasoth	Char	255	$255.	Written consent not obtained: Reason = Other
3460	dialysis	Num	8		Did patient require dialysis during study hospitalization?
3461	dialysisc	Char	3	$3.	Did patient require dialysis during study hospitalization?
3462	dialfirstdt	Num	8	BEST12.	Date of first dialysis: (Day)
3463	diallastdt	Num	8	BEST12.	Date of last dialysis during study hospitalization (Day)
3464	tpn	Num	8		Did the subject receive TPN during the EDEN Omega Study?
3465	tpnc	Char	3	$3.	Did the subject receive TPN during the EDEN Omega Study?
3466	statusx	Char	64	$64.	Patient Status (Not done)
3467	withdrawnX	Char	64	$64.	Patient Withdrawn (Not done)
3468	eoenrollX	Char	64	$64.	Did patient reach full-calorie enteral feeding rate? (Not Done)
3469	sbtcritx	Char	64	$64.	Did patient meet criteria for spontaneous breathing trial? (Not Done)
3470	sbttolx	Char	64	$64.	Patient tolerated SBT (Not Done)
3471	uabx	Char	64	$64.	Did patient reach 48 hour UAB before day 29? (Not Done)

Num	Variable	Type	Len	Format	Label
3472	extubX	Char	64	$64.	Patient extubated before day 29 (Not Done)
3473	trachX	Char	64	$64.	Was patient extubated before day 29? (Not Done)
3474	arrhyth	Num	8		Arrhythmias requiring treatment while on study drug?
3475	arrhythc	Char	3	$3.	Arrhythmias requiring treatment while on study drug?
3476	bowel	Num	8		Clinical evidence of bowel ischemia while on study drug?
3477	bowelc	Char	3	$3.	Clinical evidence of bowel ischemia while on study drug?
3478	mi	Num	8		Clinical evidence of MI while on study drug?
3479	mic	Char	3	$3.	Clinical evidence of MI while on study drug?
3480	myo	Num	8		Evidence in the medical record of myopathy?
3481	myoc	Char	3	$3.	Evidence in the medical record of myopathy?
3482	stroke	Num	8		Clinical evidence of ischemic stroke while on study drug?
3483	strokec	Char	3	$3.	Clinical evidence of ischemic stroke while on study drug?
3484	vte	Num	8		Clinical evidence of VTE while on study drug?
3485	vtec	Char	3	$3.	Clinical evidence of VTE while on study drug?
3486	highcreatdt	Num	8	BEST12.	Date of the highest creatinine from day 15 through day 28 (Day)
3487	highcreat	Char	255	$255.	value of the highest creatinine from day 15 through day 28
3488	vtex	Char	64	$64.	Clinical evidence of VTE while on study drug? (Not Done)
3489	mix	Char	64	$64.	Clinical evidence of MI while on study drug? (Not Done)
3490	bowelx	Char	64	$64.	Clinical evidence of bowel ischemia while on study drug? (Not Done)
3491	strokex	Char	64	$64.	Clinical evidence of ischemic stroke while on study drug? (Not Done)
3492	arrhythx	Char	64	$64.	Arrhythmias requiring treatment while on study drug? (Not Done)
3493	myox	Char	64	$64.	Evidence in the medical record of myopathy? (Not Done)
3494	highcreatx	Char	64	$64.	value of the highest creatinine from day 15 through day 28 (not done)
3495	cytocolldt0	Num	8	BEST12.	Day 0 Cytokine and coagulation parameters sample collected (Plasma) Date (Day)
3496	cytofrozdt0	Num	8	BEST12.	Day 0 Cytokine and coagulation parameters sample frozen (Plasma) Date (Day)
3497	cytoprocdt0	Num	8	BEST12.	Day 0 Cytokine and coagulation parameters sample processing initiated (Plasma) Date (Day)
3498	urinecolldt0	Num	8	BEST12.	Day 0 Urine sample Collected Date? (Day)
3499	urinefrozdt0	Num	8	BEST12.	Day 0 Urine sample Frozen Date? (Day)
3500	unrineprocdt0	Num	8	BEST12.	Day 0 Urine sample Processing Initiated Date? (Day)
3501	cyto0	Num	8		Day 0 Cytokine and coagulation parameters sample collected (Plasma)?
3502	cyto0c	Char	11	$11.	Day 0 Cytokine and coagulation parameters sample collected (Plasma)?
3503	cytoreas0	Char	255	$255.	Day 0 Cytokine not collected: Reason
3504	fattyacid0	Num	8		Day 0 Plasma fatty acids sample collected (Plasma)?

Num	Variable	Type	Len	Format	Label
3505	fattyacid0c	Char	26	$26.	Day 0 Plasma fatty acids sample collected (Plasma)?
3506	fattyacidreas0	Char	255	$255.	Day 0 Plasma fatty acids not collected: Reason
3507	epi0	Num	8		Day 0 Plasma epinephrine level sample collected (Plasma)?
3508	epi0c	Char	20	$20.	Day 0 Plasma epinephrine level sample collected (Plasma)?
3509	epireas0	Char	255	$255.	Day 0 Plasma epinephrine not collected: Reason
3510	urine0	Num	8		Day 0 Urine sample collected?
3511	urine0c	Char	11	$11.	Day 0 Urine sample collected?
3512	urinereas0	Char	255	$255.	Day 0 Urine not collected: Reason
3513	bloodcolldt0	Num	8	BEST12.	Day 0 Whole blood sample collected (Genetics) Date (Day)
3514	bloodfrozendt0	Num	8	BEST12.	Day 0 Whole blood sample collected (Genetics) frozen Date (Day)
3515	blood0	Num	8		Day 0 Whole blood sample collected (Genetics)?
3516	blood0c	Char	20	$20.	Day 0 Whole blood sample collected (Genetics)?
3517	bloodreas0	Char	255	$255.	Day 0 Whole blood sample not collected: Reason
3518	colldt1	Num	8	BEST12.	Date Day 1 Specimens Collected (Day)
3519	alb1	Num	8		Day 1 Plasma Albuterol level sample collected (Plasma)?
3520	alb1c	Char	20	$20.	Day 1 Plasma Albuterol level sample collected (Plasma)?
3521	albreas1	Char	255	$255.	Day 1 Plasma Albuterol level sample not collected: Reason
3522	epi1	Num	8		Day 1 Plasma epinephrine level sample collected (Plasma)?
3523	epi1c	Char	20	$20.	Day 1 Plasma epinephrine level sample collected (Plasma)?
3524	epireas1	Char	255	$255.	Day 1 Plasma epinephrine level sample not collected: Reason
3525	cytocolldt3	Num	8	BEST12.	Day 3 Cytokine and coagulation parameters sample collected (Plasma) Date (Day)
3526	cytofrozdt3	Num	8	BEST12.	Day 3 Cytokine and coagulation parameters sample frozen (Plasma) Date (Day)
3527	cytoprocdt3	Num	8	BEST12.	Day 3 Cytokine and coagulation parameters sample processing initiated (Plasma) Date (Day)
3528	cyto3	Num	8		Day 3 Cytokine and coagulation parameters sample collected (Plasma)?
3529	cyto3c	Char	20	$20.	Day 3 Cytokine and coagulation parameters sample collected (Plasma)?
3530	cytoreas3n	Char	255	$255.	Day 3 Cytokine not collected: Reason
3531	fattyacid3	Num	8		Day 3 Plasma fatty acids sample collected (Plasma)?
3532	fattyacid3c	Char	26	$26.	Day 3 Plasma fatty acids sample collected (Plasma)?
3533	fattyaciddt3	Num	8	BEST12.	Day 3 Plasma fatty acids: Date (Day)
3534	fattyacidreas3	Char	255	$255.	Day 3 Plasma fatty acids not collected: Reason
3535	unrinecolldt3	Num	8	BEST12.	Day 3 Urine sample Collected Date (Day)
3536	urinefrozdt3	Num	8	BEST12.	Day 3 Urine sample Frozen Date? (Day)
3537	urineprocdt3	Num	8	BEST12.	Day 3 Urine sample Processing Initiated Date (Day)
3538	urine3	Num	8		Day 3 Urine sample collected?
3539	urine3c	Char	20	$20.	Day 3 Urine sample collected?

Num	Variable	Type	Len	Format	Label
3540	urinereas3	Char	255	$255.	Day 3 Urine sample not collected: Reason
3541	cytocolldt6	Num	8	BEST12.	Day 6 Cytokine and coagulation parameters sample collected (Plasma) Date (Day)
3542	cytofrozdt6	Num	8	BEST12.	Day 6 Cytokine and coagulation parameters sample frozen (Plasma) Date (Day)
3543	cytoprocdt6	Num	8	BEST12.	Day 6 Cytokine and coagulation parameters sample processing initiated (Plasma) Date (Day)
3544	cyto6	Num	8		Day 6 Cytokine and coagulation parameters sample collected (Plasma)?
3545	cyto6c	Char	20	$20.	Day 6 Cytokine and coagulation parameters sample collected (Plasma)?
3546	cytoreas6	Char	255	$255.	Day 6 Cytokine not collected: Reason
3547	fattyacid6	Num	8		Day 6 Plasma fatty acids sample collected (Plasma)?
3548	fattyacid6c	Char	26	$26.	Day 6 Plasma fatty acids sample collected (Plasma)?
3549	fattyaciddt6	Num	8	BEST12.	Day 6 Plasma fatty acids: Date (Day)
3550	fattyacidreas6	Char	255	$255.	Day 6 Plasma fatty acids not collected: Reason
3551	urinecolldt6	Num	8	BEST12.	Day 6 Urine sample Collected Date (Day)
3552	urinefrozdt6	Num	8	BEST12.	Day 6 Urine sample Frozen Date (Day)
3553	urineprocdt6	Num	8	BEST12.	Day 6 Urine sample Processing Initiated Date (Day)
3554	urine6	Num	8		Day 6 Urine sample collected?
3555	urine6c	Char	20	$20.	Day 6 Urine sample collected?
3556	urinereas6	Char	255	$255.	Day 6 Urine sample not collected: Reason
3557	cytocolldt12	Num	8	BEST12.	Day 12 Cytokine and coagulation parameters sample collected (Plasma) Date (Day)
3558	cytoprocdt12	Num	8	BEST12.	Day 12 Cytokine and coagulation parameters sample processing initiated (Plasma) Date (Day)
3559	cytofrozdt12	Num	8	BEST12.	Day 12 Cytokine and coagulation parameters sample frozen (Plasma) Date (Day)
3560	cyto12	Num	8		Day 12 Cytokine and coagulation parameters sample collected (Plasma)?
3561	cyto12c	Char	20	$20.	Day 12 Cytokine and coagulation parameters sample collected (Plasma)?
3562	cytoreas12	Char	255	$255.	Day 12 Cytokine not collected: Reason
3563	fattyacid12	Num	8		Day 12 Plasma fatty acids sample collected (Plasma)?
3564	fattyacid12c	Char	26	$26.	Day 12 Plasma fatty acids sample collected (Plasma)?
3565	fattyaciddt12	Num	8	BEST12.	Day 12 Plasma fatty acids: Date (Day)
3566	fattyacidreas12	Char	255	$255.	Day 12 Plasma fatty acids not collected: Reason
3567	peakdt6	Num	8	BEST12.	DT_SPEC_COLL_DAY6_PEAK_COL_1 (Day)
3568	peaktm6	Num	8	TIME5.	DT_SPEC_COLL_DAY6_PEAK_COL_1 (Time)
3569	ptshipdt6	Num	8	BEST12.	Day 6 P&T samples shipped to Assay Lab Date (Day)
3570	troughdt6	Num	8	BEST12.	DT_SPEC_COLL_DAY6_TROUGH_C_1 (Day)
3571	troughtm6	Num	8	TIME5.	DT_SPEC_COLL_DAY6_TROUGH_C_1 (Time)

Num	Variable	Type	Len	Format	Label
3572	bloodstor0	Num	8		Day 0 Storage Temperature at -70 C or lower (+/- 10 degrees)?
3573	bloodstor0c	Char	11	$11.	Day 0 Storage Temperature at -70 C or lower (+/- 10 degrees)?
3574	bloodstorreas0	Char	255	$255.	Day 0 Storage Temperature at -70 C or lower : no reason
3575	bloodtube0	Num	8		Day 0 Tube Type:
3576	bloodtube0c	Char	13	$13.	Day 0 Tube Type:
3577	bloodtubeoth0	Char	255	$255.	Day 0 Tube Type Other:
3578	peakcollreas6	Char	255	$255.	Day 6 Peak level not collected reason?
3579	ptship6	Num	8		Day 6 P&T samples shipped to Assay Lab?
3580	ptship6c	Char	18	$18.	Day 6 P&T samples shipped to Assay Lab?
3581	ptshipreas6	Char	255	$255.	Day 6 P&T samples not shipped to Assay Lab Reason?
3582	colldt0x	Char	64	$64.	Day 0 Date (Not Done)
3583	cyto0x	Char	64	$64.	Day 0 Cytokine and coagulation parameters sample collected (Plasma) (Not Done)?
3584	fattyacid0x	Char	64	$64.	Day 0 Plasma fatty acids sample collected (Plasma)? (Not Done)
3585	urine0x	Char	64	$64.	Day 0 Urine sample collected? (Not Done)
3586	blood0x	Char	64	$64.	Day 0 Whole blood sample collected (Genetics)? (Not Done)
3587	cytocoll0x	Char	64	$64.	Day 0 Cytokine and coagulation parameters sample collected (Plasma) (Not Done)
3588	urinecoll0x	Char	64	$64.	Day 0 Urine sample Collected (Not Done)
3589	ND_SPEC_COLL_DAY0_BLOOD	Char	64	$64.	ND_SPEC_COLL_DAY0_BLOOD
3590	cyto3x	Char	64	$64.	Day 3 Cytokine and coagulation parameters sample processing initiated (Plasma) (Not Done)
3591	urine3x	Char	64	$64.	Day 3 Urine sample collected? (Not Done)
3592	cyto6x	Char	64	$64.	Day 6 Cytokine and coagulation parameters sample collected (Plasma) (Not Done)
3593	urine6x	Char	64	$64.	Day 6 Urine sample Collected (Not Done)
3594	cyto12x	Char	64	$64.	Day 12 Cytokine and coagulation parameters sample collected (Plasma) (Not Done)
3595	shock	Num	8	YES1NO0F.	
3596	cumfl_0	Num	8		
3597	cumfl_1	Num	8		
3598	cumfl_2	Num	8		
3599	cumfl_3	Num	8		
3600	cumfl_4	Num	8		
3601	cumfl_5	Num	8		
3602	cumfl_6	Num	8		
3603	cumfl_7	Num	8		
3604	cumfl_8	Num	8		
3605	flbal_0	Num	8		
3606	flbal_1	Num	8		

Num	Variable	Type	Len	Format	Label
3607	flbal_2	Num	8		
3608	flbal_3	Num	8		
3609	flbal_4	Num	8		
3610	flbal_5	Num	8		
3611	flbal_6	Num	8		
3612	flbal_7	Num	8		
3613	flbal_8	Num	8		
3614	hasdata0	Num	8		
3615	hasdata1	Num	8		
3616	hasdata2	Num	8		
3617	hasdata3	Num	8		
3618	hasdata4	Num	8		
3619	hasdata5	Num	8		
3620	hasdata6	Num	8		
3621	hasdata7	Num	8		
3622	hasdata8	Num	8		
3623	hasdata9	Num	8		
3624	hasdata10	Num	8		
3625	hasdata11	Num	8		
3626	hasdata12	Num	8		
3627	hasdata13	Num	8		
3628	hasdata14	Num	8		
3629	hasdata15	Num	8		
3630	hasdata16	Num	8		
3631	hasdata17	Num	8		
3632	hasdata18	Num	8		
3633	hasdata19	Num	8		
3634	hasdata20	Num	8		
3635	hasdata21	Num	8		
3636	hasdata22	Num	8		
3637	hasdata23	Num	8		
3638	hasdata24	Num	8		
3639	hasdata25	Num	8		
3640	hasdata26	Num	8		
3641	hasdata27	Num	8		
3642	hasdata28	Num	8		
3643	max_brussels_day	Num	8		
3644	fustatus	Num	8		Follow up status
3645	days2dth	Num	8		Days from randomization to death or last follow-up to day 60

Num	Variable	Type	Len	Format	Label
3646	death60	Num	8		Death during 60-day follow-up
3647	death90	Num	8		Death during 90-day follow-up
3648	pli	Char	25		Primary Lung Injury
3649	race_dsmb	Char	10		
3650	bal03	Num	8		
3651	minpotas	Num	8		
3652	minmg	Num	8		
3653	minphos	Num	8		
3654	hypok25	Num	8		Hypokalemia: Potassium<=2.5
3655	hypok30	Num	8		Hypokalemia: Potassium<=3.0
3656	hypoMg	Num	8		Hypomagnesemia: Magnesium<=1.5
3657	hypophos	Num	8		Hypophosphatemia: Phosphorus<=2.3
3658	deltacvp_1	Num	8		
3659	deltacvp_2	Num	8		
3660	deltacvp_3	Num	8		
3661	deltacvp_4	Num	8		
3662	deltacvp_5	Num	8		
3663	deltacvp_6	Num	8		
3664	deltacvp_7	Num	8		
3665	tidalvol_0	Num	8		
3666	tidalvol_1	Num	8		
3667	tidalvol_2	Num	8		
3668	tidalvol_3	Num	8		
3669	tidalvol_4	Num	8		
3670	tidalvol_7	Num	8		
3671	tidalvol_12	Num	8		
3672	tidalvol_21	Num	8		
3673	tidalvol_28	Num	8		
3674	proprateNZ	Num	8		
3675	totalvol_0	Num	8		
3676	totalvol_1	Num	8		
3677	totalvol_2	Num	8		
3678	totalvol_3	Num	8		
3679	totalvol_4	Num	8		
3680	totalvol_5	Num	8		
3681	totalvol_6	Num	8		
3682	totalvol_7	Num	8		
3683	totalvol_8	Num	8		
3684	totalvol_9	Num	8		

Num	Variable	Type	Len	Format	Label
3685	totalvol_10	Num	8		
3686	totalvol_11	Num	8		
3687	totalvol_12	Num	8		
3688	gastricpos_0	Num	8		
3689	gastricpos_1	Num	8		
3690	gastricpos_2	Num	8		
3691	gastricpos_3	Num	8		
3692	gastricpos_4	Num	8		
3693	gastricpos_5	Num	8		
3694	gastricpos_6	Num	8		
3695	gastricpos_7	Num	8		
3696	gastricpos_8	Num	8		
3697	gastricpos_9	Num	8		
3698	gastricpos_10	Num	8		
3699	gastricpos_11	Num	8		
3700	gastricpos_12	Num	8		
3701	apache	Num	8		
3702	vfd	Num	8		Vent Free Days
3703	vfd_status	Num	8		
3704	icufd	Num	8		ICU Free Days
3705	icu_query	Char	49		
3706	cardio_0	Num	8		
3707	cardio_1	Num	8		
3708	cardio_2	Num	8		
3709	cardio_3	Num	8		
3710	cardio_4	Num	8		
3711	cardio_5	Num	8		
3712	cardio_6	Num	8		
3713	cardio_7	Num	8		
3714	cardio_8	Num	8		
3715	cardio_9	Num	8		
3716	cardio_10	Num	8		
3717	cardio_11	Num	8		
3718	cardio_12	Num	8		
3719	cardio_13	Num	8		
3720	cardio_14	Num	8		
3721	cardio_15	Num	8		
3722	cardio_16	Num	8		
3723	cardio_17	Num	8		

Num	Variable	Type	Len	Format	Label
3724	cardio_18	Num	8		
3725	cardio_19	Num	8		
3726	cardio_20	Num	8		
3727	cardio_21	Num	8		
3728	cardio_22	Num	8		
3729	cardio_23	Num	8		
3730	cardio_24	Num	8		
3731	cardio_25	Num	8		
3732	cardio_26	Num	8		
3733	cardio_27	Num	8		
3734	cardio_28	Num	8		
3735	pulmon_0	Num	8		
3736	pulmon_1	Num	8		
3737	pulmon_2	Num	8		
3738	pulmon_3	Num	8		
3739	pulmon_4	Num	8		
3740	pulmon_5	Num	8		
3741	pulmon_6	Num	8		
3742	pulmon_7	Num	8		
3743	pulmon_8	Num	8		
3744	pulmon_9	Num	8		
3745	pulmon_10	Num	8		
3746	pulmon_11	Num	8		
3747	pulmon_12	Num	8		
3748	pulmon_13	Num	8		
3749	pulmon_14	Num	8		
3750	pulmon_15	Num	8		
3751	pulmon_16	Num	8		
3752	pulmon_17	Num	8		
3753	pulmon_18	Num	8		
3754	pulmon_19	Num	8		
3755	pulmon_20	Num	8		
3756	pulmon_21	Num	8		
3757	pulmon_22	Num	8		
3758	pulmon_23	Num	8		
3759	pulmon_24	Num	8		
3760	pulmon_25	Num	8		
3761	pulmon_26	Num	8		
3762	pulmon_27	Num	8		

Num	Variable	Type	Len	Format	Label
3763	pulmon_28	Num	8		
3764	cns_0	Num	8		
3765	cns_1	Num	8		
3766	cns_2	Num	8		
3767	cns_3	Num	8		
3768	cns_4	Num	8		
3769	cns_5	Num	8		
3770	cns_6	Num	8		
3771	cns_7	Num	8		
3772	cns_8	Num	8		
3773	cns_9	Num	8		
3774	cns_10	Num	8		
3775	cns_11	Num	8		
3776	cns_12	Num	8		
3777	cns_13	Num	8		
3778	cns_14	Num	8		
3779	cns_15	Num	8		
3780	cns_16	Num	8		
3781	cns_17	Num	8		
3782	cns_18	Num	8		
3783	cns_19	Num	8		
3784	cns_20	Num	8		
3785	cns_21	Num	8		
3786	cns_22	Num	8		
3787	cns_23	Num	8		
3788	cns_24	Num	8		
3789	cns_25	Num	8		
3790	cns_26	Num	8		
3791	cns_27	Num	8		
3792	cns_28	Num	8		
3793	coag_0	Num	8		
3794	coag_1	Num	8		
3795	coag_2	Num	8		
3796	coag_3	Num	8		
3797	coag_4	Num	8		
3798	coag_5	Num	8		
3799	coag_6	Num	8		
3800	coag_7	Num	8		
3801	coag_8	Num	8		

Num	Variable	Type	Len	Format	Label
3802	coag_9	Num	8		
3803	coag_10	Num	8		
3804	coag_11	Num	8		
3805	coag_12	Num	8		
3806	coag_13	Num	8		
3807	coag_14	Num	8		
3808	coag_15	Num	8		
3809	coag_16	Num	8		
3810	coag_17	Num	8		
3811	coag_18	Num	8		
3812	coag_19	Num	8		
3813	coag_20	Num	8		
3814	coag_21	Num	8		
3815	coag_22	Num	8		
3816	coag_23	Num	8		
3817	coag_24	Num	8		
3818	coag_25	Num	8		
3819	coag_26	Num	8		
3820	coag_27	Num	8		
3821	coag_28	Num	8		
3822	renal_0	Num	8		
3823	renal_1	Num	8		
3824	renal_2	Num	8		
3825	renal_3	Num	8		
3826	renal_4	Num	8		
3827	renal_5	Num	8		
3828	renal_6	Num	8		
3829	renal_7	Num	8		
3830	renal_8	Num	8		
3831	renal_9	Num	8		
3832	renal_10	Num	8		
3833	renal_11	Num	8		
3834	renal_12	Num	8		
3835	renal_13	Num	8		
3836	renal_14	Num	8		
3837	renal_15	Num	8		
3838	renal_16	Num	8		
3839	renal_17	Num	8		
3840	renal_18	Num	8		

Num	Variable	Type	Len	Format	Label
3841	renal_19	Num	8		
3842	renal_20	Num	8		
3843	renal_21	Num	8		
3844	renal_22	Num	8		
3845	renal_23	Num	8		
3846	renal_24	Num	8		
3847	renal_25	Num	8		
3848	renal_26	Num	8		
3849	renal_27	Num	8		
3850	renal_28	Num	8		
3851	hepatic_0	Num	8		
3852	hepatic_1	Num	8		
3853	hepatic_2	Num	8		
3854	hepatic_3	Num	8		
3855	hepatic_4	Num	8		
3856	hepatic_5	Num	8		
3857	hepatic_6	Num	8		
3858	hepatic_7	Num	8		
3859	hepatic_8	Num	8		
3860	hepatic_9	Num	8		
3861	hepatic_10	Num	8		
3862	hepatic_11	Num	8		
3863	hepatic_12	Num	8		
3864	hepatic_13	Num	8		
3865	hepatic_14	Num	8		
3866	hepatic_15	Num	8		
3867	hepatic_16	Num	8		
3868	hepatic_17	Num	8		
3869	hepatic_18	Num	8		
3870	hepatic_19	Num	8		
3871	hepatic_20	Num	8		
3872	hepatic_21	Num	8		
3873	hepatic_22	Num	8		
3874	hepatic_23	Num	8		
3875	hepatic_24	Num	8		
3876	hepatic_25	Num	8		
3877	hepatic_26	Num	8		
3878	hepatic_27	Num	8		
3879	hepatic_28	Num	8		

Num	Variable	Type	Len	Format	Label
3880	orgfree_0	Num	8		
3881	orgfree_1	Num	8		
3882	orgfree_2	Num	8		
3883	orgfree_3	Num	8		
3884	orgfree_4	Num	8		
3885	orgfree_5	Num	8		
3886	orgfree_6	Num	8		
3887	orgfree_7	Num	8		
3888	orgfree_8	Num	8		
3889	orgfree_9	Num	8		
3890	orgfree_10	Num	8		
3891	orgfree_11	Num	8		
3892	orgfree_12	Num	8		
3893	orgfree_13	Num	8		
3894	orgfree_14	Num	8		
3895	orgfree_15	Num	8		
3896	orgfree_16	Num	8		
3897	orgfree_17	Num	8		
3898	orgfree_18	Num	8		
3899	orgfree_19	Num	8		
3900	orgfree_20	Num	8		
3901	orgfree_21	Num	8		
3902	orgfree_22	Num	8		
3903	orgfree_23	Num	8		
3904	orgfree_24	Num	8		
3905	orgfree_25	Num	8		
3906	orgfree_26	Num	8		
3907	orgfree_27	Num	8		
3908	orgfree_28	Num	8		
3909	cardio7	Num	8		
3910	cardio28	Num	8		
3911	pulmon7	Num	8		
3912	pulmon28	Num	8		
3913	cns7	Num	8		
3914	cns28	Num	8		
3915	coag7	Num	8		
3916	coag28	Num	8		
3917	renal7	Num	8		
3918	renal28	Num	8		

Num	Variable	Type	Len	Format	Label
3919	hepatic7	Num	8		
3920	hepatic28	Num	8		
3921	orgfree7	Num	8		
3922	orgfree28	Num	8		
3923	orgfail	Num	8		
3924	micu	Num	8		
3925	fio2abg_0	Num	8		
3926	pao2abg_0	Num	8		
3927	paco2abg_0	Num	8		
3928	phabg_0	Num	8		
3929	posvap	Num	8		Presence of Ventilator Associated Pneumonia
3930	posblcult	Num	8		Positive Blood Culture
3931	poscdif	Num	8		Positive Clostridium Dificile Culture
3932	oi_0	Num	8		
3933	oi_1	Num	8		
3934	oi_2	Num	8		
3935	oi_3	Num	8		
3936	oi_4	Num	8		
3937	oi_7	Num	8		
3938	oi_12	Num	8		
3939	oi_21	Num	8		
3940	oi_28	Num	8		
3941	cstat_0	Num	8		
3942	cstat_1	Num	8		
3943	cstat_2	Num	8		
3944	cstat_3	Num	8		
3945	cstat_4	Num	8		
3946	cstat_7	Num	8		
3947	cstat_12	Num	8		
3948	cstat_21	Num	8		
3949	cstat_28	Num	8		
3950	i	Num	8		
3951	fustatus90	Num	8	FUSTA90F.	
3952	totalcal_0	Num	8		
3953	totalcal_1	Num	8		
3954	totalcal_2	Num	8		
3955	totalcal_3	Num	8		
3956	totalcal_4	Num	8		
3957	totalcal_5	Num	8		

Num	Variable	Type	Len	Format	Label
3958	totalcal_6	Num	8		
3959	totalcal_7	Num	8		
3960	totalcal_8	Num	8		
3961	totalcal_9	Num	8		
3962	totalcal_10	Num	8		
3963	totalcal_11	Num	8		
3964	totalcal_12	Num	8		
3965	day6_total	Num	8		
3966	day6_goal	Num	8		
3967	day6_volpct	Num	8		
3968	volpct70	Num	8		
3969	volpct_0	Num	8		
3970	volpct_1	Num	8		
3971	volpct_2	Num	8		
3972	volpct_3	Num	8		
3973	volpct_4	Num	8		
3974	volpct_5	Num	8		
3975	volpct_6	Num	8		
3976	volpct_7	Num	8		
3977	volpct_8	Num	8		
3978	volpct_9	Num	8		
3979	volpct_10	Num	8		
3980	volpct_11	Num	8		
3981	volpct_12	Num	8		
3982	bmi	Num	8		
3983	dummy_subject	Num	8		
3984	intub_to_rand	Num	8		
3985	ali_to_rand	Num	8		
3986	intub_to_rand_cat	Num	8		
3987	ali_to_rand_cat	Num	8		
3988	bmi_cat	Num	8	BMI_CAT.	

Data Set Name: cardiac.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	nocardiac	Num	8		None
16	nocardiacc	Char	4	$4.	None
17	vfib	Num	8		Ventricular fibrillation
18	vfibc	Char	24	$24.	Ventricular fibrillation
19	vtachdc	Num	8		Ventricular tachycardia requiring DC cardioversion
20	vtachdcc	Char	50	$50.	Ventricular tachycardia requiring DC cardioversion
21	vtachmi	Num	8		Ventricular tachycardia requiring medical intervention
22	vtachmic	Char	54	$54.	Ventricular tachycardia requiring medical intervention
23	svtdc	Num	8		SVT requiring DC cardioversion
24	svtdcc	Char	30	$30.	SVT requiring DC cardioversion
25	svtmi	Num	8		SVT requiring medical intervention
26	svtmic	Char	34	$34.	SVT requiring medical intervention
27	afibnt	Num	8		New onset atrial fibrillation (no treatment required)
28	afibntc	Char	53	$53.	New onset atrial fibrillation (no treatment required)
29	afibdc	Num	8		New onset atrial fibrillation requiring DC cardioversion
30	afibdcc	Char	56	$56.	New onset atrial fibrillation requiring DC cardioversion
31	afibmi	Num	8		New onset atrial fibrillation requiring medical intervention
32	afibmic	Char	60	$60.	New onset atrial fibrillation requiring medical intervention

Data Set Name: cardiac_events.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	arrhythmia	Char	100		
3	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
4	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
5	altapatient	Num	8		
6	omegapatient	Num	8		
7	edenpatient	Num	8		
8	alta	Char	20		
9	altachar	Char	20		
10	omega	Char	20		
11	omegachar	Char	20		
12	eden	Char	20	$EDENHID.	
13	edenchar	Char	12		EDEN
14	visit	Num	8		
15	visitname	Char	1024	$1024.	Visit Name
16	event_type	Num	8		

Data Set Name: con_meds.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	index	Num	8		Form index
15	visitname	Char	1024	$1024.	Visit Name
16	narcotics	Num	8		Did patient receive any narcotics this calendar date?
17	narcoticsc	Char	3	$3.	Did patient receive any narcotics this calendar date?
18	paralytics	Num	8		Did patient receive any paralytics this calendar date?
19	paralyticsc	Char	3	$3.	Did patient receive any paralytics this calendar date?
20	prokinetics	Num	8		Did patient receive any prokinetics this calendar date?
21	prokineticsc	Char	3	$3.	Did patient receive any prokinetics this calendar date?
22	antiemetics	Num	8		Did patient receive any anti-emetics this calendar date?
23	antiemeticsc	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
24	antidiarrheals	Num	8		Did patient receive any anti-diarrheals this calendar date?
25	antidiarrhealsc	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
26	laxatives	Num	8		Did patient receive any laxatives this calendar date?
27	laxativesc	Char	3	$3.	Did patient receive any laxatives this calendar date?
28	narcoticsx	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
29	paralyticsx	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
30	prokineticsx	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
31	antiemeticsx	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
32	antidiarrhealsx	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
33	laxativesx	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)

Data Set Name: conmednums.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	index	Num	8		
14	narcotics_1	Num	8		Did patient receive any narcotics this calendar date?
15	narcoticsc_1	Char	3	$3.	Did patient receive any narcotics this calendar date?
16	paralytics_1	Num	8		Did patient receive any paralytics this calendar date?
17	paralyticsc_1	Char	3	$3.	Did patient receive any paralytics this calendar date?
18	prokinetics_1	Num	8		Did patient receive any prokinetics this calendar date?
19	prokineticsc_1	Char	3	$3.	Did patient receive any prokinetics this calendar date?
20	antiemetics_1	Num	8		Did patient receive any anti-emetics this calendar date?
21	antiemeticsc_1	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
22	antidiarrheals_1	Num	8		Did patient receive any anti-diarrheals this calendar date?
23	antidiarrhealsc_1	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
24	laxatives_1	Num	8		Did patient receive any laxatives this calendar date?
25	laxativesc_1	Char	3	$3.	Did patient receive any laxatives this calendar date?
26	narcoticsx_1	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
27	paralyticsx_1	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
28	prokineticsx_1	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
29	antiemeticsx_1	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
30	antidiarrhealsx_1	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
31	laxativesx_1	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
32	narcotics_2	Num	8		Did patient receive any narcotics this calendar date?
33	narcoticsc_2	Char	3	$3.	Did patient receive any narcotics this calendar date?
34	paralytics_2	Num	8		Did patient receive any paralytics this calendar date?
35	paralyticsc_2	Char	3	$3.	Did patient receive any paralytics this calendar date?
36	prokinetics_2	Num	8		Did patient receive any prokinetics this calendar date?

Num	Variable	Type	Len	Format	Label
37	prokineticsc_2	Char	3	$3.	Did patient receive any prokinetics this calendar date?
38	antiemetics_2	Num	8		Did patient receive any anti-emetics this calendar date?
39	antiemeticsc_2	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
40	antidiarrheals_2	Num	8		Did patient receive any anti-diarrheals this calendar date?
41	antidiarrhealsc_2	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
42	laxatives_2	Num	8		Did patient receive any laxatives this calendar date?
43	laxativesc_2	Char	3	$3.	Did patient receive any laxatives this calendar date?
44	narcoticsx_2	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
45	paralyticsx_2	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
46	prokineticsx_2	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
47	antiemeticsx_2	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
48	antidiarrhealsx_2	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
49	laxativesx_2	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
50	narcotics_3	Num	8		Did patient receive any narcotics this calendar date?
51	narcoticsc_3	Char	3	$3.	Did patient receive any narcotics this calendar date?
52	paralytics_3	Num	8		Did patient receive any paralytics this calendar date?
53	paralyticsc_3	Char	3	$3.	Did patient receive any paralytics this calendar date?
54	prokinetics_3	Num	8		Did patient receive any prokinetics this calendar date?
55	prokineticsc_3	Char	3	$3.	Did patient receive any prokinetics this calendar date?
56	antiemetics_3	Num	8		Did patient receive any anti-emetics this calendar date?
57	antiemeticsc_3	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
58	antidiarrheals_3	Num	8		Did patient receive any anti-diarrheals this calendar date?
59	antidiarrhealsc_3	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
60	laxatives_3	Num	8		Did patient receive any laxatives this calendar date?
61	laxativesc_3	Char	3	$3.	Did patient receive any laxatives this calendar date?
62	narcoticsx_3	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
63	paralyticsx_3	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
64	prokineticsx_3	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
65	antiemeticsx_3	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
66	antidiarrhealsx_3	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
67	laxativesx_3	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
68	narcotics_4	Num	8		Did patient receive any narcotics this calendar date?
69	narcoticsc_4	Char	3	$3.	Did patient receive any narcotics this calendar date?
70	paralytics_4	Num	8		Did patient receive any paralytics this calendar date?
71	paralyticsc_4	Char	3	$3.	Did patient receive any paralytics this calendar date?
72	prokinetics_4	Num	8		Did patient receive any prokinetics this calendar date?
73	prokineticsc_4	Char	3	$3.	Did patient receive any prokinetics this calendar date?
74	antiemetics_4	Num	8		Did patient receive any anti-emetics this calendar date?
75	antiemeticsc_4	Char	3	$3.	Did patient receive any anti-emetics this calendar date?

Num	Variable	Type	Len	Format	Label
76	antidiarrheals_4	Num	8		Did patient receive any anti-diarrheals this calendar date?
77	antidiarrhealsc_4	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
78	laxatives_4	Num	8		Did patient receive any laxatives this calendar date?
79	laxativesc_4	Char	3	$3.	Did patient receive any laxatives this calendar date?
80	narcoticsx_4	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
81	paralyticsx_4	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
82	prokineticsx_4	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
83	antiemeticsx_4	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
84	antidiarrhealsx_4	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
85	laxativesx_4	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
86	narcotics_5	Num	8		Did patient receive any narcotics this calendar date?
87	narcoticsc_5	Char	3	$3.	Did patient receive any narcotics this calendar date?
88	paralytics_5	Num	8		Did patient receive any paralytics this calendar date?
89	paralyticsc_5	Char	3	$3.	Did patient receive any paralytics this calendar date?
90	prokinetics_5	Num	8		Did patient receive any prokinetics this calendar date?
91	prokineticsc_5	Char	3	$3.	Did patient receive any prokinetics this calendar date?
92	antiemetics_5	Num	8		Did patient receive any anti-emetics this calendar date?
93	antiemeticsc_5	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
94	antidiarrheals_5	Num	8		Did patient receive any anti-diarrheals this calendar date?
95	antidiarrhealsc_5	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
96	laxatives_5	Num	8		Did patient receive any laxatives this calendar date?
97	laxativesc_5	Char	3	$3.	Did patient receive any laxatives this calendar date?
98	narcoticsx_5	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
99	paralyticsx_5	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
100	prokineticsx_5	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
101	antiemeticsx_5	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
102	antidiarrhealsx_5	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
103	laxativesx_5	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
104	narcotics_6	Num	8		Did patient receive any narcotics this calendar date?
105	narcoticsc_6	Char	3	$3.	Did patient receive any narcotics this calendar date?
106	paralytics_6	Num	8		Did patient receive any paralytics this calendar date?
107	paralyticsc_6	Char	3	$3.	Did patient receive any paralytics this calendar date?
108	prokinetics_6	Num	8		Did patient receive any prokinetics this calendar date?
109	prokineticsc_6	Char	3	$3.	Did patient receive any prokinetics this calendar date?
110	antiemetics_6	Num	8		Did patient receive any anti-emetics this calendar date?
111	antiemeticsc_6	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
112	antidiarrheals_6	Num	8		Did patient receive any anti-diarrheals this calendar date?
113	antidiarrhealsc_6	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
114	laxatives_6	Num	8		Did patient receive any laxatives this calendar date?

Num	Variable	Type	Len	Format	Label
115	laxativesc_6	Char	3	$3.	Did patient receive any laxatives this calendar date?
116	narcoticsx_6	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
117	paralyticsx_6	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
118	prokineticsx_6	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
119	antiemeticsx_6	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
120	antidiarrhealsx_6	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
121	laxativesx_6	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
122	narcotics_7	Num	8		Did patient receive any narcotics this calendar date?
123	narcoticsc_7	Char	3	$3.	Did patient receive any narcotics this calendar date?
124	paralytics_7	Num	8		Did patient receive any paralytics this calendar date?
125	paralyticsc_7	Char	3	$3.	Did patient receive any paralytics this calendar date?
126	prokinetics_7	Num	8		Did patient receive any prokinetics this calendar date?
127	prokineticsc_7	Char	3	$3.	Did patient receive any prokinetics this calendar date?
128	antiemetics_7	Num	8		Did patient receive any anti-emetics this calendar date?
129	antiemeticsc_7	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
130	antidiarrheals_7	Num	8		Did patient receive any anti-diarrheals this calendar date?
131	antidiarrhealsc_7	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
132	laxatives_7	Num	8		Did patient receive any laxatives this calendar date?
133	laxativesc_7	Char	3	$3.	Did patient receive any laxatives this calendar date?
134	narcoticsx_7	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
135	paralyticsx_7	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
136	prokineticsx_7	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
137	antiemeticsx_7	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
138	antidiarrhealsx_7	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
139	laxativesx_7	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
140	narcotics_8	Num	8		Did patient receive any narcotics this calendar date?
141	narcoticsc_8	Char	3	$3.	Did patient receive any narcotics this calendar date?
142	paralytics_8	Num	8		Did patient receive any paralytics this calendar date?
143	paralyticsc_8	Char	3	$3.	Did patient receive any paralytics this calendar date?
144	prokinetics_8	Num	8		Did patient receive any prokinetics this calendar date?
145	prokineticsc_8	Char	3	$3.	Did patient receive any prokinetics this calendar date?
146	antiemetics_8	Num	8		Did patient receive any anti-emetics this calendar date?
147	antiemeticsc_8	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
148	antidiarrheals_8	Num	8		Did patient receive any anti-diarrheals this calendar date?
149	antidiarrhealsc_8	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
150	laxatives_8	Num	8		Did patient receive any laxatives this calendar date?
151	laxativesc_8	Char	3	$3.	Did patient receive any laxatives this calendar date?
152	narcoticsx_8	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
153	paralyticsx_8	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)

Num	Variable	Type	Len	Format	Label
154	prokineticsx_8	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
155	antiemeticsx_8	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
156	antidiarrhealsx_8	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
157	laxativesx_8	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
158	narcotics_9	Num	8		Did patient receive any narcotics this calendar date?
159	narcoticsc_9	Char	3	$3.	Did patient receive any narcotics this calendar date?
160	paralytics_9	Num	8		Did patient receive any paralytics this calendar date?
161	paralyticsc_9	Char	3	$3.	Did patient receive any paralytics this calendar date?
162	prokinetics_9	Num	8		Did patient receive any prokinetics this calendar date?
163	prokineticsc_9	Char	3	$3.	Did patient receive any prokinetics this calendar date?
164	antiemetics_9	Num	8		Did patient receive any anti-emetics this calendar date?
165	antiemeticsc_9	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
166	antidiarrheals_9	Num	8		Did patient receive any anti-diarrheals this calendar date?
167	antidiarrhealsc_9	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
168	laxatives_9	Num	8		Did patient receive any laxatives this calendar date?
169	laxativesc_9	Char	3	$3.	Did patient receive any laxatives this calendar date?
170	narcoticsx_9	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
171	paralyticsx_9	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
172	prokineticsx_9	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
173	antiemeticsx_9	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
174	antidiarrhealsx_9	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
175	laxativesx_9	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
176	narcotics_10	Num	8		Did patient receive any narcotics this calendar date?
177	narcoticsc_10	Char	3	$3.	Did patient receive any narcotics this calendar date?
178	paralytics_10	Num	8		Did patient receive any paralytics this calendar date?
179	paralyticsc_10	Char	3	$3.	Did patient receive any paralytics this calendar date?
180	prokinetics_10	Num	8		Did patient receive any prokinetics this calendar date?
181	prokineticsc_10	Char	3	$3.	Did patient receive any prokinetics this calendar date?
182	antiemetics_10	Num	8		Did patient receive any anti-emetics this calendar date?
183	antiemeticsc_10	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
184	antidiarrheals_10	Num	8		Did patient receive any anti-diarrheals this calendar date?
185	antidiarrhealsc_10	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
186	laxatives_10	Num	8		Did patient receive any laxatives this calendar date?
187	laxativesc_10	Char	3	$3.	Did patient receive any laxatives this calendar date?
188	narcoticsx_10	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
189	paralyticsx_10	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
190	prokineticsx_10	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
191	antiemeticsx_10	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
192	antidiarrhealsx_10	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)

Num	Variable	Type	Len	Format	Label
193	laxativesx_10	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
194	narcotics_11	Num	8		Did patient receive any narcotics this calendar date?
195	narcoticsc_11	Char	3	$3.	Did patient receive any narcotics this calendar date?
196	paralytics_11	Num	8		Did patient receive any paralytics this calendar date?
197	paralyticsc_11	Char	3	$3.	Did patient receive any paralytics this calendar date?
198	prokinetics_11	Num	8		Did patient receive any prokinetics this calendar date?
199	prokineticsc_11	Char	3	$3.	Did patient receive any prokinetics this calendar date?
200	antiemetics_11	Num	8		Did patient receive any anti-emetics this calendar date?
201	antiemeticsc_11	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
202	antidiarrheals_11	Num	8		Did patient receive any anti-diarrheals this calendar date?
203	antidiarrhealsc_11	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
204	laxatives_11	Num	8		Did patient receive any laxatives this calendar date?
205	laxativesc_11	Char	3	$3.	Did patient receive any laxatives this calendar date?
206	narcoticsx_11	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
207	paralyticsx_11	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
208	prokineticsx_11	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
209	antiemeticsx_11	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
210	antidiarrhealsx_11	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
211	laxativesx_11	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
212	narcotics_12	Num	8		Did patient receive any narcotics this calendar date?
213	narcoticsc_12	Char	3	$3.	Did patient receive any narcotics this calendar date?
214	paralytics_12	Num	8		Did patient receive any paralytics this calendar date?
215	paralyticsc_12	Char	3	$3.	Did patient receive any paralytics this calendar date?
216	prokinetics_12	Num	8		Did patient receive any prokinetics this calendar date?
217	prokineticsc_12	Char	3	$3.	Did patient receive any prokinetics this calendar date?
218	antiemetics_12	Num	8		Did patient receive any anti-emetics this calendar date?
219	antiemeticsc_12	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
220	antidiarrheals_12	Num	8		Did patient receive any anti-diarrheals this calendar date?
221	antidiarrhealsc_12	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
222	laxatives_12	Num	8		Did patient receive any laxatives this calendar date?
223	laxativesc_12	Char	3	$3.	Did patient receive any laxatives this calendar date?
224	narcoticsx_12	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
225	paralyticsx_12	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
226	prokineticsx_12	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
227	antiemeticsx_12	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
228	antidiarrhealsx_12	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
229	laxativesx_12	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
230	narcotics_0	Num	8		
231	paralytics_0	Num	8		

Num	Variable	Type	Len	Format	Label
232	prokinetics_0	Num	8		
233	antiemetics_0	Num	8		
234	antidiarrheals_0	Num	8		
235	laxatives_0	Num	8		
236	n_days	Num	8		N days
237	n_narc	Num	8		Narcotics
238	n_paral	Num	8		Paralytics
239	n_prok	Num	8		Prokinetics
240	n_antie	Num	8		Antiemetics
241	n_antid	Num	8		Antidiarrheals
242	n_lax	Num	8		Laxatives
243	nostratvar	Num	8		

Data Set Name: conmeds_eo_bypt.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	index	Num	8		
14	narcotics_1	Num	8		Did patient receive any narcotics this calendar date?
15	narcoticsc_1	Char	3	$3.	Did patient receive any narcotics this calendar date?
16	paralytics_1	Num	8		Did patient receive any paralytics this calendar date?
17	paralyticsc_1	Char	3	$3.	Did patient receive any paralytics this calendar date?
18	prokinetics_1	Num	8		Did patient receive any prokinetics this calendar date?
19	prokineticsc_1	Char	3	$3.	Did patient receive any prokinetics this calendar date?
20	antiemetics_1	Num	8		Did patient receive any anti-emetics this calendar date?
21	antiemeticsc_1	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
22	antidiarrheals_1	Num	8		Did patient receive any anti-diarrheals this calendar date?
23	antidiarrhealsc_1	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
24	laxatives_1	Num	8		Did patient receive any laxatives this calendar date?
25	laxativesc_1	Char	3	$3.	Did patient receive any laxatives this calendar date?
26	narcoticsx_1	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
27	paralyticsx_1	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
28	prokineticsx_1	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
29	antiemeticsx_1	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
30	antidiarrhealsx_1	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
31	laxativesx_1	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
32	narcotics_2	Num	8		Did patient receive any narcotics this calendar date?
33	narcoticsc_2	Char	3	$3.	Did patient receive any narcotics this calendar date?
34	paralytics_2	Num	8		Did patient receive any paralytics this calendar date?
35	paralyticsc_2	Char	3	$3.	Did patient receive any paralytics this calendar date?
36	prokinetics_2	Num	8		Did patient receive any prokinetics this calendar date?

Num	Variable	Type	Len	Format	Label
37	prokineticsc_2	Char	3	$3.	Did patient receive any prokinetics this calendar date?
38	antiemetics_2	Num	8		Did patient receive any anti-emetics this calendar date?
39	antiemeticsc_2	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
40	antidiarrheals_2	Num	8		Did patient receive any anti-diarrheals this calendar date?
41	antidiarrhealsc_2	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
42	laxatives_2	Num	8		Did patient receive any laxatives this calendar date?
43	laxativesc_2	Char	3	$3.	Did patient receive any laxatives this calendar date?
44	narcoticsx_2	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
45	paralyticsx_2	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
46	prokineticsx_2	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
47	antiemeticsx_2	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
48	antidiarrhealsx_2	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
49	laxativesx_2	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
50	narcotics_3	Num	8		Did patient receive any narcotics this calendar date?
51	narcoticsc_3	Char	3	$3.	Did patient receive any narcotics this calendar date?
52	paralytics_3	Num	8		Did patient receive any paralytics this calendar date?
53	paralyticsc_3	Char	3	$3.	Did patient receive any paralytics this calendar date?
54	prokinetics_3	Num	8		Did patient receive any prokinetics this calendar date?
55	prokineticsc_3	Char	3	$3.	Did patient receive any prokinetics this calendar date?
56	antiemetics_3	Num	8		Did patient receive any anti-emetics this calendar date?
57	antiemeticsc_3	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
58	antidiarrheals_3	Num	8		Did patient receive any anti-diarrheals this calendar date?
59	antidiarrhealsc_3	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
60	laxatives_3	Num	8		Did patient receive any laxatives this calendar date?
61	laxativesc_3	Char	3	$3.	Did patient receive any laxatives this calendar date?
62	narcoticsx_3	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
63	paralyticsx_3	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
64	prokineticsx_3	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
65	antiemeticsx_3	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
66	antidiarrhealsx_3	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
67	laxativesx_3	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
68	narcotics_4	Num	8		Did patient receive any narcotics this calendar date?
69	narcoticsc_4	Char	3	$3.	Did patient receive any narcotics this calendar date?
70	paralytics_4	Num	8		Did patient receive any paralytics this calendar date?
71	paralyticsc_4	Char	3	$3.	Did patient receive any paralytics this calendar date?
72	prokinetics_4	Num	8		Did patient receive any prokinetics this calendar date?
73	prokineticsc_4	Char	3	$3.	Did patient receive any prokinetics this calendar date?
74	antiemetics_4	Num	8		Did patient receive any anti-emetics this calendar date?
75	antiemeticsc_4	Char	3	$3.	Did patient receive any anti-emetics this calendar date?

Num	Variable	Type	Len	Format	Label
76	antidiarrheals_4	Num	8		Did patient receive any anti-diarrheals this calendar date?
77	antidiarrhealsc_4	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
78	laxatives_4	Num	8		Did patient receive any laxatives this calendar date?
79	laxativesc_4	Char	3	$3.	Did patient receive any laxatives this calendar date?
80	narcoticsx_4	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
81	paralyticsx_4	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
82	prokineticsx_4	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
83	antiemeticsx_4	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
84	antidiarrhealsx_4	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
85	laxativesx_4	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
86	narcotics_5	Num	8		Did patient receive any narcotics this calendar date?
87	narcoticsc_5	Char	3	$3.	Did patient receive any narcotics this calendar date?
88	paralytics_5	Num	8		Did patient receive any paralytics this calendar date?
89	paralyticsc_5	Char	3	$3.	Did patient receive any paralytics this calendar date?
90	prokinetics_5	Num	8		Did patient receive any prokinetics this calendar date?
91	prokineticsc_5	Char	3	$3.	Did patient receive any prokinetics this calendar date?
92	antiemetics_5	Num	8		Did patient receive any anti-emetics this calendar date?
93	antiemeticsc_5	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
94	antidiarrheals_5	Num	8		Did patient receive any anti-diarrheals this calendar date?
95	antidiarrhealsc_5	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
96	laxatives_5	Num	8		Did patient receive any laxatives this calendar date?
97	laxativesc_5	Char	3	$3.	Did patient receive any laxatives this calendar date?
98	narcoticsx_5	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
99	paralyticsx_5	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
100	prokineticsx_5	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
101	antiemeticsx_5	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
102	antidiarrhealsx_5	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
103	laxativesx_5	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
104	narcotics_6	Num	8		Did patient receive any narcotics this calendar date?
105	narcoticsc_6	Char	3	$3.	Did patient receive any narcotics this calendar date?
106	paralytics_6	Num	8		Did patient receive any paralytics this calendar date?
107	paralyticsc_6	Char	3	$3.	Did patient receive any paralytics this calendar date?
108	prokinetics_6	Num	8		Did patient receive any prokinetics this calendar date?
109	prokineticsc_6	Char	3	$3.	Did patient receive any prokinetics this calendar date?
110	antiemetics_6	Num	8		Did patient receive any anti-emetics this calendar date?
111	antiemeticsc_6	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
112	antidiarrheals_6	Num	8		Did patient receive any anti-diarrheals this calendar date?
113	antidiarrhealsc_6	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
114	laxatives_6	Num	8		Did patient receive any laxatives this calendar date?

Num	Variable	Type	Len	Format	Label
115	laxativesc_6	Char	3	$3.	Did patient receive any laxatives this calendar date?
116	narcoticsx_6	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
117	paralyticsx_6	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
118	prokineticsx_6	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
119	antiemeticsx_6	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
120	antidiarrhealsx_6	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
121	laxativesx_6	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
122	narcotics_7	Num	8		Did patient receive any narcotics this calendar date?
123	narcoticsc_7	Char	3	$3.	Did patient receive any narcotics this calendar date?
124	paralytics_7	Num	8		Did patient receive any paralytics this calendar date?
125	paralyticsc_7	Char	3	$3.	Did patient receive any paralytics this calendar date?
126	prokinetics_7	Num	8		Did patient receive any prokinetics this calendar date?
127	prokineticsc_7	Char	3	$3.	Did patient receive any prokinetics this calendar date?
128	antiemetics_7	Num	8		Did patient receive any anti-emetics this calendar date?
129	antiemeticsc_7	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
130	antidiarrheals_7	Num	8		Did patient receive any anti-diarrheals this calendar date?
131	antidiarrhealsc_7	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
132	laxatives_7	Num	8		Did patient receive any laxatives this calendar date?
133	laxativesc_7	Char	3	$3.	Did patient receive any laxatives this calendar date?
134	narcoticsx_7	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
135	paralyticsx_7	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
136	prokineticsx_7	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
137	antiemeticsx_7	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
138	antidiarrhealsx_7	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
139	laxativesx_7	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
140	narcotics_8	Num	8		Did patient receive any narcotics this calendar date?
141	narcoticsc_8	Char	3	$3.	Did patient receive any narcotics this calendar date?
142	paralytics_8	Num	8		Did patient receive any paralytics this calendar date?
143	paralyticsc_8	Char	3	$3.	Did patient receive any paralytics this calendar date?
144	prokinetics_8	Num	8		Did patient receive any prokinetics this calendar date?
145	prokineticsc_8	Char	3	$3.	Did patient receive any prokinetics this calendar date?
146	antiemetics_8	Num	8		Did patient receive any anti-emetics this calendar date?
147	antiemeticsc_8	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
148	antidiarrheals_8	Num	8		Did patient receive any anti-diarrheals this calendar date?
149	antidiarrhealsc_8	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
150	laxatives_8	Num	8		Did patient receive any laxatives this calendar date?
151	laxativesc_8	Char	3	$3.	Did patient receive any laxatives this calendar date?
152	narcoticsx_8	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
153	paralyticsx_8	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)

Num	Variable	Type	Len	Format	Label
154	prokineticsx_8	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
155	antiemeticsx_8	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
156	antidiarrhealsx_8	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
157	laxativesx_8	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
158	narcotics_9	Num	8		Did patient receive any narcotics this calendar date?
159	narcoticsc_9	Char	3	$3.	Did patient receive any narcotics this calendar date?
160	paralytics_9	Num	8		Did patient receive any paralytics this calendar date?
161	paralyticsc_9	Char	3	$3.	Did patient receive any paralytics this calendar date?
162	prokinetics_9	Num	8		Did patient receive any prokinetics this calendar date?
163	prokineticsc_9	Char	3	$3.	Did patient receive any prokinetics this calendar date?
164	antiemetics_9	Num	8		Did patient receive any anti-emetics this calendar date?
165	antiemeticsc_9	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
166	antidiarrheals_9	Num	8		Did patient receive any anti-diarrheals this calendar date?
167	antidiarrhealsc_9	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
168	laxatives_9	Num	8		Did patient receive any laxatives this calendar date?
169	laxativesc_9	Char	3	$3.	Did patient receive any laxatives this calendar date?
170	narcoticsx_9	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
171	paralyticsx_9	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
172	prokineticsx_9	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
173	antiemeticsx_9	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
174	antidiarrhealsx_9	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
175	laxativesx_9	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
176	narcotics_10	Num	8		Did patient receive any narcotics this calendar date?
177	narcoticsc_10	Char	3	$3.	Did patient receive any narcotics this calendar date?
178	paralytics_10	Num	8		Did patient receive any paralytics this calendar date?
179	paralyticsc_10	Char	3	$3.	Did patient receive any paralytics this calendar date?
180	prokinetics_10	Num	8		Did patient receive any prokinetics this calendar date?
181	prokineticsc_10	Char	3	$3.	Did patient receive any prokinetics this calendar date?
182	antiemetics_10	Num	8		Did patient receive any anti-emetics this calendar date?
183	antiemeticsc_10	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
184	antidiarrheals_10	Num	8		Did patient receive any anti-diarrheals this calendar date?
185	antidiarrhealsc_10	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
186	laxatives_10	Num	8		Did patient receive any laxatives this calendar date?
187	laxativesc_10	Char	3	$3.	Did patient receive any laxatives this calendar date?
188	narcoticsx_10	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
189	paralyticsx_10	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
190	prokineticsx_10	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
191	antiemeticsx_10	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
192	antidiarrhealsx_10	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)

Num	Variable	Type	Len	Format	Label
193	laxativesx_10	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
194	narcotics_11	Num	8		Did patient receive any narcotics this calendar date?
195	narcoticsc_11	Char	3	$3.	Did patient receive any narcotics this calendar date?
196	paralytics_11	Num	8		Did patient receive any paralytics this calendar date?
197	paralyticsc_11	Char	3	$3.	Did patient receive any paralytics this calendar date?
198	prokinetics_11	Num	8		Did patient receive any prokinetics this calendar date?
199	prokineticsc_11	Char	3	$3.	Did patient receive any prokinetics this calendar date?
200	antiemetics_11	Num	8		Did patient receive any anti-emetics this calendar date?
201	antiemeticsc_11	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
202	antidiarrheals_11	Num	8		Did patient receive any anti-diarrheals this calendar date?
203	antidiarrhealsc_11	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
204	laxatives_11	Num	8		Did patient receive any laxatives this calendar date?
205	laxativesc_11	Char	3	$3.	Did patient receive any laxatives this calendar date?
206	narcoticsx_11	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
207	paralyticsx_11	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
208	prokineticsx_11	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
209	antiemeticsx_11	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
210	antidiarrhealsx_11	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
211	laxativesx_11	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
212	narcotics_12	Num	8		Did patient receive any narcotics this calendar date?
213	narcoticsc_12	Char	3	$3.	Did patient receive any narcotics this calendar date?
214	paralytics_12	Num	8		Did patient receive any paralytics this calendar date?
215	paralyticsc_12	Char	3	$3.	Did patient receive any paralytics this calendar date?
216	prokinetics_12	Num	8		Did patient receive any prokinetics this calendar date?
217	prokineticsc_12	Char	3	$3.	Did patient receive any prokinetics this calendar date?
218	antiemetics_12	Num	8		Did patient receive any anti-emetics this calendar date?
219	antiemeticsc_12	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
220	antidiarrheals_12	Num	8		Did patient receive any anti-diarrheals this calendar date?
221	antidiarrhealsc_12	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
222	laxatives_12	Num	8		Did patient receive any laxatives this calendar date?
223	laxativesc_12	Char	3	$3.	Did patient receive any laxatives this calendar date?
224	narcoticsx_12	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
225	paralyticsx_12	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
226	prokineticsx_12	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
227	antiemeticsx_12	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
228	antidiarrhealsx_12	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
229	laxativesx_12	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)

Data Set Name: dayzerofeeding.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	proprate	Num	8		Propofol infusion rate at time of randomization
16	feedgrp	Num	8		Enteral Feeding Group
17	feedgrpc	Char	12	$12.	Enteral Feeding Group
18	prebasefeed	Num	8		In the 12 hours prior to enrollment, did patient receive any enteral feedings?
19	prebasefeedc	Char	72	$72.	In the 12 hours prior to enrollment, did patient receive any enteral feedings?
20	prebasevol	Num	8		Yes, enter total volume of enteral feeds in 12 hours prior to enrollment
21	feedinitdt	Num	8	BEST12.	Date and time of initiation of protocol specified enteral feeds (Day)
22	feedinittm	Num	8	TIME5.	Date and time of initiation of protocol specified enteral feeds (Time)
23	recfeed	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
24	recfeedc	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
25	goalrate	Num	8		Tube feeding goal rate
26	goalchange	Num	8		Did the goal rate change during the 24 hour period?
27	goalchangec	Char	19	$19.	Did the goal rate change during the 24 hour period?
28	newgoal	Num	8		New goal rate
29	brand1	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
30	brand1vol	Num	8		Total volume of enteral formula 1 infused for 24 hour period
31	brand2	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
32	brand2vol	Num	8		Total volume of enteral formula 2 infused for 24 hour period
33	feedhrs	Num	8		Number of hours enteral tube feeds on for this 24 hour period
34	feedoff	Num	8		Feeds turned off for > 30 minutes within 24 hour period
35	feedoffc	Char	61	$61.	Feeds turned off for > 30 minutes within 24 hour period
36	planext	Num	8		Planned Extubation

Num	Variable	Type	Len	Format	Label
37	planextc	Char	18	$18.	Planned Extubation
38	giint	Num	8		GI Intolerance
39	giintc	Char	14	$14.	GI Intolerance
40	invbside	Num	8		Invasive bedside procedure
41	invbsidec	Char	26	$26.	Invasive bedside procedure
42	surgery	Num	8		Surgery
43	surgeryc	Char	7	$7.	Surgery
44	leftfloor	Num	8		Patient left the floor
45	leftfloorc	Char	22	$22.	Patient left the floor
46	care	Num	8		Nursing Care(ie bathing, HOB down)
47	carec	Char	34	$34.	Nursing Care(ie bathing, HOB down)
48	medadm	Num	8		Medical Administration
49	medadmc	Char	22	$22.	Medical Administration
50	feedoffoth	Num	8		Other reason feed turned off:
51	feedoffothc	Char	5	$5.	Other reason feed turned off:
52	feedoffreas	Char	255	$255.	Other reason feed turned off: Reason
53	giintoleden	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
54	giintoledenc	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
55	diarrhea	Num	8		Diarrhea
56	diarrheac	Char	8	$8.	Diarrhea
57	vomiting	Num	8		Vomiting
58	vomitingc	Char	8	$8.	Vomiting
59	aspiration	Num	8		Aspiration
60	aspirationc	Char	10	$10.	Aspiration
61	elevresid	Num	8		Elevated Residuals
62	elevresidc	Char	18	$18.	Elevated Residuals
63	regurg	Num	8		Regurgitation
64	regurgc	Char	13	$13.	Regurgitation
65	constipation	Num	8		Constipation
66	constipationc	Char	12	$12.	Constipation
67	cramping	Num	8		Abdominal distention or cramping
68	crampingc	Char	32	$32.	Abdominal distention or cramping
69	feedsite	Num	8		Insertion site of feeding tube:
70	feedsitec	Char	12	$12.	Insertion site of feeding tube:
71	tubesize	Num	8		Feeding tube size
72	tubesizec	Char	10	$10.	Feeding tube size
73	distalpos	Num	8		Distal position of feeding tube

Num	Variable	Type	Len	Format	Label
74	distalposc	Char	12	$12.	Distal position of feeding tube
75	distalconf	Num	8		Was distal position confirmed during this 24 hour period?
76	distalconfc	Char	19	$19.	Was distal position confirmed during this 24 hour period?
77	distalhow	Num	8		How distal position confirmed
78	distalhowc	Char	15	$15.	How distal position confirmed
79	distaloth	Char	40	$40.	How distal position confirmed: other
80	fullcal	Num	8		Was rate advanced to full-calorie rate during this calendar day?
81	fullcalc	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
82	fullcaltm	Num	8	TIMEAMPM.	time full calorie reached
83	pronevent	Num	8		Prone ventilation between randomization and midnight?
84	proneventc	Char	3	$3.	Prone ventilation between randomization and midnight?
85	propratex	Char	64	$64.	Propofol infusion rate at time of randomization (Not Done)
86	feedgrpx	Char	64	$64.	Enteral Feeding Group (Not Done)
87	prebasefeedx	Char	64	$64.	In the 12 hours prior to enrollment, did patient receive any enteral feedings? (Not Done)
88	feedinitdtmx	Char	64	$64.	Date and time of initiation of protocol specified enteral feeds (Not Done)
89	recfeedx	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
90	goalratex	Char	64	$64.	Tube feeding goal rate (Not Done)
91	goalchangex	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
92	brand1x	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period (Not Done)
93	feedhrsx	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
94	feedoffX	Char	64	$64.	Feeds turned off for > 30 minutes within 24 hour period (Not Done)
95	giintoledenx	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
96	feedsiteX	Char	64	$64.	Insertion site of feeding tube: (Not Done)
97	tubesizeX	Char	64	$64.	Feeding tube size (Not Done)
98	distalposX	Char	64	$64.	Distal position of feeding tube (Not Done)
99	distalconfx	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
100	fullcalx	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)

Data Set Name: deadspace.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	dsmeasure	Num	8		Was the deadspace measurement conducted?
16	dsmeasurec	Char	3	$3.	Was the deadspace measurement conducted?
17	dsmeasuretm	Num	8	TIMEAMPM.	Time of Measurement
18	simv_ds	Num	8		SIMV
19	simv_dsc	Char	4	$4.	SIMV
20	prvc_ds	Num	8		PRVC (pressure regulated volume control) or equivalent
21	prvc_dsc	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
22	pressup_ds	Num	8		Pressure Support
23	pressup_dsc	Char	16	$16.	Pressure Support
24	pressupcmh2o_ds	Num	8		Pressure Support cmH2O
25	volassist_ds	Num	8		Volume Assist/Control
26	volassist_dsc	Char	21	$21.	Volume Assist/Control
27	presassist_ds	Num	8		Pressure Assist
28	presassist_dsc	Char	15	$15.	Pressure Assist
29	presascmh2o_ds	Num	8		Pressure Assist cmH2O
30	pcirv_ds	Num	8		PC IRV
31	pcirv_dsc	Char	6	$6.	PC IRV
32	aprv_ds	Num	8		Airway Pressure Release Ventilation (APRV)
33	aprv_dsc	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
34	ventoth_ds	Num	8		Other
35	ventoth_dsc	Char	5	$5.	Other
36	fio2_ds	Num	8		FiO2

Num	Variable	Type	Len	Format	Label
37	peep_ds	Num	8		PEEP
38	resprate_ds	Num	8		Total Respiratory Rate
39	platpress_ds	Num	8		Plateau Pressure
40	meanair_ds	Num	8		Mean Airway Pressure
41	tidalvol_ds	Num	8		Expired Mechanical Tidal Volume (Vte-m)
42	dsfraction	Num	8		Dead-Space Fraction (Vd/Vt)
43	alveolards	Num	8		Alveolar Dead Space (Vtalv)
44	airwayds	Num	8		Airway Dead Space (VdAW)
45	peco2_ds	Num	8		Mixed Expired CO2 (PeCO2)
46	etco2_ds	Num	8		End-Tidal CO2 (ETCO2)
47	vco2_ds	Num	8		CO2 Excretion (VCO2)
48	ph_ds	Num	8		Arterial pH
49	pco2_ds	Num	8		Arterial PCO2
50	po2_ds	Num	8		Arterial PO2

Data Set Name: derive.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	altapatient	Num	8		
3	omegapatient	Num	8		
4	edenpatient	Num	8		
5	alta	Char	20		
6	omega	Char	20		
7	eden	Char	20	$EDENHID.	
8	shock	Num	8	YES1NO0F.	Baseline Shock?
9	cumfl_0	Num	8		Cumulative Fluid Balance day 0
10	cumfl_1	Num	8		Cumulative Fluid Balance day 1
11	cumfl_2	Num	8		Cumulative Fluid Balance day 2
12	cumfl_3	Num	8		Cumulative Fluid Balance day 3
13	cumfl_4	Num	8		Cumulative Fluid Balance day 4
14	cumfl_5	Num	8		Cumulative Fluid Balance day 5
15	cumfl_6	Num	8		Cumulative Fluid Balance day 6
16	cumfl_7	Num	8		Cumulative Fluid Balance day 7
17	cumfl_8	Num	8		Cumulative Fluid Balance day 8
18	flbal_0	Num	8		Fluid Balance on day 0
19	flbal_1	Num	8		Fluid Balance on day 1
20	flbal_2	Num	8		Fluid Balance on day 2
21	flbal_3	Num	8		Fluid Balance on day 3
22	flbal_4	Num	8		Fluid Balance on day 4
23	flbal_5	Num	8		Fluid Balance on day 5
24	flbal_6	Num	8		Fluid Balance on day 6
25	flbal_7	Num	8		Fluid Balance on day 7
26	flbal_8	Num	8		Fluid Balance on day 8
27	days2dth	Num	8		Days from randomization to death or last follow-up to day 90
28	death60	Num	8		Death during 60-day follow-up
29	death90	Num	8		Death during 90-day follow-up
30	apache	Num	8		
31	vfd	Num	8		Vent Free Days to Day 28
32	icufd	Num	8		ICU Free Days to Day 28
33	cardio28	Num	8		Cardiovascular Failure-Free Days to Day 28
34	cns28	Num	8		CNS Failure-Free Days to Day 28
35	coag28	Num	8		Coagulation Failure-Free Days to Day 28
36	renal28	Num	8		Renal Failure-Free Days to Day 28

Num	Variable	Type	Len	Format	Label
37	hepatic28	Num	8		Hepatic Failure-Free Days to Day 28
38	orgfree28	Num	8		No. of days without failure of circulatory, coagulation, hepatic, or renal organs from Day 1 to Day 28

Data Set Name: diarrhea.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	index	Num	8		Dose index
15	visitname	Char	1024	$1024.	Visit Name
16	cdifdt	Num	8	BEST12.	Date and time of new positive C. dificile culture after enrollment (Day)
17	cdiftm	Num	8	TIME5.	Date and time of new positive C. dificile culture after enrollment (Time)

Data Set Name: enroll.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name

Data Set Name: enroll1.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	allcrit	Num	8		Met all three criteria?
16	allcritc	Char	3	$3.	Met all three criteria?
17	qualdt	Num	8	BEST12.	Date and time of qualifying CXR: (Day)
18	qualtm	Num	8	TIME5.	Date and time of qualifying CXR: (Time)
19	sirs	Num	8		Patient met SIRS criteria? Defined as meeting at least 2 of the 3 criteria for a systemic inflammatory response within the window of time 24 hours before to 24 hours after the date and time of after ALI onset?
20	sirsc	Char	39	$39.	Patient met SIRS criteria? Defined as meeting at least 2 of the 3 criteria for a systemic inflammatory response within the window of time 24 hours before to 24 hours after the date and time of after ALI onset?
21	sirswbc	Num	8		White blood cell count > 12000 or > 4000 or > 10% band forms
22	sirswbcc	Char	60	$60.	White blood cell count > 12000 or > 4000 or > 10% band forms
23	sirstemp38	Num	8		Body Temperature > 38C (any route) or < 36C (by core temperatures only: indwelling catheter, esophageal, rectal)
24	sirstemp38c	Char	112	$112.	Body Temperature > 38C (any route) or < 36C (by core temperatures only: indwelling catheter, esophageal, rectal)
25	sirshr90	Num	8		Heart rate (> 90 beats/min) or receiving medications that slow heart rate or paced rhythm
26	sirshr90c	Char	89	$89.	Heart rate (> 90 beats/min) or receiving medications that slow heart rate or paced rhythm
27	inf	Num	8		Patient has suspected or proven infection?
28	infc	Char	23	$23.	Patient has suspected or proven infection?
29	infthorax	Num	8		Site of infection: Thorax
30	infthoraxc	Char	6	$6.	Site of infection: Thorax
31	infabdomen	Num	8		Site of infection: Abdomen

Num	Variable	Type	Len	Format	Label
32	infabdomenc	Char	7	$7.	Site of infection: Abdomen
33	infskin	Num	8		Site of infection: Skin or soft tissue
34	infskinc	Char	19	$19.	Site of infection: Skin or soft tissue
35	infmenin	Num	8		Site of infection: Bacterial meningitis
36	infmeninc	Char	20	$20.	Site of infection: Bacterial meningitis
37	inftract	Num	8		Site of infection: Urinary tract
38	inftractc	Char	13	$13.	Site of infection: Urinary tract
39	infcent	Num	8		Site of infection: Central line
40	infcentc	Char	12	$12.	Site of infection: Central line
41	infsinus	Num	8		Site of infection: Sinuses
42	infsinusc	Char	7	$7.	Site of infection: Sinuses
43	infosteo	Num	8		Site of infection: Osteomyelitis
44	infosteoc	Char	13	$13.	Site of infection: Osteomyelitis
45	infh1n1	Num	8		Site of infection: Confirmed Swine Influenza A (H1N1)
46	infh1n1c	Char	34	$34.	Site of infection: Confirmed Swine Influenza A (H1N1)
47	infother	Char	255	$255.	Other site of infection
48	quads	Num	8		Number of quadrants with opacities (2-4):
49	intubdt	Num	8	BEST12.	Date and time of current intubation (Day)
50	intubtm	Num	8	TIME5.	Date and time of current intubation (Time)
51	intfeed	Num	8		Intent to begin/continue enteral feedings?
52	intfeedc	Char	3	$3.	Intent to begin/continue enteral feedings?
53	pao2screen	Num	8		Pa02
54	fio2screen	Num	8		FiO2
55	qualpfdt	Num	8	BEST12.	Date and time of qualifying P/F (Day)
56	qualpftm	Num	8	TIME5.	Date and time of qualifying P/F (Time)
57	critdt	Num	8	BEST12.	First date that all these criteria exist simultaneously (Day)
58	gender	Num	8		Gender
59	genderc	Char	6	$6.	Gender
60	ethnic	Num	8		Hispanic or Not Hispanic?
61	ethnicc	Char	22	$22.	Hispanic or Not Hispanic?
62	norace	Num	8		Race Not Reported
63	noracec	Char	12	$12.	Race Not Reported
64	white	Num	8		White?
65	whitec	Char	5	$5.	White
66	afamer	Num	8		Black or African American?
67	afamerc	Char	25	$25.	Black or African American?
68	othrace	Num	8		Other Race Category
69	othracec	Char	41	$41.	Other Race Category
70	age	Num	8		Age as appears on screening form (in years):

Num	Variable	Type	Len	Format	Label
71	agegt89	Num	8		Is true age greater than 89?
72	agegt89c	Char	54	$54.	Is true age greater than 89?
73	locat	Num	8		Location
74	locatc	Char	12	$12.	Location
75	locatoth	Char	20	$20.	Location: Other
76	excluded	Num	8		Excluded?
77	excludedc	Char	41	$41.	Excluded?
78	agelt13	Num	8		Age younger than 13 years?
79	agelt13c	Char	25	$25.	Age younger than 13 years?
80	chronliv	Num	8		Severe Chronic liver disease?
81	chronlivc	Char	56	$56.	Severe Chronic liver disease?
82	alvhem	Num	8		Diffuse alveolar hemorrhage?
83	alvhemc	Char	43	$43.	Diffuse alveolar hemorrhage?
84	obese	Num	8		Morbid obesity?
85	obesec	Char	40	$40.	Morbid obesity?
86	nocons	Num	8		No consent/inability to obtain consent?
87	noconsc	Char	38	$38.	No consent/inability to obtain consent?
88	inabvent	Num	8		Inability to utilize ventilation protocol?
89	inabventc	Char	126	$126.	Inability to utilize ventilation protocol?
90	moribund	Num	8		Moribund in 24 hours?
91	moribundc	Char	49	$49.	Moribund in 24 hours?
92	nocvacc	Num	8		No intent to obtain CV access?
93	nocvaccc	Char	80	$80.	No intent to obtain CV access?
94	ptrefalta	Num	8		Patient refusal to ALTA
95	ptrefaltac	Char	33	$33.	Patient refusal to ALTA
96	ptrefeo	Num	8		Patient refusal to EDEN/OMEGA?
97	ptrefeoc	Char	39	$39.	Patient refusal to EDEN/OMEGA?
98	gt72hrvent	Num	8		> 72 h since mechanical ventilation?
99	gt72hrventc	Char	60	$60.	> 72 h since mechanical ventilation?
100	gt48hrcrit	Num	8		> 48 hours since met all criteria?
101	gt48hrcritc	Char	54	$54.	> 48 hours since met all criteria?
102	refshock	Num	8		Refractory Shock?
103	refshockc	Char	38	$38.	Refractory Shock?
104	noentacc	Num	8		Unable to obtain enteral access?
105	noentaccc	Char	31	$31.	Unable to obtain enteral access?
106	hoentfist	Num	8		High-output of enterocutaneous fistula?
107	hoentfistc	Char	88	$88.	High-output of enterocutaneous fistula?
108	curtpn	Num	8		Current or intent to use TPN?
109	curtpnc	Char	50	$50.	Current or intent to use TPN?

Num	Variable	Type	Len	Format	Label
110	malnutr	Num	8		Severe malnutrition in last 6 months?
111	malnutrc	Char	101	$101.	Severe malnutrition in last 6 months?
112	lap	Num	8		Laparotomy expected?
113	lapc	Char	33	$33.	Laparotomy expected?
114	raisehead	Num	8		Unable to raise head of bed?
115	raiseheadc	Char	41	$41.	Unable to raise head of bed?
116	shbowel	Num	8		Short-bowel syndrome or similar?
117	shbowelc	Char	57	$57.	Short-bowel syndrome or similar?
118	inrgt5	Num	8		INR > 5.0 or platelet count < 30K?
119	inrgt5c	Char	83	$83.	INR > 5.0 or platelet count < 30K?
120	nmdis	Num	8		Neuromuscular Disease?
121	nmdisc	Char	74	$74.	Neuromuscular Disease?
122	ichem	Num	8		Recent Intracranial hemorrhage?
123	ichemc	Char	49	$49.	Recent Intracranial hemorrhage?
124	allergy	Num	8		Allergies to substances in study?
125	allergyc	Char	127	$127.	Allergies to substances in study?
126	reqsub	Num	8		Requirement of substances in study?
127	reqsubc	Char	196	$196.	Requirement of substances in study?
128	contralb	Num	8		Contraindication to albuterol?
129	contralbc	Char	54	$54.	Contraindication to albuterol?
130	dailyba	Num	8		Daily use of inhaled beta agonists?
131	dailybac	Char	168	$168.	Daily use of inhaled beta agonists?
132	acutemi	Num	8		Acute MI or acute coronary syndrome?
133	acutemic	Char	69	$69.	Acute MI or acute coronary syndrome?
134	heartfail	Num	8		Congestive heart failure?
135	heartfailc	Char	24	$24.	Congestive heart failure?
136	othstud	Num	8		Participation in other studies?
137	othstudc	Char	117	$117.	Participation in other studies?
138	gt5pvcs	Num	8		Greater than 5 PVCs/min in the 4 hours prior to randomization
139	gt5pvcsc	Char	61	$61.	Greater than 5 PVCs/min in the 4 hours prior to randomization
140	newafib	Num	8		New onset (since hospital admission) of a-fib requiring anticoagulation
141	newafibc	Char	71	$71.	New onset (since hospital admission) of a-fib requiring anticoagulation
142	hrgt85	Num	8		Heart rate > 85% of max predicted?
143	hrgt85c	Char	109	$109.	Heart rate > 85% of max predicted?
144	mdrefalta	Num	8		MD refusal for ALTA?
145	mdrefaltac	Char	36	$36.	MD refusal for ALTA?
146	mdrefaltareas	Num	8		Reason for MD refusal for ALTA?
147	mdrefaltareasc	Char	42	$42.	Reason for MD refusal for ALTA?
148	mdrefaltaoth	Char	100	$100.	Other reason for MD refusal for ALTA?

Num	Variable	Type	Len	Format	Label
149	preg	Num	8		Pregnant or breast feeding?
150	pregc	Char	26	$26.	Pregnant or breast feeding?
151	mdrefeoc	Char	42	$42.	MD refusal for EDEN/Omega?
152	mdrefeoreas	Num	8		Reason for MD refusal for EDEN/Omega?
153	mdrefeoreasc	Char	42	$42.	Reason for MD refusal for EDEN/Omega?
154	mdrefeooth	Char	100	$100.	Other reason for MD refusal for EDEN/Omega?
155	chronresp	Num	8		Severe chronic respiratory disease?
156	chronrespc	Char	34	$34.	Severe chronic respiratory disease?
157	burnsc	Char	46	$46.	Burns > 40% of body surface area?
158	sixmthmort	Num	8		6-month mortality > 50%?
159	sixmthmortc	Char	117	$117.	6-month mortality > 50%?
160	marrowtrans	Num	8		Allogenic bone marrow transplant?
161	marrowtransc	Char	53	$53.	Allogenic bone marrow transplant?
162	notcomm	Num	8		Not committed to full support?
163	notcommc	Char	62	$62.	Not committed to full support?
164	bowobs	Num	8		Presence of partial or complete bowel obstruction, or ischemia, or infarction
165	bowobsc	Char	78	$78.	Presence of partial or complete bowel obstruction, or ischemia, or infarction
166	agelt18	Num	8		Age less than 18 years?
167	agelt18c	Char	22	$22.	Age less than 18 years?
168	prevstatin	Num	8		Receiving a statin medication within 48 hours of randomization?
169	prevstatinc	Char	62	$62.	Receiving a statin medication within 48 hours of randomization?
170	allergystat	Num	8		Allergy or intolerance to statins?
171	allergystatc	Char	33	$33.	Allergy or intolerance to statins?
172	mdstat	Num	8		Physician insistence on use of statins during the current hospitalization?
173	mdstatc	Char	73	$73.	Physician insistence on use of statins during the current hospitalization?
174	mdnostat	Num	8		Physician insistence on AVOIDANCE of statins during the current hospitalization?
175	mdnostatc	Char	79	$79.	Physician insistence on AVOIDANCE of statins during the current hospitalization?
176	ckgt5	Num	8		CK, ALT or AST > 5 times the upper limit of normal (ULN)?
177	ckgt5c	Char	58	$58.	CK, ALT or AST > 5 times the upper limit of normal (ULN)?
178	hypothy	Num	8		Diagnosis of hypothyroidism and not on thyroid replacement therapy?
179	hypothyc	Char	66	$66.	Diagnosis of hypothyroidism and not on thyroid replacement therapy?
180	recniacin	Num	8		Receiving niacin, fenofibrate, cyclosporine, gemfibrozil, lopinavir, ritonavir or planned use of oral contraceptives or estrogen therapy during the ICU stay?
181	recniacinc	Char	156	$156.	Receiving niacin, fenofibrate, cyclosporine, gemfibrozil, lopinavir, ritonavir or planned use of oral contraceptives or estrogen therapy during the ICU stay?
182	homevent	Num	8		Home mechanical ventilation (noninvasive ventilation or via tracheotomy) except for CPAP/BIPAP used solely for sleep-disordered breathing?
183	homeventc	Char	139	$139.	Home mechanical ventilation (noninvasive ventilation or via tracheotomy) except for CPAP/BIPAP used solely for sleep-disordered breathing?
184	chronrespfl	Num	8		Chronic respiratory failure defined as PaCO2 > 50 mm Hg in the outpatient setting?

Num	Variable	Type	Len	Format	Label
185	chronrespflc	Char	83	$83.	Chronic respiratory failure defined as PaCO2 > 50 mm Hg in the outpatient setting?
186	intlung	Num	8		Interstitial lung disease of severity sufficient to require continuous home oxygen therapy?
187	intlungc	Char	91	$91.	Interstitial lung disease of severity sufficient to require continuous home oxygen therapy?
188	carddis	Num	8		Cardiac disease classified as NYHA class IV?
189	carddisc	Char	45	$45.	Cardiac disease classified as NYHA class IV?
190	noabsorb	Num	8		Unable to receive or unlikely to absorb enteral study drug?
191	noabsorbc	Char	187	$187.	Unable to receive or unlikely to absorb enteral study drug?
192	mi6mth	Num	8		Myocardial infarction within past 6 months?
193	mi6mthc	Char	42	$42.	Myocardial infarction within past 6 months?
194	notexenreas	Char	200	$200.	Neither excluded nor enrolled reason:
195	Trauma	Num	8		Trauma
196	Traumac	Char	9	$9.	Trauma
197	Sepsite	Num	8		Site of Sepsis for Primary Lung Injury?
198	Sepsitec	Char	24	$24.	Site of Sepsis for Primary Lung Injury?
199	Sepsis	Num	8		Sepsis
200	Sepsisc	Char	37	$37.	Sepsis
201	Transf	Num	8		Multiple Transfusions
202	Transfc	Char	9	$9.	Multiple Transfusions
203	Aspir	Num	8		Aspiration
204	Aspirc	Char	9	$9.	Aspiration
205	Pneumo	Num	8		Pneumonia
206	Pneumoc	Char	9	$9.	Pneumonia
207	Otherlung	Num	8		Other Lung Injury
208	Otherlungc	Char	49	$49.	Other Lung Injury
209	Otherpr	Char	40	$40.	Description of Other Primary Lung Injury
210	Othersec	Char	40	$40.	Description of Other Secondary Lung Injury
211	raceX	Char	64	$64.	Race (Not Done)
212	allcritX	Char	64	$64.	Met all three criteria? (Not Done)
213	qualdtmX	Char	64	$64.	Date and time of qualifying CXR: (Not Done)
214	quadsX	Char	64	$64.	Number of quadrants with opacities (2-4): (Not Done)
215	intubdtmX	Char	64	$64.	Date and time of current intubation (Not Done)
216	intfeedX	Char	64	$64.	Intent to begin/continue enteral feedings? (Not Done)
217	pao2screenX	Char	64	$64.	Pa02 (Not Done)
218	fio2screenX	Char	64	$64.	FiO2 (Not Done)
219	qualpfdtmX	Char	64	$64.	Date and time of qualifying P/F (Not Done)
220	critdtX	Char	64	$64.	First date that all these criteria exist simultaneously (Not Done)
221	genderX	Char	64	$64.	Gender (Not Done)

Num	Variable	Type	Len	Format	Label
222	ethnicX	Char	64	$64.	Hispanic or Not Hispanic? (Not Done)
223	ageX	Char	64	$64.	Age as appears on screening form (in years): (Not Done)
224	locatX	Char	64	$64.	Location (Not Done)
225	excludedX	Char	64	$64.	Excluded? (Not Done)
226	TraumaX	Char	64	$64.	Trauma (Not Done)
227	SepsisX	Char	64	$64.	Sepsis (Not Done)
228	TransfX	Char	64	$64.	Multiple Transfusions (Not Done)
229	AspirX	Char	64	$64.	Aspiration (Not Done)
230	PneumoX	Char	64	$64.	Pneumonia (Not Done)
231	OtherlungX	Char	64	$64.	Other Lung Injury (Not Done)
232	mdrefeo	Num	8		MD refusal for EDEN/Omega?
233	burns	Num	8		Burns > 40% of body surface area?

Data Set Name: enroll2.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	altaconsent	Num	8		Has informed consent been obtained for the participation in ALTA?
16	altaconsentc	Char	3	$3.	Has informed consent been obtained for the participation in ALTA?
17	eoconsent	Num	8		Has informed consent been obtained for the participation in EDEN/Omega?
18	eoconsentc	Char	3	$3.	Has informed consent been obtained for the participation in EDEN/Omega?
19	genconsent	Num	8		Has informed consent been obtained for genetic testing testing in this study?
20	genconsentc	Char	3	$3.	Has informed consent been obtained for genetic testing testing in this study?
21	futconsenta	Num	8		Has informed consent been obtained for future genetic reasearch in ARDS?
22	futconsentac	Char	3	$3.	Has informed consent been obtained for future genetic reasearch in ARDS?
23	futconsento	Num	8		Has informed consent been obtained for Future Genetic Research involved with other medical conditions?
24	futconsentoc	Char	3	$3.	Has informed consent been obtained for Future Genetic Research involved with other medical conditions?
25	contconsent	Num	8		Has informed consent been obtained to CONTACT subject in the future for other studies?
26	contconsentc	Char	3	$3.	Has informed consent been obtained to CONTACT subject in the future for other studies?
27	altaconsentX	Char	64	$64.	Has informed consent been obtained for the participation in ALTA? (Not Done)
28	eoconsentX	Char	64	$64.	Has informed consent been obtained for the participation in EDEN/Omega? (Not Done)
29	genconsentX	Char	64	$64.	Has informed consent been obtained for genetic testing testing in this study? (Not Done)
30	futconsentaX	Char	64	$64.	Has informed consent been obtained for future genetic reasearch in ARDS? (Not Done)
31	futconsentoX	Char	64	$64.	Has informed consent been obtained for Future Genetic Research involved with other medical conditions? (Not Done)
32	contconsentX	Char	64	$64.	Has informed consent been obtained to CONTACT subject in the future for other studies? (Not Done)

Data Set Name: *feed_separation.sas7bdat*

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	proprate	Num	8		Propofol infusion rate at time of randomization
14	feedgrp	Num	8		Enteral Feeding Group
15	feedgrpc	Char	12	$12.	Enteral Feeding Group
16	prebasefeed	Num	8		In the 12 hours prior to enrollment, did patient receive any enteral feedings?
17	prebasefeedc	Char	72	$72.	In the 12 hours prior to enrollment, did patient receive any enteral feedings?
18	prebasevol	Num	8		Yes, enter total volume of enteral feeds in 12 hours prior to enrollment
19	feedinitdt	Num	8	BEST12.	Date and time of initiation of protocol specified enteral feeds (Day)
20	feedinittm	Num	8	TIME5.	Date and time of initiation of protocol specified enteral feeds (Time)
21	recfeed_0	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
22	recfeedc_0	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
23	goalrate_0	Num	8		Tube feeding goal rate
24	goalchange_0	Num	8		Did the goal rate change during the 24 hour period?
25	goalchangec_0	Char	19	$19.	Did the goal rate change during the 24 hour period?
26	newgoal_0	Num	8		New goal rate
27	brand1_0	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
28	brand1vol_0	Num	8		Total volume of enteral formula 1 infused for 24 hour period
29	brand2_0	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
30	brand2vol_0	Num	8		Total volume of enteral formula 2 infused for 24 hour period
31	feedhrs_0	Num	8		Number of hours enteral tube feeds on for this 24 hour period
32	feedoff_0	Num	8		Feeds turned off for > 30 minutes within 24 hour period
33	feedoffc_0	Char	61	$61.	Feeds turned off for > 30 minutes within 24 hour period
34	planext_0	Num	8		Planned Extubation
35	planextc_0	Char	18	$18.	Planned Extubation
36	giint_0	Num	8		GI Intolerance

Num	Variable	Type	Len	Format	Label
37	giintc_0	Char	14	$14.	GI Intolerance
38	invbside_0	Num	8		Invasive bedside procedure
39	invbsidec_0	Char	26	$26.	Invasive bedside procedure
40	surgery	Num	8		Surgery
41	surgeryc	Char	7	$7.	Surgery
42	leftfloor_0	Num	8		Patient left the floor
43	leftfloorc_0	Char	22	$22.	Patient left the floor
44	care_0	Num	8		Nursing Care(ie bathing, HOB down)
45	carec_0	Char	34	$34.	Nursing Care(ie bathing, HOB down)
46	medadm_0	Num	8		Medical Administration
47	medadmc_0	Char	22	$22.	Medical Administration
48	feedoffoth_0	Num	8		Other reason feed turned off:
49	feedoffothc_0	Char	5	$5.	Other reason feed turned off:
50	feedoffreas_0	Char	255	$255.	Other reason feed turned off: Reason
51	giintoleden_0	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
52	giintoledenc_0	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
53	diarrhea_0	Num	8		Diarrhea
54	diarrheac_0	Char	8	$8.	Diarrhea
55	vomiting_0	Num	8		Vomiting
56	vomitingc_0	Char	8	$8.	Vomiting
57	aspiration_0	Num	8		Aspiration
58	aspirationc_0	Char	10	$10.	Aspiration
59	elevresid	Num	8		Elevated Residuals
60	elevresidc	Char	18	$18.	Elevated Residuals
61	regurg_0	Num	8		Regurgitation
62	regurgc_0	Char	13	$13.	Regurgitation
63	constipation	Num	8		Constipation
64	constipationc	Char	12	$12.	Constipation
65	cramping	Num	8		Abdominal distention or cramping
66	crampingc	Char	32	$32.	Abdominal distention or cramping
67	feedsite_0	Num	8		Insertion site of feeding tube:
68	feedsitec_0	Char	12	$12.	Insertion site of feeding tube:
69	tubesize_0	Num	8		Feeding tube size
70	tubesizec_0	Char	10	$10.	Feeding tube size
71	distalpos_0	Num	8		Distal position of feeding tube
72	distalposc_0	Char	12	$12.	Distal position of feeding tube
73	distalconf_0	Num	8		Was distal position confirmed during this 24 hour period?

Num	Variable	Type	Len	Format	Label
74	distalconfc_0	Char	19	$19.	Was distal position confirmed during this 24 hour period?
75	distalhow_0	Num	8		How distal position confirmed
76	distalhowc_0	Char	15	$15.	How distal position confirmed
77	distaloth_0	Char	40	$40.	How distal position confirmed: other
78	fullcal_0	Num	8		Was rate advanced to full-calorie rate during this calendar day?
79	fullcalc_0	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
80	fullcaltm_0	Num	8	TIMEAMPM.	time full calorie reached
81	pronevent_0	Num	8		Prone ventilation between randomization and midnight?
82	proneventc_0	Char	3	$3.	Prone ventilation between randomization and midnight?
83	propratex	Char	64	$64.	Propofol infusion rate at time of randomization (Not Done)
84	feedgrpx	Char	64	$64.	Enteral Feeding Group (Not Done)
85	prebasefeedx	Char	64	$64.	In the 12 hours prior to enrollment, did patient receive any enteral feedings? (Not Done)
86	feedinitdtmx	Char	64	$64.	Date and time of initiation of protocol specified enteral feeds (Not Done)
87	recfeedx_0	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
88	goalratex_0	Char	64	$64.	Tube feeding goal rate (Not Done)
89	goalchangex_0	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
90	brand1x_0	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period (Not Done)
91	feedhrsx_0	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
92	feedoffX	Char	64	$64.	Feeds turned off for > 30 minutes within 24 hour period (Not Done)
93	giintoledenx_0	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
94	feedsiteX	Char	64	$64.	Insertion site of feeding tube: (Not Done)
95	tubesizeX	Char	64	$64.	Feeding tube size (Not Done)
96	distalposX	Char	64	$64.	Distal position of feeding tube (Not Done)
97	distalconfx_0	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
98	fullcalx_0	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
99	surg_1	Num	8		Surgery
100	surgc_1	Char	7	$7.	Surgery
101	residual_1	Num	8		Elevated Residuals
102	residualc_1	Char	18	$18.	Elevated Residuals
103	const_1	Num	8		Constipation
104	constc_1	Char	12	$12.	Constipation
105	cramp_1	Num	8		Abdominal distention or cramping
106	crampc_1	Char	32	$32.	Abdominal distention or cramping
107	feedoffx_1	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
108	feedsitex_1	Char	64	$64.	Insertion site of feeding tube (Not Done)
109	tubesizex_1	Char	64	$64.	Feeding tube size (Not Done)

Num	Variable	Type	Len	Format	Label
110	distalposx_1	Char	64	$64.	Distal position of feeding tube (Not Done)
111	proneventx_1	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
112	recfeed_1	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
113	recfeedc_1	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
114	goalrate_1	Num	8		Tube feeding goal rate
115	goalchange_1	Num	8		Did the goal rate change during the 24 hour period?
116	goalchangec_1	Char	19	$19.	Did the goal rate change during the 24 hour period?
117	newgoal_1	Num	8		Yes, new goal rate
118	brand1_1	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
119	brand1vol_1	Num	8		Total volume of enteral formula 1 infused for 24 hour period
120	brand2_1	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
121	brand2vol_1	Num	8		Total volume of enteral formula 2 infused for 24 hour period
122	feedhrs_1	Num	8		Number of hours enteral tube feeds on for this 24 hour period
123	feedoff_1	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
124	feedoffc_1	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
125	planext_1	Num	8		Planned Extubation
126	planextc_1	Char	18	$18.	Planned Extubation
127	giint_1	Num	8		GI Intolerance
128	giintc_1	Char	14	$14.	GI Intolerance
129	invbside_1	Num	8		Invasive bedside procedure
130	invbsidec_1	Char	26	$26.	Invasive bedside procedure
131	leftfloor_1	Num	8		Patient left the floor
132	leftfloorc_1	Char	22	$22.	Patient left the floor
133	care_1	Num	8		Nursing Care (i.e. bathing, HOB down)
134	carec_1	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
135	medadm_1	Num	8		Medical Administration
136	medadmc_1	Char	22	$22.	Medical Administration
137	feedoffoth_1	Num	8		Other reason feed turned off:
138	feedoffothc_1	Char	5	$5.	Other reason feed turned off:
139	feedoffreas_1	Char	255	$255.	Other reason feed turned off: Reason
140	giintoleden_1	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
141	giintoledenc_1	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
142	diarrhea_1	Num	8		Diarrhea
143	diarrheac_1	Char	8	$8.	Diarrhea
144	vomiting_1	Num	8		Vomiting
145	vomitingc_1	Char	8	$8.	Vomiting

Num	Variable	Type	Len	Format	Label
146	aspiration_1	Num	8		Aspiration
147	aspirationc_1	Char	10	$10.	Aspiration
148	regurg_1	Num	8		Regurgitation
149	regurgc_1	Char	13	$13.	Regurgitation
150	feedsite_1	Num	8		Insertion site of feeding tube
151	feedsitec_1	Char	12	$12.	Insertion site of feeding tube
152	tubesize_1	Num	8		Feeding tube size
153	tubesizec_1	Char	10	$10.	Feeding tube size
154	distalpos_1	Num	8		Distal position of feeding tube
155	distalposc_1	Char	12	$12.	Distal position of feeding tube
156	distalconf_1	Num	8		Was distal position confirmed during this 24 hour period?
157	distalconfc_1	Char	19	$19.	Was distal position confirmed during this 24 hour period?
158	distalhow_1	Num	8		Yes, how confirmed:
159	distalhowc_1	Char	15	$15.	Yes, how confirmed:
160	distaloth_1	Char	40	$40.	Yes, how confirmed: Other
161	fullcal_1	Num	8		Was rate advanced to full-calorie rate during this calendar day?
162	fullcalc_1	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
163	fullcaltm_1	Num	8	TIMEAMPM.	Yes, time full calorie reached:
164	pronevent_1	Num	8		Prone ventilation this 24 hour period?
165	proneventc_1	Char	3	$3.	Prone ventilation this 24 hour period?
166	recfeedx_1	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
167	goalratex_1	Char	64	$64.	Tube feeding goal rate (Not Done)
168	goalchangex_1	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
169	brand1x_1	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
170	feedhrsx_1	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
171	giintoledenx_1	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
172	distalconfx_1	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
173	fullcalx_1	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
174	surg_2	Num	8		Surgery
175	surgc_2	Char	7	$7.	Surgery
176	residual_2	Num	8		Elevated Residuals
177	residualc_2	Char	18	$18.	Elevated Residuals
178	const_2	Num	8		Constipation
179	constc_2	Char	12	$12.	Constipation
180	cramp_2	Num	8		Abdominal distention or cramping
181	crampc_2	Char	32	$32.	Abdominal distention or cramping
182	feedoffx_2	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)

Num	Variable	Type	Len	Format	Label
183	feedsitex_2	Char	64	$64.	Insertion site of feeding tube (Not Done)
184	tubesizex_2	Char	64	$64.	Feeding tube size (Not Done)
185	distalposx_2	Char	64	$64.	Distal position of feeding tube (Not Done)
186	proneventx_2	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
187	recfeed_2	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
188	recfeedc_2	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
189	goalrate_2	Num	8		Tube feeding goal rate
190	goalchange_2	Num	8		Did the goal rate change during the 24 hour period?
191	goalchangec_2	Char	19	$19.	Did the goal rate change during the 24 hour period?
192	newgoal_2	Num	8		Yes, new goal rate
193	brand1_2	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
194	brand1vol_2	Num	8		Total volume of enteral formula 1 infused for 24 hour period
195	brand2_2	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
196	brand2vol_2	Num	8		Total volume of enteral formula 2 infused for 24 hour period
197	feedhrs_2	Num	8		Number of hours enteral tube feeds on for this 24 hour period
198	feedoff_2	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
199	feedoffc_2	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
200	planext_2	Num	8		Planned Extubation
201	planextc_2	Char	18	$18.	Planned Extubation
202	giint_2	Num	8		GI Intolerance
203	giintc_2	Char	14	$14.	GI Intolerance
204	invbside_2	Num	8		Invasive bedside procedure
205	invbsidec_2	Char	26	$26.	Invasive bedside procedure
206	leftfloor_2	Num	8		Patient left the floor
207	leftfloorc_2	Char	22	$22.	Patient left the floor
208	care_2	Num	8		Nursing Care (i.e. bathing, HOB down)
209	carec_2	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
210	medadm_2	Num	8		Medical Administration
211	medadmc_2	Char	22	$22.	Medical Administration
212	feedoffoth_2	Num	8		Other reason feed turned off:
213	feedoffothc_2	Char	5	$5.	Other reason feed turned off:
214	feedoffreas_2	Char	255	$255.	Other reason feed turned off: Reason
215	giintoleden_2	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
216	giintoledenc_2	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
217	diarrhea_2	Num	8		Diarrhea
218	diarrheac_2	Char	8	$8.	Diarrhea

Num	Variable	Type	Len	Format	Label
219	vomiting_2	Num	8		Vomiting
220	vomitingc_2	Char	8	$8.	Vomiting
221	aspiration_2	Num	8		Aspiration
222	aspirationc_2	Char	10	$10.	Aspiration
223	regurg_2	Num	8		Regurgitation
224	regurgc_2	Char	13	$13.	Regurgitation
225	feedsite_2	Num	8		Insertion site of feeding tube
226	feedsitec_2	Char	12	$12.	Insertion site of feeding tube
227	tubesize_2	Num	8		Feeding tube size
228	tubesizec_2	Char	10	$10.	Feeding tube size
229	distalpos_2	Num	8		Distal position of feeding tube
230	distalposc_2	Char	12	$12.	Distal position of feeding tube
231	distalconf_2	Num	8		Was distal position confirmed during this 24 hour period?
232	distalconfc_2	Char	19	$19.	Was distal position confirmed during this 24 hour period?
233	distalhow_2	Num	8		Yes, how confirmed:
234	distalhowc_2	Char	15	$15.	Yes, how confirmed:
235	distaloth_2	Char	40	$40.	Yes, how confirmed: Other
236	fullcal_2	Num	8		Was rate advanced to full-calorie rate during this calendar day?
237	fullcalc_2	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
238	fullcaltm_2	Num	8	TIMEAMPM.	Yes, time full calorie reached:
239	pronevent_2	Num	8		Prone ventilation this 24 hour period?
240	proneventc_2	Char	3	$3.	Prone ventilation this 24 hour period?
241	recfeedx_2	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
242	goalratex_2	Char	64	$64.	Tube feeding goal rate (Not Done)
243	goalchangex_2	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
244	brand1x_2	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
245	feedhrsx_2	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
246	giintoledenx_2	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
247	distalconfx_2	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
248	fullcalx_2	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
249	surg_3	Num	8		Surgery
250	surgc_3	Char	7	$7.	Surgery
251	residual_3	Num	8		Elevated Residuals
252	residualc_3	Char	18	$18.	Elevated Residuals
253	const_3	Num	8		Constipation
254	constc_3	Char	12	$12.	Constipation
255	cramp_3	Num	8		Abdominal distention or cramping

Num	Variable	Type	Len	Format	Label
256	crampc_3	Char	32	$32.	Abdominal distention or cramping
257	feedoffx_3	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
258	feedsitex_3	Char	64	$64.	Insertion site of feeding tube (Not Done)
259	tubesizex_3	Char	64	$64.	Feeding tube size (Not Done)
260	distalposx_3	Char	64	$64.	Distal position of feeding tube (Not Done)
261	proneventx_3	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
262	recfeed_3	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
263	recfeedc_3	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
264	goalrate_3	Num	8		Tube feeding goal rate
265	goalchange_3	Num	8		Did the goal rate change during the 24 hour period?
266	goalchangec_3	Char	19	$19.	Did the goal rate change during the 24 hour period?
267	newgoal_3	Num	8		Yes, new goal rate
268	brand1_3	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
269	brand1vol_3	Num	8		Total volume of enteral formula 1 infused for 24 hour period
270	brand2_3	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
271	brand2vol_3	Num	8		Total volume of enteral formula 2 infused for 24 hour period
272	feedhrs_3	Num	8		Number of hours enteral tube feeds on for this 24 hour period
273	feedoff_3	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
274	feedoffc_3	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
275	planext_3	Num	8		Planned Extubation
276	planextc_3	Char	18	$18.	Planned Extubation
277	giint_3	Num	8		GI Intolerance
278	giintc_3	Char	14	$14.	GI Intolerance
279	invbside_3	Num	8		Invasive bedside procedure
280	invbsidec_3	Char	26	$26.	Invasive bedside procedure
281	leftfloor_3	Num	8		Patient left the floor
282	leftfloorc_3	Char	22	$22.	Patient left the floor
283	care_3	Num	8		Nursing Care (i.e. bathing, HOB down)
284	carec_3	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
285	medadm_3	Num	8		Medical Administration
286	medadmc_3	Char	22	$22.	Medical Administration
287	feedoffoth_3	Num	8		Other reason feed turned off:
288	feedoffothc_3	Char	5	$5.	Other reason feed turned off:
289	feedoffreas_3	Char	255	$255.	Other reason feed turned off: Reason
290	giintoleden_3	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?

Num	Variable	Type	Len	Format	Label
291	giintoledenc_3	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
292	diarrhea_3	Num	8		Diarrhea
293	diarrheac_3	Char	8	$8.	Diarrhea
294	vomiting_3	Num	8		Vomiting
295	vomitingc_3	Char	8	$8.	Vomiting
296	aspiration_3	Num	8		Aspiration
297	aspirationc_3	Char	10	$10.	Aspiration
298	regurg_3	Num	8		Regurgitation
299	regurgc_3	Char	13	$13.	Regurgitation
300	feedsite_3	Num	8		Insertion site of feeding tube
301	feedsitec_3	Char	12	$12.	Insertion site of feeding tube
302	tubesize_3	Num	8		Feeding tube size
303	tubesizec_3	Char	10	$10.	Feeding tube size
304	distalpos_3	Num	8		Distal position of feeding tube
305	distalposc_3	Char	12	$12.	Distal position of feeding tube
306	distalconf_3	Num	8		Was distal position confirmed during this 24 hour period?
307	distalconfc_3	Char	19	$19.	Was distal position confirmed during this 24 hour period?
308	distalhow_3	Num	8		Yes, how confirmed:
309	distalhowc_3	Char	15	$15.	Yes, how confirmed:
310	distaloth_3	Char	40	$40.	Yes, how confirmed: Other
311	fullcal_3	Num	8		Was rate advanced to full-calorie rate during this calendar day?
312	fullcalc_3	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
313	fullcaltm_3	Num	8	TIMEAMPM.	Yes, time full calorie reached:
314	pronevent_3	Num	8		Prone ventilation this 24 hour period?
315	proneventc_3	Char	3	$3.	Prone ventilation this 24 hour period?
316	recfeedx_3	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
317	goalratex_3	Char	64	$64.	Tube feeding goal rate (Not Done)
318	goalchangex_3	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
319	brand1x_3	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
320	feedhrsx_3	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
321	giintoledenx_3	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
322	distalconfx_3	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
323	fullcalx_3	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
324	surg_4	Num	8		Surgery
325	surgc_4	Char	7	$7.	Surgery
326	residual_4	Num	8		Elevated Residuals
327	residualc_4	Char	18	$18.	Elevated Residuals

Num	Variable	Type	Len	Format	Label
328	const_4	Num	8		Constipation
329	constc_4	Char	12	$12.	Constipation
330	cramp_4	Num	8		Abdominal distention or cramping
331	crampc_4	Char	32	$32.	Abdominal distention or cramping
332	feedoffx_4	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
333	feedsitex_4	Char	64	$64.	Insertion site of feeding tube (Not Done)
334	tubesizex_4	Char	64	$64.	Feeding tube size (Not Done)
335	distalposx_4	Char	64	$64.	Distal position of feeding tube (Not Done)
336	proneventx_4	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
337	recfeed_4	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
338	recfeedc_4	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
339	goalrate_4	Num	8		Tube feeding goal rate
340	goalchange_4	Num	8		Did the goal rate change during the 24 hour period?
341	goalchangec_4	Char	19	$19.	Did the goal rate change during the 24 hour period?
342	newgoal_4	Num	8		Yes, new goal rate
343	brand1_4	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
344	brand1vol_4	Num	8		Total volume of enteral formula 1 infused for 24 hour period
345	brand2_4	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
346	brand2vol_4	Num	8		Total volume of enteral formula 2 infused for 24 hour period
347	feedhrs_4	Num	8		Number of hours enteral tube feeds on for this 24 hour period
348	feedoff_4	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
349	feedoffc_4	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
350	planext_4	Num	8		Planned Extubation
351	planextc_4	Char	18	$18.	Planned Extubation
352	giint_4	Num	8		GI Intolerance
353	giintc_4	Char	14	$14.	GI Intolerance
354	invbside_4	Num	8		Invasive bedside procedure
355	invbsidec_4	Char	26	$26.	Invasive bedside procedure
356	leftfloor_4	Num	8		Patient left the floor
357	leftfloorc_4	Char	22	$22.	Patient left the floor
358	care_4	Num	8		Nursing Care (i.e. bathing, HOB down)
359	carec_4	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
360	medadm_4	Num	8		Medical Administration
361	medadmc_4	Char	22	$22.	Medical Administration
362	feedoffoth_4	Num	8		Other reason feed turned off:
363	feedoffothc_4	Char	5	$5.	Other reason feed turned off:
364	feedoffreas_4	Char	255	$255.	Other reason feed turned off: Reason

Num	Variable	Type	Len	Format	Label
365	giintoleden_4	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
366	giintoledenc_4	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
367	diarrhea_4	Num	8		Diarrhea
368	diarrheac_4	Char	8	$8.	Diarrhea
369	vomiting_4	Num	8		Vomiting
370	vomitingc_4	Char	8	$8.	Vomiting
371	aspiration_4	Num	8		Aspiration
372	aspirationc_4	Char	10	$10.	Aspiration
373	regurg_4	Num	8		Regurgitation
374	regurgc_4	Char	13	$13.	Regurgitation
375	feedsite_4	Num	8		Insertion site of feeding tube
376	feedsitec_4	Char	12	$12.	Insertion site of feeding tube
377	tubesize_4	Num	8		Feeding tube size
378	tubesizec_4	Char	10	$10.	Feeding tube size
379	distalpos_4	Num	8		Distal position of feeding tube
380	distalposc_4	Char	12	$12.	Distal position of feeding tube
381	distalconf_4	Num	8		Was distal position confirmed during this 24 hour period?
382	distalconfc_4	Char	19	$19.	Was distal position confirmed during this 24 hour period?
383	distalhow_4	Num	8		Yes, how confirmed:
384	distalhowc_4	Char	15	$15.	Yes, how confirmed:
385	distaloth_4	Char	40	$40.	Yes, how confirmed: Other
386	fullcal_4	Num	8		Was rate advanced to full-calorie rate during this calendar day?
387	fullcalc_4	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
388	fullcaltm_4	Num	8	TIMEAMPM.	Yes, time full calorie reached:
389	pronevent_4	Num	8		Prone ventilation this 24 hour period?
390	proneventc_4	Char	3	$3.	Prone ventilation this 24 hour period?
391	recfeedx_4	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
392	goalratex_4	Char	64	$64.	Tube feeding goal rate (Not Done)
393	goalchangex_4	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
394	brand1x_4	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
395	feedhrsx_4	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
396	giintoledenx_4	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
397	distalconfx_4	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
398	fullcalx_4	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
399	surg_5	Num	8		Surgery
400	surgc_5	Char	7	$7.	Surgery

Num	Variable	Type	Len	Format	Label
401	residual_5	Num	8		Elevated Residuals
402	residualc_5	Char	18	$18.	Elevated Residuals
403	const_5	Num	8		Constipation
404	constc_5	Char	12	$12.	Constipation
405	cramp_5	Num	8		Abdominal distention or cramping
406	crampc_5	Char	32	$32.	Abdominal distention or cramping
407	feedoffx_5	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
408	feedsitex_5	Char	64	$64.	Insertion site of feeding tube (Not Done)
409	tubesizex_5	Char	64	$64.	Feeding tube size (Not Done)
410	distalposx_5	Char	64	$64.	Distal position of feeding tube (Not Done)
411	proneventx_5	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
412	recfeed_5	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
413	recfeedc_5	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
414	goalrate_5	Num	8		Tube feeding goal rate
415	goalchange_5	Num	8		Did the goal rate change during the 24 hour period?
416	goalchangec_5	Char	19	$19.	Did the goal rate change during the 24 hour period?
417	newgoal_5	Num	8		Yes, new goal rate
418	brand1_5	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
419	brand1vol_5	Num	8		Total volume of enteral formula 1 infused for 24 hour period
420	brand2_5	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
421	brand2vol_5	Num	8		Total volume of enteral formula 2 infused for 24 hour period
422	feedhrs_5	Num	8		Number of hours enteral tube feeds on for this 24 hour period
423	feedoff_5	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
424	feedoffc_5	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
425	planext_5	Num	8		Planned Extubation
426	planextc_5	Char	18	$18.	Planned Extubation
427	giint_5	Num	8		GI Intolerance
428	giintc_5	Char	14	$14.	GI Intolerance
429	invbside_5	Num	8		Invasive bedside procedure
430	invbsidec_5	Char	26	$26.	Invasive bedside procedure
431	leftfloor_5	Num	8		Patient left the floor
432	leftfloorc_5	Char	22	$22.	Patient left the floor
433	care_5	Num	8		Nursing Care (i.e. bathing, HOB down)
434	carec_5	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
435	medadm_5	Num	8		Medical Administration
436	medadmc_5	Char	22	$22.	Medical Administration
437	feedoffoth_5	Num	8		Other reason feed turned off:

Num	Variable	Type	Len	Format	Label
438	feedoffothc_5	Char	5	$5.	Other reason feed turned off:
439	giintoleden_5	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
440	giintoledenc_5	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
441	diarrhea_5	Num	8		Diarrhea
442	diarrheac_5	Char	8	$8.	Diarrhea
443	vomiting_5	Num	8		Vomiting
444	vomitingc_5	Char	8	$8.	Vomiting
445	aspiration_5	Num	8		Aspiration
446	aspirationc_5	Char	10	$10.	Aspiration
447	regurg_5	Num	8		Regurgitation
448	regurgc_5	Char	13	$13.	Regurgitation
449	feedsite_5	Num	8		Insertion site of feeding tube
450	feedsitec_5	Char	12	$12.	Insertion site of feeding tube
451	tubesize_5	Num	8		Feeding tube size
452	tubesizec_5	Char	10	$10.	Feeding tube size
453	distalpos_5	Num	8		Distal position of feeding tube
454	distalposc_5	Char	12	$12.	Distal position of feeding tube
455	distalconf_5	Num	8		Was distal position confirmed during this 24 hour period?
456	distalconfc_5	Char	19	$19.	Was distal position confirmed during this 24 hour period?
457	distalhow_5	Num	8		Yes, how confirmed:
458	distalhowc_5	Char	15	$15.	Yes, how confirmed:
459	distaloth_5	Char	40	$40.	Yes, how confirmed: Other
460	fullcal_5	Num	8		Was rate advanced to full-calorie rate during this calendar day?
461	fullcalc_5	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
462	fullcaltm_5	Num	8	TIMEAMPM.	Yes, time full calorie reached:
463	pronevent_5	Num	8		Prone ventilation this 24 hour period?
464	proneventc_5	Char	3	$3.	Prone ventilation this 24 hour period?
465	recfeedx_5	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
466	goalratex_5	Char	64	$64.	Tube feeding goal rate (Not Done)
467	goalchangex_5	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
468	brand1x_5	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
469	feedhrsx_5	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
470	giintoledenx_5	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
471	distalconfx_5	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
472	fullcalx_5	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
473	surg_6	Num	8		Surgery

Num	Variable	Type	Len	Format	Label
474	surgc_6	Char	7	$7.	Surgery
475	residual_6	Num	8		Elevated Residuals
476	residualc_6	Char	18	$18.	Elevated Residuals
477	const_6	Num	8		Constipation
478	constc_6	Char	12	$12.	Constipation
479	cramp_6	Num	8		Abdominal distention or cramping
480	crampc_6	Char	32	$32.	Abdominal distention or cramping
481	feedoffx_6	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
482	feedsitex_6	Char	64	$64.	Insertion site of feeding tube (Not Done)
483	tubesizex_6	Char	64	$64.	Feeding tube size (Not Done)
484	distalposx_6	Char	64	$64.	Distal position of feeding tube (Not Done)
485	proneventx_6	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
486	recfeed_6	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
487	recfeedc_6	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
488	goalrate_6	Num	8		Tube feeding goal rate
489	goalchange_6	Num	8		Did the goal rate change during the 24 hour period?
490	goalchangec_6	Char	19	$19.	Did the goal rate change during the 24 hour period?
491	newgoal_6	Num	8		Yes, new goal rate
492	brand1_6	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
493	brand1vol_6	Num	8		Total volume of enteral formula 1 infused for 24 hour period
494	brand2_6	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
495	brand2vol_6	Num	8		Total volume of enteral formula 2 infused for 24 hour period
496	feedhrs_6	Num	8		Number of hours enteral tube feeds on for this 24 hour period
497	feedoff_6	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
498	feedoffc_6	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
499	planext_6	Num	8		Planned Extubation
500	planextc_6	Char	18	$18.	Planned Extubation
501	giint_6	Num	8		GI Intolerance
502	giintc_6	Char	14	$14.	GI Intolerance
503	invbside_6	Num	8		Invasive bedside procedure
504	invbsidec_6	Char	26	$26.	Invasive bedside procedure
505	leftfloor_6	Num	8		Patient left the floor
506	leftfloorc_6	Char	22	$22.	Patient left the floor
507	care_6	Num	8		Nursing Care (i.e. bathing, HOB down)
508	carec_6	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
509	medadm_6	Num	8		Medical Administration
510	medadmc_6	Char	22	$22.	Medical Administration

Num	Variable	Type	Len	Format	Label
511	feedoffoth_6	Num	8		Other reason feed turned off:
512	feedoffothc_6	Char	5	$5.	Other reason feed turned off:
513	feedoffreas_6	Char	255	$255.	Other reason feed turned off: Reason
514	giintoleden_6	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
515	giintoledenc_6	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
516	diarrhea_6	Num	8		Diarrhea
517	diarrheac_6	Char	8	$8.	Diarrhea
518	vomiting_6	Num	8		Vomiting
519	vomitingc_6	Char	8	$8.	Vomiting
520	aspiration_6	Num	8		Aspiration
521	aspirationc_6	Char	10	$10.	Aspiration
522	regurg_6	Num	8		Regurgitation
523	regurgc_6	Char	13	$13.	Regurgitation
524	feedsite_6	Num	8		Insertion site of feeding tube
525	feedsitec_6	Char	12	$12.	Insertion site of feeding tube
526	tubesize_6	Num	8		Feeding tube size
527	tubesizec_6	Char	10	$10.	Feeding tube size
528	distalpos_6	Num	8		Distal position of feeding tube
529	distalposc_6	Char	12	$12.	Distal position of feeding tube
530	distalconf_6	Num	8		Was distal position confirmed during this 24 hour period?
531	distalconfc_6	Char	19	$19.	Was distal position confirmed during this 24 hour period?
532	distalhow_6	Num	8		Yes, how confirmed:
533	distalhowc_6	Char	15	$15.	Yes, how confirmed:
534	distaloth_6	Char	40	$40.	Yes, how confirmed: Other
535	fullcal_6	Num	8		Was rate advanced to full-calorie rate during this calendar day?
536	fullcalc_6	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
537	fullcaltm_6	Num	8	TIMEAMPM.	Yes, time full calorie reached:
538	pronevent_6	Num	8		Prone ventilation this 24 hour period?
539	proneventc_6	Char	3	$3.	Prone ventilation this 24 hour period?
540	recfeedx_6	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
541	goalratex_6	Char	64	$64.	Tube feeding goal rate (Not Done)
542	goalchangex_6	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
543	brand1x_6	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
544	feedhrsx_6	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
545	giintoledenx_6	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
546	distalconfx_6	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)

Num	Variable	Type	Len	Format	Label
547	fullcalx_6	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
548	surg_7	Num	8		Surgery
549	surgc_7	Char	7	$7.	Surgery
550	residual_7	Num	8		Elevated Residuals
551	residualc_7	Char	18	$18.	Elevated Residuals
552	const_7	Num	8		Constipation
553	constc_7	Char	12	$12.	Constipation
554	cramp_7	Num	8		Abdominal distention or cramping
555	crampc_7	Char	32	$32.	Abdominal distention or cramping
556	feedoffx_7	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
557	feedsitex_7	Char	64	$64.	Insertion site of feeding tube (Not Done)
558	tubesizex_7	Char	64	$64.	Feeding tube size (Not Done)
559	distalposx_7	Char	64	$64.	Distal position of feeding tube (Not Done)
560	proneventx_7	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
561	recfeed_7	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
562	recfeedc_7	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
563	goalrate_7	Num	8		Tube feeding goal rate
564	goalchange_7	Num	8		Did the goal rate change during the 24 hour period?
565	goalchangec_7	Char	19	$19.	Did the goal rate change during the 24 hour period?
566	newgoal_7	Num	8		Yes, new goal rate
567	brand1_7	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
568	brand1vol_7	Num	8		Total volume of enteral formula 1 infused for 24 hour period
569	brand2_7	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
570	brand2vol_7	Num	8		Total volume of enteral formula 2 infused for 24 hour period
571	feedhrs_7	Num	8		Number of hours enteral tube feeds on for this 24 hour period
572	feedoff_7	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
573	feedoffc_7	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
574	planext_7	Num	8		Planned Extubation
575	planextc_7	Char	18	$18.	Planned Extubation
576	giint_7	Num	8		GI Intolerance
577	giintc_7	Char	14	$14.	GI Intolerance
578	invbside_7	Num	8		Invasive bedside procedure
579	invbsidec_7	Char	26	$26.	Invasive bedside procedure
580	leftfloor_7	Num	8		Patient left the floor
581	leftfloorc_7	Char	22	$22.	Patient left the floor
582	care_7	Num	8		Nursing Care (i.e. bathing, HOB down)
583	carec_7	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)

Num	Variable	Type	Len	Format	Label
584	medadm_7	Num	8		Medical Administration
585	medadmc_7	Char	22	$22.	Medical Administration
586	feedoffoth_7	Num	8		Other reason feed turned off:
587	feedoffothc_7	Char	5	$5.	Other reason feed turned off:
588	feedoffreas_7	Char	255	$255.	Other reason feed turned off: Reason
589	giintoleden_7	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
590	giintoledenc_7	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
591	diarrhea_7	Num	8		Diarrhea
592	diarrheac_7	Char	8	$8.	Diarrhea
593	vomiting_7	Num	8		Vomiting
594	vomitingc_7	Char	8	$8.	Vomiting
595	aspiration_7	Num	8		Aspiration
596	aspirationc_7	Char	10	$10.	Aspiration
597	regurg_7	Num	8		Regurgitation
598	regurgc_7	Char	13	$13.	Regurgitation
599	feedsite_7	Num	8		Insertion site of feeding tube
600	feedsitec_7	Char	12	$12.	Insertion site of feeding tube
601	tubesize_7	Num	8		Feeding tube size
602	tubesizec_7	Char	10	$10.	Feeding tube size
603	distalpos_7	Num	8		Distal position of feeding tube
604	distalposc_7	Char	12	$12.	Distal position of feeding tube
605	distalconf_7	Num	8		Was distal position confirmed during this 24 hour period?
606	distalconfc_7	Char	19	$19.	Was distal position confirmed during this 24 hour period?
607	distalhow_7	Num	8		Yes, how confirmed:
608	distalhowc_7	Char	15	$15.	Yes, how confirmed:
609	distaloth_7	Char	40	$40.	Yes, how confirmed: Other
610	fullcal_7	Num	8		Was rate advanced to full-calorie rate during this calendar day?
611	fullcalc_7	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
612	fullcaltm_7	Num	8	TIMEAMPM.	Yes, time full calorie reached:
613	pronevent_7	Num	8		Prone ventilation this 24 hour period?
614	proneventc_7	Char	3	$3.	Prone ventilation this 24 hour period?
615	recfeedx_7	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
616	goalratex_7	Char	64	$64.	Tube feeding goal rate (Not Done)
617	goalchangex_7	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
618	brand1x_7	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
619	feedhrsx_7	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)

Num	Variable	Type	Len	Format	Label
620	giintoledenx_7	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
621	distalconfx_7	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
622	fullcalx_7	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
623	surg_8	Num	8		Surgery
624	surgc_8	Char	7	$7.	Surgery
625	residual_8	Num	8		Elevated Residuals
626	residualc_8	Char	18	$18.	Elevated Residuals
627	const_8	Num	8		Constipation
628	constc_8	Char	12	$12.	Constipation
629	cramp_8	Num	8		Abdominal distention or cramping
630	crampc_8	Char	32	$32.	Abdominal distention or cramping
631	feedoffx_8	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
632	feedsitex_8	Char	64	$64.	Insertion site of feeding tube (Not Done)
633	tubesizex_8	Char	64	$64.	Feeding tube size (Not Done)
634	distalposx_8	Char	64	$64.	Distal position of feeding tube (Not Done)
635	proneventx_8	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
636	recfeed_8	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
637	recfeedc_8	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
638	goalrate_8	Num	8		Tube feeding goal rate
639	goalchange_8	Num	8		Did the goal rate change during the 24 hour period?
640	goalchangec_8	Char	19	$19.	Did the goal rate change during the 24 hour period?
641	newgoal_8	Num	8		Yes, new goal rate
642	brand1_8	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
643	brand1vol_8	Num	8		Total volume of enteral formula 1 infused for 24 hour period
644	brand2_8	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
645	brand2vol_8	Num	8		Total volume of enteral formula 2 infused for 24 hour period
646	feedhrs_8	Num	8		Number of hours enteral tube feeds on for this 24 hour period
647	feedoff_8	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
648	feedoffc_8	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
649	planext_8	Num	8		Planned Extubation
650	planextc_8	Char	18	$18.	Planned Extubation
651	giint_8	Num	8		GI Intolerance
652	giintc_8	Char	14	$14.	GI Intolerance
653	invbside_8	Num	8		Invasive bedside procedure
654	invbsidec_8	Char	26	$26.	Invasive bedside procedure
655	leftfloor_8	Num	8		Patient left the floor

Num	Variable	Type	Len	Format	Label
656	leftfloorc_8	Char	22	$22.	Patient left the floor
657	care_8	Num	8		Nursing Care (i.e. bathing, HOB down)
658	carec_8	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
659	medadm_8	Num	8		Medical Administration
660	medadmc_8	Char	22	$22.	Medical Administration
661	feedoffoth_8	Num	8		Other reason feed turned off:
662	feedoffothc_8	Char	5	$5.	Other reason feed turned off:
663	feedoffreas_8	Char	255	$255.	Other reason feed turned off: Reason
664	giintoleden_8	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
665	giintoledenc_8	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
666	diarrhea_8	Num	8		Diarrhea
667	diarrheac_8	Char	8	$8.	Diarrhea
668	vomiting_8	Num	8		Vomiting
669	vomitingc_8	Char	8	$8.	Vomiting
670	aspiration_8	Num	8		Aspiration
671	aspirationc_8	Char	10	$10.	Aspiration
672	regurg_8	Num	8		Regurgitation
673	regurgc_8	Char	13	$13.	Regurgitation
674	feedsite_8	Num	8		Insertion site of feeding tube
675	feedsitec_8	Char	12	$12.	Insertion site of feeding tube
676	tubesize_8	Num	8		Feeding tube size
677	tubesizec_8	Char	10	$10.	Feeding tube size
678	distalpos_8	Num	8		Distal position of feeding tube
679	distalposc_8	Char	12	$12.	Distal position of feeding tube
680	distalconf_8	Num	8		Was distal position confirmed during this 24 hour period?
681	distalconfc_8	Char	19	$19.	Was distal position confirmed during this 24 hour period?
682	distalhow_8	Num	8		Yes, how confirmed:
683	distalhowc_8	Char	15	$15.	Yes, how confirmed:
684	distaloth_8	Char	40	$40.	Yes, how confirmed: Other
685	fullcal_8	Num	8		Was rate advanced to full-calorie rate during this calendar day?
686	fullcalc_8	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
687	fullcaltm_8	Num	8	TIMEAMPM.	Yes, time full calorie reached:
688	pronevent_8	Num	8		Prone ventilation this 24 hour period?
689	proneventc_8	Char	3	$3.	Prone ventilation this 24 hour period?
690	recfeedx_8	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
691	goalratex_8	Char	64	$64.	Tube feeding goal rate (Not Done)
692	goalchangex_8	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)

Num	Variable	Type	Len	Format	Label
693	brand1x_8	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
694	feedhrsx_8	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
695	giintoledenx_8	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
696	distalconfx_8	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
697	fullcalx_8	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
698	surg_9	Num	8		Surgery
699	surgc_9	Char	7	$7.	Surgery
700	residual_9	Num	8		Elevated Residuals
701	residualc_9	Char	18	$18.	Elevated Residuals
702	const_9	Num	8		Constipation
703	constc_9	Char	12	$12.	Constipation
704	cramp_9	Num	8		Abdominal distention or cramping
705	crampc_9	Char	32	$32.	Abdominal distention or cramping
706	feedoffx_9	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
707	feedsitex_9	Char	64	$64.	Insertion site of feeding tube (Not Done)
708	tubesizex_9	Char	64	$64.	Feeding tube size (Not Done)
709	distalposx_9	Char	64	$64.	Distal position of feeding tube (Not Done)
710	proneventx_9	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
711	recfeed_9	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
712	recfeedc_9	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
713	goalrate_9	Num	8		Tube feeding goal rate
714	goalchange_9	Num	8		Did the goal rate change during the 24 hour period?
715	goalchangec_9	Char	19	$19.	Did the goal rate change during the 24 hour period?
716	newgoal_9	Num	8		Yes, new goal rate
717	brand1_9	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
718	brand1vol_9	Num	8		Total volume of enteral formula 1 infused for 24 hour period
719	brand2_9	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
720	brand2vol_9	Num	8		Total volume of enteral formula 2 infused for 24 hour period
721	feedhrs_9	Num	8		Number of hours enteral tube feeds on for this 24 hour period
722	feedoff_9	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
723	feedoffc_9	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
724	planext_9	Num	8		Planned Extubation
725	planextc_9	Char	18	$18.	Planned Extubation
726	giint_9	Num	8		GI Intolerance
727	giintc_9	Char	14	$14.	GI Intolerance
728	invbside_9	Num	8		Invasive bedside procedure

Num	Variable	Type	Len	Format	Label
729	invbsidec_9	Char	26	$26.	Invasive bedside procedure
730	leftfloor_9	Num	8		Patient left the floor
731	leftfloorc_9	Char	22	$22.	Patient left the floor
732	care_9	Num	8		Nursing Care (i.e. bathing, HOB down)
733	carec_9	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
734	medadm_9	Num	8		Medical Administration
735	medadmc_9	Char	22	$22.	Medical Administration
736	feedoffoth_9	Num	8		Other reason feed turned off:
737	feedoffothc_9	Char	5	$5.	Other reason feed turned off:
738	feedoffreas_9	Char	255	$255.	Other reason feed turned off: Reason
739	giintoleden_9	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
740	giintoledenc_9	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
741	diarrhea_9	Num	8		Diarrhea
742	diarrheac_9	Char	8	$8.	Diarrhea
743	vomiting_9	Num	8		Vomiting
744	vomitingc_9	Char	8	$8.	Vomiting
745	aspiration_9	Num	8		Aspiration
746	aspirationc_9	Char	10	$10.	Aspiration
747	regurg_9	Num	8		Regurgitation
748	regurgc_9	Char	13	$13.	Regurgitation
749	feedsite_9	Num	8		Insertion site of feeding tube
750	feedsitec_9	Char	12	$12.	Insertion site of feeding tube
751	tubesize_9	Num	8		Feeding tube size
752	tubesizec_9	Char	10	$10.	Feeding tube size
753	distalpos_9	Num	8		Distal position of feeding tube
754	distalposc_9	Char	12	$12.	Distal position of feeding tube
755	distalconf_9	Num	8		Was distal position confirmed during this 24 hour period?
756	distalconfc_9	Char	19	$19.	Was distal position confirmed during this 24 hour period?
757	distalhow_9	Num	8		Yes, how confirmed:
758	distalhowc_9	Char	15	$15.	Yes, how confirmed:
759	distaloth_9	Char	40	$40.	Yes, how confirmed: Other
760	fullcal_9	Num	8		Was rate advanced to full-calorie rate during this calendar day?
761	fullcalc_9	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
762	fullcaltm_9	Num	8	TIMEAMPM.	Yes, time full calorie reached:
763	pronevent_9	Num	8		Prone ventilation this 24 hour period?
764	proneventc_9	Char	3	$3.	Prone ventilation this 24 hour period?
765	recfeedx_9	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)

Num	Variable	Type	Len	Format	Label
766	goalratex_9	Char	64	$64.	Tube feeding goal rate (Not Done)
767	goalchangex_9	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
768	brand1x_9	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
769	feedhrsx_9	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
770	giintoledenx_9	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
771	distalconfx_9	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
772	fullcalx_9	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
773	surg_10	Num	8		Surgery
774	surgc_10	Char	7	$7.	Surgery
775	residual_10	Num	8		Elevated Residuals
776	residualc_10	Char	18	$18.	Elevated Residuals
777	const_10	Num	8		Constipation
778	constc_10	Char	12	$12.	Constipation
779	cramp_10	Num	8		Abdominal distention or cramping
780	crampc_10	Char	32	$32.	Abdominal distention or cramping
781	feedoffx_10	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
782	feedsitex_10	Char	64	$64.	Insertion site of feeding tube (Not Done)
783	tubesizex_10	Char	64	$64.	Feeding tube size (Not Done)
784	distalposx_10	Char	64	$64.	Distal position of feeding tube (Not Done)
785	proneventx_10	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
786	recfeed_10	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
787	recfeedc_10	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
788	goalrate_10	Num	8		Tube feeding goal rate
789	goalchange_10	Num	8		Did the goal rate change during the 24 hour period?
790	goalchangec_10	Char	19	$19.	Did the goal rate change during the 24 hour period?
791	newgoal_10	Num	8		Yes, new goal rate
792	brand1_10	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
793	brand1vol_10	Num	8		Total volume of enteral formula 1 infused for 24 hour period
794	brand2_10	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
795	brand2vol_10	Num	8		Total volume of enteral formula 2 infused for 24 hour period
796	feedhrs_10	Num	8		Number of hours enteral tube feeds on for this 24 hour period
797	feedoff_10	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
798	feedoffc_10	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
799	planext_10	Num	8		Planned Extubation
800	planextc_10	Char	18	$18.	Planned Extubation
801	giint_10	Num	8		GI Intolerance

Num	Variable	Type	Len	Format	Label
802	giintc_10	Char	14	$14.	GI Intolerance
803	invbside_10	Num	8		Invasive bedside procedure
804	invbsidec_10	Char	26	$26.	Invasive bedside procedure
805	leftfloor_10	Num	8		Patient left the floor
806	leftfloorc_10	Char	22	$22.	Patient left the floor
807	care_10	Num	8		Nursing Care (i.e. bathing, HOB down)
808	carec_10	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
809	medadm_10	Num	8		Medical Administration
810	medadmc_10	Char	22	$22.	Medical Administration
811	feedoffoth_10	Num	8		Other reason feed turned off:
812	feedoffothc_10	Char	5	$5.	Other reason feed turned off:
813	feedoffreas_10	Char	255	$255.	Other reason feed turned off: Reason
814	giintoleden_10	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
815	giintoledenc_10	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
816	diarrhea_10	Num	8		Diarrhea
817	diarrheac_10	Char	8	$8.	Diarrhea
818	vomiting_10	Num	8		Vomiting
819	vomitingc_10	Char	8	$8.	Vomiting
820	aspiration_10	Num	8		Aspiration
821	aspirationc_10	Char	10	$10.	Aspiration
822	regurg_10	Num	8		Regurgitation
823	regurgc_10	Char	13	$13.	Regurgitation
824	feedsite_10	Num	8		Insertion site of feeding tube
825	feedsitec_10	Char	12	$12.	Insertion site of feeding tube
826	tubesize_10	Num	8		Feeding tube size
827	tubesizec_10	Char	10	$10.	Feeding tube size
828	distalpos_10	Num	8		Distal position of feeding tube
829	distalposc_10	Char	12	$12.	Distal position of feeding tube
830	distalconf_10	Num	8		Was distal position confirmed during this 24 hour period?
831	distalconfc_10	Char	19	$19.	Was distal position confirmed during this 24 hour period?
832	distalhow_10	Num	8		Yes, how confirmed:
833	distalhowc_10	Char	15	$15.	Yes, how confirmed:
834	distaloth_10	Char	40	$40.	Yes, how confirmed: Other
835	fullcal_10	Num	8		Was rate advanced to full-calorie rate during this calendar day?
836	fullcalc_10	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
837	fullcaltm_10	Num	8	TIMEAMPM.	Yes, time full calorie reached:
838	pronevent_10	Num	8		Prone ventilation this 24 hour period?

Num	Variable	Type	Len	Format	Label
839	proneventc_10	Char	3	$3.	Prone ventilation this 24 hour period?
840	recfeedx_10	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
841	goalratex_10	Char	64	$64.	Tube feeding goal rate (Not Done)
842	goalchangex_10	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
843	brand1x_10	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
844	feedhrsx_10	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
845	giintoledenx_10	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
846	distalconfx_10	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
847	fullcalx_10	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
848	surg_11	Num	8		Surgery
849	surgc_11	Char	7	$7.	Surgery
850	residual_11	Num	8		Elevated Residuals
851	residualc_11	Char	18	$18.	Elevated Residuals
852	const_11	Num	8		Constipation
853	constc_11	Char	12	$12.	Constipation
854	cramp_11	Num	8		Abdominal distention or cramping
855	crampc_11	Char	32	$32.	Abdominal distention or cramping
856	feedoffx_11	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
857	feedsitex_11	Char	64	$64.	Insertion site of feeding tube (Not Done)
858	tubesizex_11	Char	64	$64.	Feeding tube size (Not Done)
859	distalposx_11	Char	64	$64.	Distal position of feeding tube (Not Done)
860	proneventx_11	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
861	recfeed_11	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
862	recfeedc_11	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
863	goalrate_11	Num	8		Tube feeding goal rate
864	goalchange_11	Num	8		Did the goal rate change during the 24 hour period?
865	goalchangec_11	Char	19	$19.	Did the goal rate change during the 24 hour period?
866	newgoal_11	Num	8		Yes, new goal rate
867	brand1_11	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
868	brand1vol_11	Num	8		Total volume of enteral formula 1 infused for 24 hour period
869	brand2_11	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
870	brand2vol_11	Num	8		Total volume of enteral formula 2 infused for 24 hour period
871	feedhrs_11	Num	8		Number of hours enteral tube feeds on for this 24 hour period
872	feedoff_11	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
873	feedoffc_11	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?

Num	Variable	Type	Len	Format	Label
874	planext_11	Num	8		Planned Extubation
875	planextc_11	Char	18	$18.	Planned Extubation
876	giint_11	Num	8		GI Intolerance
877	giintc_11	Char	14	$14.	GI Intolerance
878	invbside_11	Num	8		Invasive bedside procedure
879	invbsidec_11	Char	26	$26.	Invasive bedside procedure
880	leftfloor_11	Num	8		Patient left the floor
881	leftfloorc_11	Char	22	$22.	Patient left the floor
882	care_11	Num	8		Nursing Care (i.e. bathing, HOB down)
883	carec_11	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
884	medadm_11	Num	8		Medical Administration
885	medadmc_11	Char	22	$22.	Medical Administration
886	feedoffoth_11	Num	8		Other reason feed turned off:
887	feedoffothc_11	Char	5	$5.	Other reason feed turned off:
888	feedoffreas_11	Char	255	$255.	Other reason feed turned off: Reason
889	giintoleden_11	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
890	giintoledenc_11	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
891	diarrhea_11	Num	8		Diarrhea
892	diarrheac_11	Char	8	$8.	Diarrhea
893	vomiting_11	Num	8		Vomiting
894	vomitingc_11	Char	8	$8.	Vomiting
895	aspiration_11	Num	8		Aspiration
896	aspirationc_11	Char	10	$10.	Aspiration
897	regurg_11	Num	8		Regurgitation
898	regurgc_11	Char	13	$13.	Regurgitation
899	feedsite_11	Num	8		Insertion site of feeding tube
900	feedsitec_11	Char	12	$12.	Insertion site of feeding tube
901	tubesize_11	Num	8		Feeding tube size
902	tubesizec_11	Char	10	$10.	Feeding tube size
903	distalpos_11	Num	8		Distal position of feeding tube
904	distalposc_11	Char	12	$12.	Distal position of feeding tube
905	distalconf_11	Num	8		Was distal position confirmed during this 24 hour period?
906	distalconfc_11	Char	19	$19.	Was distal position confirmed during this 24 hour period?
907	distalhow_11	Num	8		Yes, how confirmed:
908	distalhowc_11	Char	15	$15.	Yes, how confirmed:
909	distaloth_11	Char	40	$40.	Yes, how confirmed: Other
910	fullcal_11	Num	8		Was rate advanced to full-calorie rate during this calendar day?

Num	Variable	Type	Len	Format	Label
911	fullcalc_11	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
912	fullcaltm_11	Num	8	TIMEAMPM.	Yes, time full calorie reached:
913	pronevent_11	Num	8		Prone ventilation this 24 hour period?
914	proneventc_11	Char	3	$3.	Prone ventilation this 24 hour period?
915	recfeedx_11	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
916	goalratex_11	Char	64	$64.	Tube feeding goal rate (Not Done)
917	goalchangex_11	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
918	brand1x_11	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
919	feedhrsx_11	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
920	giintoledenx_11	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
921	distalconfx_11	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
922	fullcalx_11	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
923	surg_12	Num	8		Surgery
924	surgc_12	Char	7	$7.	Surgery
925	residual_12	Num	8		Elevated Residuals
926	residualc_12	Char	18	$18.	Elevated Residuals
927	const_12	Num	8		Constipation
928	constc_12	Char	12	$12.	Constipation
929	cramp_12	Num	8		Abdominal distention or cramping
930	crampc_12	Char	32	$32.	Abdominal distention or cramping
931	feedoffx_12	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
932	feedsitex_12	Char	64	$64.	Insertion site of feeding tube (Not Done)
933	tubesizex_12	Char	64	$64.	Feeding tube size (Not Done)
934	distalposx_12	Char	64	$64.	Distal position of feeding tube (Not Done)
935	proneventx_12	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
936	recfeed_12	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
937	recfeedc_12	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
938	goalrate_12	Num	8		Tube feeding goal rate
939	goalchange_12	Num	8		Did the goal rate change during the 24 hour period?
940	goalchangec_12	Char	19	$19.	Did the goal rate change during the 24 hour period?
941	newgoal_12	Num	8		Yes, new goal rate
942	brand1_12	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
943	brand1vol_12	Num	8		Total volume of enteral formula 1 infused for 24 hour period
944	brand2_12	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
945	brand2vol_12	Num	8		Total volume of enteral formula 2 infused for 24 hour period
946	feedhrs_12	Num	8		Number of hours enteral tube feeds on for this 24 hour period

Num	Variable	Type	Len	Format	Label
947	feedoff_12	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
948	feedoffc_12	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
949	planext_12	Num	8		Planned Extubation
950	planextc_12	Char	18	$18.	Planned Extubation
951	giint_12	Num	8		GI Intolerance
952	giintc_12	Char	14	$14.	GI Intolerance
953	invbside_12	Num	8		Invasive bedside procedure
954	invbsidec_12	Char	26	$26.	Invasive bedside procedure
955	leftfloor_12	Num	8		Patient left the floor
956	leftfloorc_12	Char	22	$22.	Patient left the floor
957	care_12	Num	8		Nursing Care (i.e. bathing, HOB down)
958	carec_12	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
959	medadm_12	Num	8		Medical Administration
960	medadmc_12	Char	22	$22.	Medical Administration
961	feedoffoth_12	Num	8		Other reason feed turned off:
962	feedoffothc_12	Char	5	$5.	Other reason feed turned off:
963	feedoffreas_12	Char	255	$255.	Other reason feed turned off: Reason
964	giintoleden_12	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
965	giintoledenc_12	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
966	diarrhea_12	Num	8		Diarrhea
967	diarrheac_12	Char	8	$8.	Diarrhea
968	vomiting_12	Num	8		Vomiting
969	vomitingc_12	Char	8	$8.	Vomiting
970	aspiration_12	Num	8		Aspiration
971	aspirationc_12	Char	10	$10.	Aspiration
972	regurg_12	Num	8		Regurgitation
973	regurgc_12	Char	13	$13.	Regurgitation
974	feedsite_12	Num	8		Insertion site of feeding tube
975	feedsitec_12	Char	12	$12.	Insertion site of feeding tube
976	tubesize_12	Num	8		Feeding tube size
977	tubesizec_12	Char	10	$10.	Feeding tube size
978	distalpos_12	Num	8		Distal position of feeding tube
979	distalposc_12	Char	12	$12.	Distal position of feeding tube
980	distalconf_12	Num	8		Was distal position confirmed during this 24 hour period?
981	distalconfc_12	Char	19	$19.	Was distal position confirmed during this 24 hour period?
982	distalhow_12	Num	8		Yes, how confirmed:

Num	Variable	Type	Len	Format	Label
983	distalhowc_12	Char	15	$15.	Yes, how confirmed:
984	distaloth_12	Char	40	$40.	Yes, how confirmed: Other
985	fullcal_12	Num	8		Was rate advanced to full-calorie rate during this calendar day?
986	fullcalc_12	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
987	fullcaltm_12	Num	8	TIMEAMPM.	Yes, time full calorie reached:
988	pronevent_12	Num	8		Prone ventilation this 24 hour period?
989	proneventc_12	Char	3	$3.	Prone ventilation this 24 hour period?
990	recfeedx_12	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
991	goalratex_12	Char	64	$64.	Tube feeding goal rate (Not Done)
992	goalchangex_12	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
993	brand1x_12	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
994	feedhrsx_12	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
995	giintoledenx_12	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
996	distalconfx_12	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
997	fullcalx_12	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
998	alive12	Num	8		
999	home12	Num	8		
1000	breathwoa12	Num	8		
1001	inicu12	Num	8		
1002	eligible	Num	8		
1003	fullfd_0	Num	8		
1004	fullfd_1	Num	8		
1005	fullfd_2	Num	8		
1006	fullfd_3	Num	8		
1007	fullfd_4	Num	8		
1008	fullfd_5	Num	8		
1009	fullfd_6	Num	8		
1010	fullfd_7	Num	8		
1011	fullfd_8	Num	8		
1012	fullfd_9	Num	8		
1013	fullfd_10	Num	8		
1014	fullfd_11	Num	8		
1015	fullfd_12	Num	8		
1016	i	Num	8		
1017	dayrchgoal	Num	8		
1018	rchgoal	Num	8		

Data Set Name: feeding_bypt.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	proprate	Num	8		Propofol infusion rate at time of randomization
14	feedgrp	Num	8		Enteral Feeding Group
15	feedgrpc	Char	12	$12.	Enteral Feeding Group
16	prebasefeed	Num	8		In the 12 hours prior to enrollment, did patient receive any enteral feedings?
17	prebasefeedc	Char	72	$72.	In the 12 hours prior to enrollment, did patient receive any enteral feedings?
18	prebasevol	Num	8		Yes, enter total volume of enteral feeds in 12 hours prior to enrollment
19	feedinitdt	Num	8	BEST12.	Date and time of initiation of protocol specified enteral feeds (Day)
20	feedinittm	Num	8	TIME5.	Date and time of initiation of protocol specified enteral feeds (Time)
21	recfeed_0	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
22	recfeedc_0	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
23	goalrate_0	Num	8		Tube feeding goal rate
24	goalchange_0	Num	8		Did the goal rate change during the 24 hour period?
25	goalchangec_0	Char	19	$19.	Did the goal rate change during the 24 hour period?
26	newgoal_0	Num	8		New goal rate
27	brand1_0	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
28	brand1vol_0	Num	8		Total volume of enteral formula 1 infused for 24 hour period
29	brand2_0	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
30	brand2vol_0	Num	8		Total volume of enteral formula 2 infused for 24 hour period
31	feedhrs_0	Num	8		Number of hours enteral tube feeds on for this 24 hour period
32	feedoff_0	Num	8		Feeds turned off for > 30 minutes within 24 hour period
33	feedoffc_0	Char	61	$61.	Feeds turned off for > 30 minutes within 24 hour period
34	planext_0	Num	8		Planned Extubation
35	planextc_0	Char	18	$18.	Planned Extubation
36	giint_0	Num	8		GI Intolerance

Num	Variable	Type	Len	Format	Label
37	giintc_0	Char	14	$14.	GI Intolerance
38	invbside_0	Num	8		Invasive bedside procedure
39	invbsidec_0	Char	26	$26.	Invasive bedside procedure
40	surgery	Num	8		Surgery
41	surgeryc	Char	7	$7.	Surgery
42	leftfloor_0	Num	8		Patient left the floor
43	leftfloorc_0	Char	22	$22.	Patient left the floor
44	care_0	Num	8		Nursing Care(ie bathing, HOB down)
45	carec_0	Char	34	$34.	Nursing Care(ie bathing, HOB down)
46	medadm_0	Num	8		Medical Administration
47	medadmc_0	Char	22	$22.	Medical Administration
48	feedoffoth_0	Num	8		Other reason feed turned off:
49	feedoffothc_0	Char	5	$5.	Other reason feed turned off:
50	feedoffreas_0	Char	255	$255.	Other reason feed turned off: Reason
51	giintoleden_0	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
52	giintoledenc_0	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
53	diarrhea_0	Num	8		Diarrhea
54	diarrheac_0	Char	8	$8.	Diarrhea
55	vomiting_0	Num	8		Vomiting
56	vomitingc_0	Char	8	$8.	Vomiting
57	aspiration_0	Num	8		Aspiration
58	aspirationc_0	Char	10	$10.	Aspiration
59	elevresid	Num	8		Elevated Residuals
60	elevresidc	Char	18	$18.	Elevated Residuals
61	regurg_0	Num	8		Regurgitation
62	regurgc_0	Char	13	$13.	Regurgitation
63	constipation	Num	8		Constipation
64	constipationc	Char	12	$12.	Constipation
65	cramping	Num	8		Abdominal distention or cramping
66	crampingc	Char	32	$32.	Abdominal distention or cramping
67	feedsite_0	Num	8		Insertion site of feeding tube:
68	feedsitec_0	Char	12	$12.	Insertion site of feeding tube:
69	tubesize_0	Num	8		Feeding tube size
70	tubesizec_0	Char	10	$10.	Feeding tube size
71	distalpos_0	Num	8		Distal position of feeding tube
72	distalposc_0	Char	12	$12.	Distal position of feeding tube
73	distalconf_0	Num	8		Was distal position confirmed during this 24 hour period?

Num	Variable	Type	Len	Format	Label
74	distalconfc_0	Char	19	$19.	Was distal position confirmed during this 24 hour period?
75	distalhow_0	Num	8		How distal position confirmed
76	distalhowc_0	Char	15	$15.	How distal position confirmed
77	distaloth_0	Char	40	$40.	How distal position confirmed: other
78	fullcal_0	Num	8		Was rate advanced to full-calorie rate during this calendar day?
79	fullcalc_0	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
80	fullcaltm_0	Num	8	TIMEAMPM.	time full calorie reached
81	pronevent_0	Num	8		Prone ventilation between randomization and midnight?
82	proneventc_0	Char	3	$3.	Prone ventilation between randomization and midnight?
83	propratex	Char	64	$64.	Propofol infusion rate at time of randomization (Not Done)
84	feedgrpx	Char	64	$64.	Enteral Feeding Group (Not Done)
85	prebasefeedx	Char	64	$64.	In the 12 hours prior to enrollment, did patient receive any enteral feedings? (Not Done)
86	feedinitdtmx	Char	64	$64.	Date and time of initiation of protocol specified enteral feeds (Not Done)
87	recfeedx_0	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
88	goalratex_0	Char	64	$64.	Tube feeding goal rate (Not Done)
89	goalchangex_0	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
90	brand1x_0	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period (Not Done)
91	feedhrsx_0	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
92	feedoffX	Char	64	$64.	Feeds turned off for > 30 minutes within 24 hour period (Not Done)
93	giintoledenx_0	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
94	feedsiteX	Char	64	$64.	Insertion site of feeding tube: (Not Done)
95	tubesizeX	Char	64	$64.	Feeding tube size (Not Done)
96	distalposX	Char	64	$64.	Distal position of feeding tube (Not Done)
97	distalconfx_0	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
98	fullcalx_0	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
99	surg_1	Num	8		Surgery
100	surgc_1	Char	7	$7.	Surgery
101	residual_1	Num	8		Elevated Residuals
102	residualc_1	Char	18	$18.	Elevated Residuals
103	const_1	Num	8		Constipation
104	constc_1	Char	12	$12.	Constipation
105	cramp_1	Num	8		Abdominal distention or cramping
106	crampc_1	Char	32	$32.	Abdominal distention or cramping
107	feedoffx_1	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
108	feedsitex_1	Char	64	$64.	Insertion site of feeding tube (Not Done)
109	tubesizex_1	Char	64	$64.	Feeding tube size (Not Done)

Num	Variable	Type	Len	Format	Label
110	distalposx_1	Char	64	$64.	Distal position of feeding tube (Not Done)
111	proneventx_1	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
112	recfeed_1	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
113	recfeedc_1	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
114	goalrate_1	Num	8		Tube feeding goal rate
115	goalchange_1	Num	8		Did the goal rate change during the 24 hour period?
116	goalchangec_1	Char	19	$19.	Did the goal rate change during the 24 hour period?
117	newgoal_1	Num	8		Yes, new goal rate
118	brand1_1	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
119	brand1vol_1	Num	8		Total volume of enteral formula 1 infused for 24 hour period
120	brand2_1	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
121	brand2vol_1	Num	8		Total volume of enteral formula 2 infused for 24 hour period
122	feedhrs_1	Num	8		Number of hours enteral tube feeds on for this 24 hour period
123	feedoff_1	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
124	feedoffc_1	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
125	planext_1	Num	8		Planned Extubation
126	planextc_1	Char	18	$18.	Planned Extubation
127	giint_1	Num	8		GI Intolerance
128	giintc_1	Char	14	$14.	GI Intolerance
129	invbside_1	Num	8		Invasive bedside procedure
130	invbsidec_1	Char	26	$26.	Invasive bedside procedure
131	leftfloor_1	Num	8		Patient left the floor
132	leftfloorc_1	Char	22	$22.	Patient left the floor
133	care_1	Num	8		Nursing Care (i.e. bathing, HOB down)
134	carec_1	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
135	medadm_1	Num	8		Medical Administration
136	medadmc_1	Char	22	$22.	Medical Administration
137	feedoffoth_1	Num	8		Other reason feed turned off:
138	feedoffothc_1	Char	5	$5.	Other reason feed turned off:
139	feedoffreas_1	Char	255	$255.	Other reason feed turned off: Reason
140	giintoleden_1	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
141	giintoledenc_1	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
142	diarrhea_1	Num	8		Diarrhea
143	diarrheac_1	Char	8	$8.	Diarrhea
144	vomiting_1	Num	8		Vomiting
145	vomitingc_1	Char	8	$8.	Vomiting

Num	Variable	Type	Len	Format	Label
146	aspiration_1	Num	8		Aspiration
147	aspirationc_1	Char	10	$10.	Aspiration
148	regurg_1	Num	8		Regurgitation
149	regurgc_1	Char	13	$13.	Regurgitation
150	feedsite_1	Num	8		Insertion site of feeding tube
151	feedsitec_1	Char	12	$12.	Insertion site of feeding tube
152	tubesize_1	Num	8		Feeding tube size
153	tubesizec_1	Char	10	$10.	Feeding tube size
154	distalpos_1	Num	8		Distal position of feeding tube
155	distalposc_1	Char	12	$12.	Distal position of feeding tube
156	distalconf_1	Num	8		Was distal position confirmed during this 24 hour period?
157	distalconfc_1	Char	19	$19.	Was distal position confirmed during this 24 hour period?
158	distalhow_1	Num	8		Yes, how confirmed:
159	distalhowc_1	Char	15	$15.	Yes, how confirmed:
160	distaloth_1	Char	40	$40.	Yes, how confirmed: Other
161	fullcal_1	Num	8		Was rate advanced to full-calorie rate during this calendar day?
162	fullcalc_1	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
163	fullcaltm_1	Num	8	TIMEAMPM.	Yes, time full calorie reached:
164	pronevent_1	Num	8		Prone ventilation this 24 hour period?
165	proneventc_1	Char	3	$3.	Prone ventilation this 24 hour period?
166	recfeedx_1	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
167	goalratex_1	Char	64	$64.	Tube feeding goal rate (Not Done)
168	goalchangex_1	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
169	brand1x_1	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
170	feedhrsx_1	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
171	giintoledenx_1	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
172	distalconfx_1	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
173	fullcalx_1	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
174	surg_2	Num	8		Surgery
175	surgc_2	Char	7	$7.	Surgery
176	residual_2	Num	8		Elevated Residuals
177	residualc_2	Char	18	$18.	Elevated Residuals
178	const_2	Num	8		Constipation
179	constc_2	Char	12	$12.	Constipation
180	cramp_2	Num	8		Abdominal distention or cramping
181	crampc_2	Char	32	$32.	Abdominal distention or cramping
182	feedoffx_2	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)

Num	Variable	Type	Len	Format	Label
183	feedsitex_2	Char	64	$64.	Insertion site of feeding tube (Not Done)
184	tubesizex_2	Char	64	$64.	Feeding tube size (Not Done)
185	distalposx_2	Char	64	$64.	Distal position of feeding tube (Not Done)
186	proneventx_2	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
187	recfeed_2	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
188	recfeedc_2	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
189	goalrate_2	Num	8		Tube feeding goal rate
190	goalchange_2	Num	8		Did the goal rate change during the 24 hour period?
191	goalchangec_2	Char	19	$19.	Did the goal rate change during the 24 hour period?
192	newgoal_2	Num	8		Yes, new goal rate
193	brand1_2	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
194	brand1vol_2	Num	8		Total volume of enteral formula 1 infused for 24 hour period
195	brand2_2	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
196	brand2vol_2	Num	8		Total volume of enteral formula 2 infused for 24 hour period
197	feedhrs_2	Num	8		Number of hours enteral tube feeds on for this 24 hour period
198	feedoff_2	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
199	feedoffc_2	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
200	planext_2	Num	8		Planned Extubation
201	planextc_2	Char	18	$18.	Planned Extubation
202	giint_2	Num	8		GI Intolerance
203	giintc_2	Char	14	$14.	GI Intolerance
204	invbside_2	Num	8		Invasive bedside procedure
205	invbsidec_2	Char	26	$26.	Invasive bedside procedure
206	leftfloor_2	Num	8		Patient left the floor
207	leftfloorc_2	Char	22	$22.	Patient left the floor
208	care_2	Num	8		Nursing Care (i.e. bathing, HOB down)
209	carec_2	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
210	medadm_2	Num	8		Medical Administration
211	medadmc_2	Char	22	$22.	Medical Administration
212	feedoffoth_2	Num	8		Other reason feed turned off:
213	feedoffothc_2	Char	5	$5.	Other reason feed turned off:
214	feedoffreas_2	Char	255	$255.	Other reason feed turned off: Reason
215	giintoleden_2	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
216	giintoledenc_2	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
217	diarrhea_2	Num	8		Diarrhea
218	diarrheac_2	Char	8	$8.	Diarrhea

Num	Variable	Type	Len	Format	Label
219	vomiting_2	Num	8		Vomiting
220	vomitingc_2	Char	8	$8.	Vomiting
221	aspiration_2	Num	8		Aspiration
222	aspirationc_2	Char	10	$10.	Aspiration
223	regurg_2	Num	8		Regurgitation
224	regurgc_2	Char	13	$13.	Regurgitation
225	feedsite_2	Num	8		Insertion site of feeding tube
226	feedsitec_2	Char	12	$12.	Insertion site of feeding tube
227	tubesize_2	Num	8		Feeding tube size
228	tubesizec_2	Char	10	$10.	Feeding tube size
229	distalpos_2	Num	8		Distal position of feeding tube
230	distalposc_2	Char	12	$12.	Distal position of feeding tube
231	distalconf_2	Num	8		Was distal position confirmed during this 24 hour period?
232	distalconfc_2	Char	19	$19.	Was distal position confirmed during this 24 hour period?
233	distalhow_2	Num	8		Yes, how confirmed:
234	distalhowc_2	Char	15	$15.	Yes, how confirmed:
235	distaloth_2	Char	40	$40.	Yes, how confirmed: Other
236	fullcal_2	Num	8		Was rate advanced to full-calorie rate during this calendar day?
237	fullcalc_2	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
238	fullcaltm_2	Num	8	TIMEAMPM.	Yes, time full calorie reached:
239	pronevent_2	Num	8		Prone ventilation this 24 hour period?
240	proneventc_2	Char	3	$3.	Prone ventilation this 24 hour period?
241	recfeedx_2	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
242	goalratex_2	Char	64	$64.	Tube feeding goal rate (Not Done)
243	goalchangex_2	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
244	brand1x_2	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
245	feedhrsx_2	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
246	giintoledenx_2	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
247	distalconfx_2	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
248	fullcalx_2	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
249	surg_3	Num	8		Surgery
250	surgc_3	Char	7	$7.	Surgery
251	residual_3	Num	8		Elevated Residuals
252	residualc_3	Char	18	$18.	Elevated Residuals
253	const_3	Num	8		Constipation
254	constc_3	Char	12	$12.	Constipation
255	cramp_3	Num	8		Abdominal distention or cramping

Num	Variable	Type	Len	Format	Label
256	crampc_3	Char	32	$32.	Abdominal distention or cramping
257	feedoffx_3	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
258	feedsitex_3	Char	64	$64.	Insertion site of feeding tube (Not Done)
259	tubesizex_3	Char	64	$64.	Feeding tube size (Not Done)
260	distalposx_3	Char	64	$64.	Distal position of feeding tube (Not Done)
261	proneventx_3	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
262	recfeed_3	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
263	recfeedc_3	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
264	goalrate_3	Num	8		Tube feeding goal rate
265	goalchange_3	Num	8		Did the goal rate change during the 24 hour period?
266	goalchangec_3	Char	19	$19.	Did the goal rate change during the 24 hour period?
267	newgoal_3	Num	8		Yes, new goal rate
268	brand1_3	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
269	brand1vol_3	Num	8		Total volume of enteral formula 1 infused for 24 hour period
270	brand2_3	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
271	brand2vol_3	Num	8		Total volume of enteral formula 2 infused for 24 hour period
272	feedhrs_3	Num	8		Number of hours enteral tube feeds on for this 24 hour period
273	feedoff_3	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
274	feedoffc_3	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
275	planext_3	Num	8		Planned Extubation
276	planextc_3	Char	18	$18.	Planned Extubation
277	giint_3	Num	8		GI Intolerance
278	giintc_3	Char	14	$14.	GI Intolerance
279	invbside_3	Num	8		Invasive bedside procedure
280	invbsidec_3	Char	26	$26.	Invasive bedside procedure
281	leftfloor_3	Num	8		Patient left the floor
282	leftfloorc_3	Char	22	$22.	Patient left the floor
283	care_3	Num	8		Nursing Care (i.e. bathing, HOB down)
284	carec_3	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
285	medadm_3	Num	8		Medical Administration
286	medadmc_3	Char	22	$22.	Medical Administration
287	feedoffoth_3	Num	8		Other reason feed turned off:
288	feedoffothc_3	Char	5	$5.	Other reason feed turned off:
289	feedoffreas_3	Char	255	$255.	Other reason feed turned off: Reason
290	giintoleden_3	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?

Num	Variable	Type	Len	Format	Label
291	giintoledenc_3	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
292	diarrhea_3	Num	8		Diarrhea
293	diarrheac_3	Char	8	$8.	Diarrhea
294	vomiting_3	Num	8		Vomiting
295	vomitingc_3	Char	8	$8.	Vomiting
296	aspiration_3	Num	8		Aspiration
297	aspirationc_3	Char	10	$10.	Aspiration
298	regurg_3	Num	8		Regurgitation
299	regurgc_3	Char	13	$13.	Regurgitation
300	feedsite_3	Num	8		Insertion site of feeding tube
301	feedsitec_3	Char	12	$12.	Insertion site of feeding tube
302	tubesize_3	Num	8		Feeding tube size
303	tubesizec_3	Char	10	$10.	Feeding tube size
304	distalpos_3	Num	8		Distal position of feeding tube
305	distalposc_3	Char	12	$12.	Distal position of feeding tube
306	distalconf_3	Num	8		Was distal position confirmed during this 24 hour period?
307	distalconfc_3	Char	19	$19.	Was distal position confirmed during this 24 hour period?
308	distalhow_3	Num	8		Yes, how confirmed:
309	distalhowc_3	Char	15	$15.	Yes, how confirmed:
310	distaloth_3	Char	40	$40.	Yes, how confirmed: Other
311	fullcal_3	Num	8		Was rate advanced to full-calorie rate during this calendar day?
312	fullcalc_3	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
313	fullcaltm_3	Num	8	TIMEAMPM.	Yes, time full calorie reached:
314	pronevent_3	Num	8		Prone ventilation this 24 hour period?
315	proneventc_3	Char	3	$3.	Prone ventilation this 24 hour period?
316	recfeedx_3	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
317	goalratex_3	Char	64	$64.	Tube feeding goal rate (Not Done)
318	goalchangex_3	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
319	brand1x_3	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
320	feedhrsx_3	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
321	giintoledenx_3	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
322	distalconfx_3	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
323	fullcalx_3	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
324	surg_4	Num	8		Surgery
325	surgc_4	Char	7	$7.	Surgery
326	residual_4	Num	8		Elevated Residuals
327	residualc_4	Char	18	$18.	Elevated Residuals

Num	Variable	Type	Len	Format	Label
328	const_4	Num	8		Constipation
329	constc_4	Char	12	$12.	Constipation
330	cramp_4	Num	8		Abdominal distention or cramping
331	crampc_4	Char	32	$32.	Abdominal distention or cramping
332	feedoffx_4	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
333	feedsitex_4	Char	64	$64.	Insertion site of feeding tube (Not Done)
334	tubesizex_4	Char	64	$64.	Feeding tube size (Not Done)
335	distalposx_4	Char	64	$64.	Distal position of feeding tube (Not Done)
336	proneventx_4	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
337	recfeed_4	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
338	recfeedc_4	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
339	goalrate_4	Num	8		Tube feeding goal rate
340	goalchange_4	Num	8		Did the goal rate change during the 24 hour period?
341	goalchangec_4	Char	19	$19.	Did the goal rate change during the 24 hour period?
342	newgoal_4	Num	8		Yes, new goal rate
343	brand1_4	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
344	brand1vol_4	Num	8		Total volume of enteral formula 1 infused for 24 hour period
345	brand2_4	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
346	brand2vol_4	Num	8		Total volume of enteral formula 2 infused for 24 hour period
347	feedhrs_4	Num	8		Number of hours enteral tube feeds on for this 24 hour period
348	feedoff_4	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
349	feedoffc_4	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
350	planext_4	Num	8		Planned Extubation
351	planextc_4	Char	18	$18.	Planned Extubation
352	giint_4	Num	8		GI Intolerance
353	giintc_4	Char	14	$14.	GI Intolerance
354	invbside_4	Num	8		Invasive bedside procedure
355	invbsidec_4	Char	26	$26.	Invasive bedside procedure
356	leftfloor_4	Num	8		Patient left the floor
357	leftfloorc_4	Char	22	$22.	Patient left the floor
358	care_4	Num	8		Nursing Care (i.e. bathing, HOB down)
359	carec_4	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
360	medadm_4	Num	8		Medical Administration
361	medadmc_4	Char	22	$22.	Medical Administration
362	feedoffoth_4	Num	8		Other reason feed turned off:
363	feedoffothc_4	Char	5	$5.	Other reason feed turned off:
364	feedoffreas_4	Char	255	$255.	Other reason feed turned off: Reason

Num	Variable	Type	Len	Format	Label
365	giintoleden_4	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
366	giintoledenc_4	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
367	diarrhea_4	Num	8		Diarrhea
368	diarrheac_4	Char	8	$8.	Diarrhea
369	vomiting_4	Num	8		Vomiting
370	vomitingc_4	Char	8	$8.	Vomiting
371	aspiration_4	Num	8		Aspiration
372	aspirationc_4	Char	10	$10.	Aspiration
373	regurg_4	Num	8		Regurgitation
374	regurgc_4	Char	13	$13.	Regurgitation
375	feedsite_4	Num	8		Insertion site of feeding tube
376	feedsitec_4	Char	12	$12.	Insertion site of feeding tube
377	tubesize_4	Num	8		Feeding tube size
378	tubesizec_4	Char	10	$10.	Feeding tube size
379	distalpos_4	Num	8		Distal position of feeding tube
380	distalposc_4	Char	12	$12.	Distal position of feeding tube
381	distalconf_4	Num	8		Was distal position confirmed during this 24 hour period?
382	distalconfc_4	Char	19	$19.	Was distal position confirmed during this 24 hour period?
383	distalhow_4	Num	8		Yes, how confirmed:
384	distalhowc_4	Char	15	$15.	Yes, how confirmed:
385	distaloth_4	Char	40	$40.	Yes, how confirmed: Other
386	fullcal_4	Num	8		Was rate advanced to full-calorie rate during this calendar day?
387	fullcalc_4	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
388	fullcaltm_4	Num	8	TIMEAMPM.	Yes, time full calorie reached:
389	pronevent_4	Num	8		Prone ventilation this 24 hour period?
390	proneventc_4	Char	3	$3.	Prone ventilation this 24 hour period?
391	recfeedx_4	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
392	goalratex_4	Char	64	$64.	Tube feeding goal rate (Not Done)
393	goalchangex_4	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
394	brand1x_4	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
395	feedhrsx_4	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
396	giintoledenx_4	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
397	distalconfx_4	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
398	fullcalx_4	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
399	surg_5	Num	8		Surgery
400	surgc_5	Char	7	$7.	Surgery

Num	Variable	Type	Len	Format	Label
401	residual_5	Num	8		Elevated Residuals
402	residualc_5	Char	18	$18.	Elevated Residuals
403	const_5	Num	8		Constipation
404	constc_5	Char	12	$12.	Constipation
405	cramp_5	Num	8		Abdominal distention or cramping
406	crampc_5	Char	32	$32.	Abdominal distention or cramping
407	feedoffx_5	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
408	feedsitex_5	Char	64	$64.	Insertion site of feeding tube (Not Done)
409	tubesizex_5	Char	64	$64.	Feeding tube size (Not Done)
410	distalposx_5	Char	64	$64.	Distal position of feeding tube (Not Done)
411	proneventx_5	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
412	recfeed_5	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
413	recfeedc_5	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
414	goalrate_5	Num	8		Tube feeding goal rate
415	goalchange_5	Num	8		Did the goal rate change during the 24 hour period?
416	goalchangec_5	Char	19	$19.	Did the goal rate change during the 24 hour period?
417	newgoal_5	Num	8		Yes, new goal rate
418	brand1_5	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
419	brand1vol_5	Num	8		Total volume of enteral formula 1 infused for 24 hour period
420	brand2_5	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
421	brand2vol_5	Num	8		Total volume of enteral formula 2 infused for 24 hour period
422	feedhrs_5	Num	8		Number of hours enteral tube feeds on for this 24 hour period
423	feedoff_5	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
424	feedoffc_5	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
425	planext_5	Num	8		Planned Extubation
426	planextc_5	Char	18	$18.	Planned Extubation
427	giint_5	Num	8		GI Intolerance
428	giintc_5	Char	14	$14.	GI Intolerance
429	invbside_5	Num	8		Invasive bedside procedure
430	invbsidec_5	Char	26	$26.	Invasive bedside procedure
431	leftfloor_5	Num	8		Patient left the floor
432	leftfloorc_5	Char	22	$22.	Patient left the floor
433	care_5	Num	8		Nursing Care (i.e. bathing, HOB down)
434	carec_5	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
435	medadm_5	Num	8		Medical Administration
436	medadmc_5	Char	22	$22.	Medical Administration
437	feedoffoth_5	Num	8		Other reason feed turned off:

Num	Variable	Type	Len	Format	Label
438	feedoffothc_5	Char	5	$5.	Other reason feed turned off:
439	giintoleden_5	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
440	giintoledenc_5	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
441	diarrhea_5	Num	8		Diarrhea
442	diarrheac_5	Char	8	$8.	Diarrhea
443	vomiting_5	Num	8		Vomiting
444	vomitingc_5	Char	8	$8.	Vomiting
445	aspiration_5	Num	8		Aspiration
446	aspirationc_5	Char	10	$10.	Aspiration
447	regurg_5	Num	8		Regurgitation
448	regurgc_5	Char	13	$13.	Regurgitation
449	feedsite_5	Num	8		Insertion site of feeding tube
450	feedsitec_5	Char	12	$12.	Insertion site of feeding tube
451	tubesize_5	Num	8		Feeding tube size
452	tubesizec_5	Char	10	$10.	Feeding tube size
453	distalpos_5	Num	8		Distal position of feeding tube
454	distalposc_5	Char	12	$12.	Distal position of feeding tube
455	distalconf_5	Num	8		Was distal position confirmed during this 24 hour period?
456	distalconfc_5	Char	19	$19.	Was distal position confirmed during this 24 hour period?
457	distalhow_5	Num	8		Yes, how confirmed:
458	distalhowc_5	Char	15	$15.	Yes, how confirmed:
459	distaloth_5	Char	40	$40.	Yes, how confirmed: Other
460	fullcal_5	Num	8		Was rate advanced to full-calorie rate during this calendar day?
461	fullcalc_5	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
462	fullcaltm_5	Num	8	TIMEAMPM.	Yes, time full calorie reached:
463	pronevent_5	Num	8		Prone ventilation this 24 hour period?
464	proneventc_5	Char	3	$3.	Prone ventilation this 24 hour period?
465	recfeedx_5	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
466	goalratex_5	Char	64	$64.	Tube feeding goal rate (Not Done)
467	goalchangex_5	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
468	brand1x_5	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
469	feedhrsx_5	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
470	giintoledenx_5	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
471	distalconfx_5	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
472	fullcalx_5	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
473	surg_6	Num	8		Surgery

Num	Variable	Type	Len	Format	Label
474	surgc_6	Char	7	$7.	Surgery
475	residual_6	Num	8		Elevated Residuals
476	residualc_6	Char	18	$18.	Elevated Residuals
477	const_6	Num	8		Constipation
478	constc_6	Char	12	$12.	Constipation
479	cramp_6	Num	8		Abdominal distention or cramping
480	crampc_6	Char	32	$32.	Abdominal distention or cramping
481	feedoffx_6	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
482	feedsitex_6	Char	64	$64.	Insertion site of feeding tube (Not Done)
483	tubesizex_6	Char	64	$64.	Feeding tube size (Not Done)
484	distalposx_6	Char	64	$64.	Distal position of feeding tube (Not Done)
485	proneventx_6	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
486	recfeed_6	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
487	recfeedc_6	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
488	goalrate_6	Num	8		Tube feeding goal rate
489	goalchange_6	Num	8		Did the goal rate change during the 24 hour period?
490	goalchangec_6	Char	19	$19.	Did the goal rate change during the 24 hour period?
491	newgoal_6	Num	8		Yes, new goal rate
492	brand1_6	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
493	brand1vol_6	Num	8		Total volume of enteral formula 1 infused for 24 hour period
494	brand2_6	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
495	brand2vol_6	Num	8		Total volume of enteral formula 2 infused for 24 hour period
496	feedhrs_6	Num	8		Number of hours enteral tube feeds on for this 24 hour period
497	feedoff_6	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
498	feedoffc_6	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
499	planext_6	Num	8		Planned Extubation
500	planextc_6	Char	18	$18.	Planned Extubation
501	giint_6	Num	8		GI Intolerance
502	giintc_6	Char	14	$14.	GI Intolerance
503	invbside_6	Num	8		Invasive bedside procedure
504	invbsidec_6	Char	26	$26.	Invasive bedside procedure
505	leftfloor_6	Num	8		Patient left the floor
506	leftfloorc_6	Char	22	$22.	Patient left the floor
507	care_6	Num	8		Nursing Care (i.e. bathing, HOB down)
508	carec_6	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
509	medadm_6	Num	8		Medical Administration
510	medadmc_6	Char	22	$22.	Medical Administration

Num	Variable	Type	Len	Format	Label
511	feedoffoth_6	Num	8		Other reason feed turned off:
512	feedoffothc_6	Char	5	$5.	Other reason feed turned off:
513	feedoffreas_6	Char	255	$255.	Other reason feed turned off: Reason
514	giintoleden_6	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
515	giintoledenc_6	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
516	diarrhea_6	Num	8		Diarrhea
517	diarrheac_6	Char	8	$8.	Diarrhea
518	vomiting_6	Num	8		Vomiting
519	vomitingc_6	Char	8	$8.	Vomiting
520	aspiration_6	Num	8		Aspiration
521	aspirationc_6	Char	10	$10.	Aspiration
522	regurg_6	Num	8		Regurgitation
523	regurgc_6	Char	13	$13.	Regurgitation
524	feedsite_6	Num	8		Insertion site of feeding tube
525	feedsitec_6	Char	12	$12.	Insertion site of feeding tube
526	tubesize_6	Num	8		Feeding tube size
527	tubesizec_6	Char	10	$10.	Feeding tube size
528	distalpos_6	Num	8		Distal position of feeding tube
529	distalposc_6	Char	12	$12.	Distal position of feeding tube
530	distalconf_6	Num	8		Was distal position confirmed during this 24 hour period?
531	distalconfc_6	Char	19	$19.	Was distal position confirmed during this 24 hour period?
532	distalhow_6	Num	8		Yes, how confirmed:
533	distalhowc_6	Char	15	$15.	Yes, how confirmed:
534	distaloth_6	Char	40	$40.	Yes, how confirmed: Other
535	fullcal_6	Num	8		Was rate advanced to full-calorie rate during this calendar day?
536	fullcalc_6	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
537	fullcaltm_6	Num	8	TIMEAMPM.	Yes, time full calorie reached:
538	pronevent_6	Num	8		Prone ventilation this 24 hour period?
539	proneventc_6	Char	3	$3.	Prone ventilation this 24 hour period?
540	recfeedx_6	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
541	goalratex_6	Char	64	$64.	Tube feeding goal rate (Not Done)
542	goalchangex_6	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
543	brand1x_6	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
544	feedhrsx_6	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
545	giintoledenx_6	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
546	distalconfx_6	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)

Num	Variable	Type	Len	Format	Label
547	fullcalx_6	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
548	surg_7	Num	8		Surgery
549	surgc_7	Char	7	$7.	Surgery
550	residual_7	Num	8		Elevated Residuals
551	residualc_7	Char	18	$18.	Elevated Residuals
552	const_7	Num	8		Constipation
553	constc_7	Char	12	$12.	Constipation
554	cramp_7	Num	8		Abdominal distention or cramping
555	crampc_7	Char	32	$32.	Abdominal distention or cramping
556	feedoffx_7	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
557	feedsitex_7	Char	64	$64.	Insertion site of feeding tube (Not Done)
558	tubesizex_7	Char	64	$64.	Feeding tube size (Not Done)
559	distalposx_7	Char	64	$64.	Distal position of feeding tube (Not Done)
560	proneventx_7	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
561	recfeed_7	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
562	recfeedc_7	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
563	goalrate_7	Num	8		Tube feeding goal rate
564	goalchange_7	Num	8		Did the goal rate change during the 24 hour period?
565	goalchangec_7	Char	19	$19.	Did the goal rate change during the 24 hour period?
566	newgoal_7	Num	8		Yes, new goal rate
567	brand1_7	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
568	brand1vol_7	Num	8		Total volume of enteral formula 1 infused for 24 hour period
569	brand2_7	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
570	brand2vol_7	Num	8		Total volume of enteral formula 2 infused for 24 hour period
571	feedhrs_7	Num	8		Number of hours enteral tube feeds on for this 24 hour period
572	feedoff_7	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
573	feedoffc_7	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
574	planext_7	Num	8		Planned Extubation
575	planextc_7	Char	18	$18.	Planned Extubation
576	giint_7	Num	8		GI Intolerance
577	giintc_7	Char	14	$14.	GI Intolerance
578	invbside_7	Num	8		Invasive bedside procedure
579	invbsidec_7	Char	26	$26.	Invasive bedside procedure
580	leftfloor_7	Num	8		Patient left the floor
581	leftfloorc_7	Char	22	$22.	Patient left the floor
582	care_7	Num	8		Nursing Care (i.e. bathing, HOB down)
583	carec_7	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)

Num	Variable	Type	Len	Format	Label
584	medadm_7	Num	8		Medical Administration
585	medadmc_7	Char	22	$22.	Medical Administration
586	feedoffoth_7	Num	8		Other reason feed turned off:
587	feedoffothc_7	Char	5	$5.	Other reason feed turned off:
588	feedoffreas_7	Char	255	$255.	Other reason feed turned off: Reason
589	giintoleden_7	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
590	giintoledenc_7	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
591	diarrhea_7	Num	8		Diarrhea
592	diarrheac_7	Char	8	$8.	Diarrhea
593	vomiting_7	Num	8		Vomiting
594	vomitingc_7	Char	8	$8.	Vomiting
595	aspiration_7	Num	8		Aspiration
596	aspirationc_7	Char	10	$10.	Aspiration
597	regurg_7	Num	8		Regurgitation
598	regurgc_7	Char	13	$13.	Regurgitation
599	feedsite_7	Num	8		Insertion site of feeding tube
600	feedsitec_7	Char	12	$12.	Insertion site of feeding tube
601	tubesize_7	Num	8		Feeding tube size
602	tubesizec_7	Char	10	$10.	Feeding tube size
603	distalpos_7	Num	8		Distal position of feeding tube
604	distalposc_7	Char	12	$12.	Distal position of feeding tube
605	distalconf_7	Num	8		Was distal position confirmed during this 24 hour period?
606	distalconfc_7	Char	19	$19.	Was distal position confirmed during this 24 hour period?
607	distalhow_7	Num	8		Yes, how confirmed:
608	distalhowc_7	Char	15	$15.	Yes, how confirmed:
609	distaloth_7	Char	40	$40.	Yes, how confirmed: Other
610	fullcal_7	Num	8		Was rate advanced to full-calorie rate during this calendar day?
611	fullcalc_7	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
612	fullcaltm_7	Num	8	TIMEAMPM.	Yes, time full calorie reached:
613	pronevent_7	Num	8		Prone ventilation this 24 hour period?
614	proneventc_7	Char	3	$3.	Prone ventilation this 24 hour period?
615	recfeedx_7	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
616	goalratex_7	Char	64	$64.	Tube feeding goal rate (Not Done)
617	goalchangex_7	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
618	brand1x_7	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
619	feedhrsx_7	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)

Num	Variable	Type	Len	Format	Label
620	giintoledenx_7	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
621	distalconfx_7	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
622	fullcalx_7	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
623	surg_8	Num	8		Surgery
624	surgc_8	Char	7	$7.	Surgery
625	residual_8	Num	8		Elevated Residuals
626	residualc_8	Char	18	$18.	Elevated Residuals
627	const_8	Num	8		Constipation
628	constc_8	Char	12	$12.	Constipation
629	cramp_8	Num	8		Abdominal distention or cramping
630	crampc_8	Char	32	$32.	Abdominal distention or cramping
631	feedoffx_8	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
632	feedsitex_8	Char	64	$64.	Insertion site of feeding tube (Not Done)
633	tubesizex_8	Char	64	$64.	Feeding tube size (Not Done)
634	distalposx_8	Char	64	$64.	Distal position of feeding tube (Not Done)
635	proneventx_8	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
636	recfeed_8	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
637	recfeedc_8	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
638	goalrate_8	Num	8		Tube feeding goal rate
639	goalchange_8	Num	8		Did the goal rate change during the 24 hour period?
640	goalchangec_8	Char	19	$19.	Did the goal rate change during the 24 hour period?
641	newgoal_8	Num	8		Yes, new goal rate
642	brand1_8	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
643	brand1vol_8	Num	8		Total volume of enteral formula 1 infused for 24 hour period
644	brand2_8	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
645	brand2vol_8	Num	8		Total volume of enteral formula 2 infused for 24 hour period
646	feedhrs_8	Num	8		Number of hours enteral tube feeds on for this 24 hour period
647	feedoff_8	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
648	feedoffc_8	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
649	planext_8	Num	8		Planned Extubation
650	planextc_8	Char	18	$18.	Planned Extubation
651	giint_8	Num	8		GI Intolerance
652	giintc_8	Char	14	$14.	GI Intolerance
653	invbside_8	Num	8		Invasive bedside procedure
654	invbsidec_8	Char	26	$26.	Invasive bedside procedure
655	leftfloor_8	Num	8		Patient left the floor

Num	Variable	Type	Len	Format	Label
656	leftfloorc_8	Char	22	$22.	Patient left the floor
657	care_8	Num	8		Nursing Care (i.e. bathing, HOB down)
658	carec_8	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
659	medadm_8	Num	8		Medical Administration
660	medadmc_8	Char	22	$22.	Medical Administration
661	feedoffoth_8	Num	8		Other reason feed turned off:
662	feedoffothc_8	Char	5	$5.	Other reason feed turned off:
663	feedoffreas_8	Char	255	$255.	Other reason feed turned off: Reason
664	giintoleden_8	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
665	giintoledenc_8	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
666	diarrhea_8	Num	8		Diarrhea
667	diarrheac_8	Char	8	$8.	Diarrhea
668	vomiting_8	Num	8		Vomiting
669	vomitingc_8	Char	8	$8.	Vomiting
670	aspiration_8	Num	8		Aspiration
671	aspirationc_8	Char	10	$10.	Aspiration
672	regurg_8	Num	8		Regurgitation
673	regurgc_8	Char	13	$13.	Regurgitation
674	feedsite_8	Num	8		Insertion site of feeding tube
675	feedsitec_8	Char	12	$12.	Insertion site of feeding tube
676	tubesize_8	Num	8		Feeding tube size
677	tubesizec_8	Char	10	$10.	Feeding tube size
678	distalpos_8	Num	8		Distal position of feeding tube
679	distalposc_8	Char	12	$12.	Distal position of feeding tube
680	distalconf_8	Num	8		Was distal position confirmed during this 24 hour period?
681	distalconfc_8	Char	19	$19.	Was distal position confirmed during this 24 hour period?
682	distalhow_8	Num	8		Yes, how confirmed:
683	distalhowc_8	Char	15	$15.	Yes, how confirmed:
684	distaloth_8	Char	40	$40.	Yes, how confirmed: Other
685	fullcal_8	Num	8		Was rate advanced to full-calorie rate during this calendar day?
686	fullcalc_8	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
687	fullcaltm_8	Num	8	TIMEAMPM.	Yes, time full calorie reached:
688	pronevent_8	Num	8		Prone ventilation this 24 hour period?
689	proneventc_8	Char	3	$3.	Prone ventilation this 24 hour period?
690	recfeedx_8	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
691	goalratex_8	Char	64	$64.	Tube feeding goal rate (Not Done)
692	goalchangex_8	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)

Num	Variable	Type	Len	Format	Label
693	brand1x_8	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
694	feedhrsx_8	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
695	giintoledenx_8	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
696	distalconfx_8	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
697	fullcalx_8	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
698	surg_9	Num	8		Surgery
699	surgc_9	Char	7	$7.	Surgery
700	residual_9	Num	8		Elevated Residuals
701	residualc_9	Char	18	$18.	Elevated Residuals
702	const_9	Num	8		Constipation
703	constc_9	Char	12	$12.	Constipation
704	cramp_9	Num	8		Abdominal distention or cramping
705	crampc_9	Char	32	$32.	Abdominal distention or cramping
706	feedoffx_9	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
707	feedsitex_9	Char	64	$64.	Insertion site of feeding tube (Not Done)
708	tubesizex_9	Char	64	$64.	Feeding tube size (Not Done)
709	distalposx_9	Char	64	$64.	Distal position of feeding tube (Not Done)
710	proneventx_9	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
711	recfeed_9	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
712	recfeedc_9	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
713	goalrate_9	Num	8		Tube feeding goal rate
714	goalchange_9	Num	8		Did the goal rate change during the 24 hour period?
715	goalchangec_9	Char	19	$19.	Did the goal rate change during the 24 hour period?
716	newgoal_9	Num	8		Yes, new goal rate
717	brand1_9	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
718	brand1vol_9	Num	8		Total volume of enteral formula 1 infused for 24 hour period
719	brand2_9	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
720	brand2vol_9	Num	8		Total volume of enteral formula 2 infused for 24 hour period
721	feedhrs_9	Num	8		Number of hours enteral tube feeds on for this 24 hour period
722	feedoff_9	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
723	feedoffc_9	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
724	planext_9	Num	8		Planned Extubation
725	planextc_9	Char	18	$18.	Planned Extubation
726	giint_9	Num	8		GI Intolerance
727	giintc_9	Char	14	$14.	GI Intolerance
728	invbside_9	Num	8		Invasive bedside procedure

Num	Variable	Type	Len	Format	Label
729	invbsidec_9	Char	26	$26.	Invasive bedside procedure
730	leftfloor_9	Num	8		Patient left the floor
731	leftfloorc_9	Char	22	$22.	Patient left the floor
732	care_9	Num	8		Nursing Care (i.e. bathing, HOB down)
733	carec_9	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
734	medadm_9	Num	8		Medical Administration
735	medadmc_9	Char	22	$22.	Medical Administration
736	feedoffoth_9	Num	8		Other reason feed turned off:
737	feedoffothc_9	Char	5	$5.	Other reason feed turned off:
738	feedoffreas_9	Char	255	$255.	Other reason feed turned off: Reason
739	giintoleden_9	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
740	giintoledenc_9	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
741	diarrhea_9	Num	8		Diarrhea
742	diarrheac_9	Char	8	$8.	Diarrhea
743	vomiting_9	Num	8		Vomiting
744	vomitingc_9	Char	8	$8.	Vomiting
745	aspiration_9	Num	8		Aspiration
746	aspirationc_9	Char	10	$10.	Aspiration
747	regurg_9	Num	8		Regurgitation
748	regurgc_9	Char	13	$13.	Regurgitation
749	feedsite_9	Num	8		Insertion site of feeding tube
750	feedsitec_9	Char	12	$12.	Insertion site of feeding tube
751	tubesize_9	Num	8		Feeding tube size
752	tubesizec_9	Char	10	$10.	Feeding tube size
753	distalpos_9	Num	8		Distal position of feeding tube
754	distalposc_9	Char	12	$12.	Distal position of feeding tube
755	distalconf_9	Num	8		Was distal position confirmed during this 24 hour period?
756	distalconfc_9	Char	19	$19.	Was distal position confirmed during this 24 hour period?
757	distalhow_9	Num	8		Yes, how confirmed:
758	distalhowc_9	Char	15	$15.	Yes, how confirmed:
759	distaloth_9	Char	40	$40.	Yes, how confirmed: Other
760	fullcal_9	Num	8		Was rate advanced to full-calorie rate during this calendar day?
761	fullcalc_9	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
762	fullcaltm_9	Num	8	TIMEAMPM.	Yes, time full calorie reached:
763	pronevent_9	Num	8		Prone ventilation this 24 hour period?
764	proneventc_9	Char	3	$3.	Prone ventilation this 24 hour period?
765	recfeedx_9	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)

Num	Variable	Type	Len	Format	Label
766	goalratex_9	Char	64	$64.	Tube feeding goal rate (Not Done)
767	goalchangex_9	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
768	brand1x_9	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
769	feedhrsx_9	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
770	giintoledenx_9	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
771	distalconfx_9	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
772	fullcalx_9	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
773	surg_10	Num	8		Surgery
774	surgc_10	Char	7	$7.	Surgery
775	residual_10	Num	8		Elevated Residuals
776	residualc_10	Char	18	$18.	Elevated Residuals
777	const_10	Num	8		Constipation
778	constc_10	Char	12	$12.	Constipation
779	cramp_10	Num	8		Abdominal distention or cramping
780	crampc_10	Char	32	$32.	Abdominal distention or cramping
781	feedoffx_10	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
782	feedsitex_10	Char	64	$64.	Insertion site of feeding tube (Not Done)
783	tubesizex_10	Char	64	$64.	Feeding tube size (Not Done)
784	distalposx_10	Char	64	$64.	Distal position of feeding tube (Not Done)
785	proneventx_10	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
786	recfeed_10	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
787	recfeedc_10	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
788	goalrate_10	Num	8		Tube feeding goal rate
789	goalchange_10	Num	8		Did the goal rate change during the 24 hour period?
790	goalchangec_10	Char	19	$19.	Did the goal rate change during the 24 hour period?
791	newgoal_10	Num	8		Yes, new goal rate
792	brand1_10	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
793	brand1vol_10	Num	8		Total volume of enteral formula 1 infused for 24 hour period
794	brand2_10	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
795	brand2vol_10	Num	8		Total volume of enteral formula 2 infused for 24 hour period
796	feedhrs_10	Num	8		Number of hours enteral tube feeds on for this 24 hour period
797	feedoff_10	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
798	feedoffc_10	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
799	planext_10	Num	8		Planned Extubation
800	planextc_10	Char	18	$18.	Planned Extubation
801	giint_10	Num	8		GI Intolerance

Num	Variable	Type	Len	Format	Label
802	giintc_10	Char	14	$14.	GI Intolerance
803	invbside_10	Num	8		Invasive bedside procedure
804	invbsidec_10	Char	26	$26.	Invasive bedside procedure
805	leftfloor_10	Num	8		Patient left the floor
806	leftfloorc_10	Char	22	$22.	Patient left the floor
807	care_10	Num	8		Nursing Care (i.e. bathing, HOB down)
808	carec_10	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
809	medadm_10	Num	8		Medical Administration
810	medadmc_10	Char	22	$22.	Medical Administration
811	feedoffoth_10	Num	8		Other reason feed turned off:
812	feedoffothc_10	Char	5	$5.	Other reason feed turned off:
813	feedoffreas_10	Char	255	$255.	Other reason feed turned off: Reason
814	giintoleden_10	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
815	giintoledenc_10	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
816	diarrhea_10	Num	8		Diarrhea
817	diarrheac_10	Char	8	$8.	Diarrhea
818	vomiting_10	Num	8		Vomiting
819	vomitingc_10	Char	8	$8.	Vomiting
820	aspiration_10	Num	8		Aspiration
821	aspirationc_10	Char	10	$10.	Aspiration
822	regurg_10	Num	8		Regurgitation
823	regurgc_10	Char	13	$13.	Regurgitation
824	feedsite_10	Num	8		Insertion site of feeding tube
825	feedsitec_10	Char	12	$12.	Insertion site of feeding tube
826	tubesize_10	Num	8		Feeding tube size
827	tubesizec_10	Char	10	$10.	Feeding tube size
828	distalpos_10	Num	8		Distal position of feeding tube
829	distalposc_10	Char	12	$12.	Distal position of feeding tube
830	distalconf_10	Num	8		Was distal position confirmed during this 24 hour period?
831	distalconfc_10	Char	19	$19.	Was distal position confirmed during this 24 hour period?
832	distalhow_10	Num	8		Yes, how confirmed:
833	distalhowc_10	Char	15	$15.	Yes, how confirmed:
834	distaloth_10	Char	40	$40.	Yes, how confirmed: Other
835	fullcal_10	Num	8		Was rate advanced to full-calorie rate during this calendar day?
836	fullcalc_10	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
837	fullcaltm_10	Num	8	TIMEAMPM.	Yes, time full calorie reached:
838	pronevent_10	Num	8		Prone ventilation this 24 hour period?

Num	Variable	Type	Len	Format	Label
839	proneventc_10	Char	3	$3.	Prone ventilation this 24 hour period?
840	recfeedx_10	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
841	goalratex_10	Char	64	$64.	Tube feeding goal rate (Not Done)
842	goalchangex_10	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
843	brand1x_10	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
844	feedhrsx_10	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
845	giintoledenx_10	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
846	distalconfx_10	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
847	fullcalx_10	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
848	surg_11	Num	8		Surgery
849	surgc_11	Char	7	$7.	Surgery
850	residual_11	Num	8		Elevated Residuals
851	residualc_11	Char	18	$18.	Elevated Residuals
852	const_11	Num	8		Constipation
853	constc_11	Char	12	$12.	Constipation
854	cramp_11	Num	8		Abdominal distention or cramping
855	crampc_11	Char	32	$32.	Abdominal distention or cramping
856	feedoffx_11	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
857	feedsitex_11	Char	64	$64.	Insertion site of feeding tube (Not Done)
858	tubesizex_11	Char	64	$64.	Feeding tube size (Not Done)
859	distalposx_11	Char	64	$64.	Distal position of feeding tube (Not Done)
860	proneventx_11	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
861	recfeed_11	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
862	recfeedc_11	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
863	goalrate_11	Num	8		Tube feeding goal rate
864	goalchange_11	Num	8		Did the goal rate change during the 24 hour period?
865	goalchangec_11	Char	19	$19.	Did the goal rate change during the 24 hour period?
866	newgoal_11	Num	8		Yes, new goal rate
867	brand1_11	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
868	brand1vol_11	Num	8		Total volume of enteral formula 1 infused for 24 hour period
869	brand2_11	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
870	brand2vol_11	Num	8		Total volume of enteral formula 2 infused for 24 hour period
871	feedhrs_11	Num	8		Number of hours enteral tube feeds on for this 24 hour period
872	feedoff_11	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
873	feedoffc_11	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?

Num	Variable	Type	Len	Format	Label
874	planext_11	Num	8		Planned Extubation
875	planextc_11	Char	18	$18.	Planned Extubation
876	giint_11	Num	8		GI Intolerance
877	giintc_11	Char	14	$14.	GI Intolerance
878	invbside_11	Num	8		Invasive bedside procedure
879	invbsidec_11	Char	26	$26.	Invasive bedside procedure
880	leftfloor_11	Num	8		Patient left the floor
881	leftfloorc_11	Char	22	$22.	Patient left the floor
882	care_11	Num	8		Nursing Care (i.e. bathing, HOB down)
883	carec_11	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
884	medadm_11	Num	8		Medical Administration
885	medadmc_11	Char	22	$22.	Medical Administration
886	feedoffoth_11	Num	8		Other reason feed turned off:
887	feedoffothc_11	Char	5	$5.	Other reason feed turned off:
888	feedoffreas_11	Char	255	$255.	Other reason feed turned off: Reason
889	giintoleden_11	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
890	giintoledenc_11	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
891	diarrhea_11	Num	8		Diarrhea
892	diarrheac_11	Char	8	$8.	Diarrhea
893	vomiting_11	Num	8		Vomiting
894	vomitingc_11	Char	8	$8.	Vomiting
895	aspiration_11	Num	8		Aspiration
896	aspirationc_11	Char	10	$10.	Aspiration
897	regurg_11	Num	8		Regurgitation
898	regurgc_11	Char	13	$13.	Regurgitation
899	feedsite_11	Num	8		Insertion site of feeding tube
900	feedsitec_11	Char	12	$12.	Insertion site of feeding tube
901	tubesize_11	Num	8		Feeding tube size
902	tubesizec_11	Char	10	$10.	Feeding tube size
903	distalpos_11	Num	8		Distal position of feeding tube
904	distalposc_11	Char	12	$12.	Distal position of feeding tube
905	distalconf_11	Num	8		Was distal position confirmed during this 24 hour period?
906	distalconfc_11	Char	19	$19.	Was distal position confirmed during this 24 hour period?
907	distalhow_11	Num	8		Yes, how confirmed:
908	distalhowc_11	Char	15	$15.	Yes, how confirmed:
909	distaloth_11	Char	40	$40.	Yes, how confirmed: Other
910	fullcal_11	Num	8		Was rate advanced to full-calorie rate during this calendar day?

Num	Variable	Type	Len	Format	Label
911	fullcalc_11	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
912	fullcaltm_11	Num	8	TIMEAMPM.	Yes, time full calorie reached:
913	pronevent_11	Num	8		Prone ventilation this 24 hour period?
914	proneventc_11	Char	3	$3.	Prone ventilation this 24 hour period?
915	recfeedx_11	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
916	goalratex_11	Char	64	$64.	Tube feeding goal rate (Not Done)
917	goalchangex_11	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
918	brand1x_11	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
919	feedhrsx_11	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
920	giintoledenx_11	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
921	distalconfx_11	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
922	fullcalx_11	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
923	surg_12	Num	8		Surgery
924	surgc_12	Char	7	$7.	Surgery
925	residual_12	Num	8		Elevated Residuals
926	residualc_12	Char	18	$18.	Elevated Residuals
927	const_12	Num	8		Constipation
928	constc_12	Char	12	$12.	Constipation
929	cramp_12	Num	8		Abdominal distention or cramping
930	crampc_12	Char	32	$32.	Abdominal distention or cramping
931	feedoffx_12	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
932	feedsitex_12	Char	64	$64.	Insertion site of feeding tube (Not Done)
933	tubesizex_12	Char	64	$64.	Feeding tube size (Not Done)
934	distalposx_12	Char	64	$64.	Distal position of feeding tube (Not Done)
935	proneventx_12	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
936	recfeed_12	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
937	recfeedc_12	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
938	goalrate_12	Num	8		Tube feeding goal rate
939	goalchange_12	Num	8		Did the goal rate change during the 24 hour period?
940	goalchangec_12	Char	19	$19.	Did the goal rate change during the 24 hour period?
941	newgoal_12	Num	8		Yes, new goal rate
942	brand1_12	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
943	brand1vol_12	Num	8		Total volume of enteral formula 1 infused for 24 hour period
944	brand2_12	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
945	brand2vol_12	Num	8		Total volume of enteral formula 2 infused for 24 hour period
946	feedhrs_12	Num	8		Number of hours enteral tube feeds on for this 24 hour period

Num	Variable	Type	Len	Format	Label
947	feedoff_12	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
948	feedoffc_12	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
949	planext_12	Num	8		Planned Extubation
950	planextc_12	Char	18	$18.	Planned Extubation
951	giint_12	Num	8		GI Intolerance
952	giintc_12	Char	14	$14.	GI Intolerance
953	invbside_12	Num	8		Invasive bedside procedure
954	invbsidec_12	Char	26	$26.	Invasive bedside procedure
955	leftfloor_12	Num	8		Patient left the floor
956	leftfloorc_12	Char	22	$22.	Patient left the floor
957	care_12	Num	8		Nursing Care (i.e. bathing, HOB down)
958	carec_12	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
959	medadm_12	Num	8		Medical Administration
960	medadmc_12	Char	22	$22.	Medical Administration
961	feedoffoth_12	Num	8		Other reason feed turned off:
962	feedoffothc_12	Char	5	$5.	Other reason feed turned off:
963	feedoffreas_12	Char	255	$255.	Other reason feed turned off: Reason
964	giintoleden_12	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
965	giintoledenc_12	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
966	diarrhea_12	Num	8		Diarrhea
967	diarrheac_12	Char	8	$8.	Diarrhea
968	vomiting_12	Num	8		Vomiting
969	vomitingc_12	Char	8	$8.	Vomiting
970	aspiration_12	Num	8		Aspiration
971	aspirationc_12	Char	10	$10.	Aspiration
972	regurg_12	Num	8		Regurgitation
973	regurgc_12	Char	13	$13.	Regurgitation
974	feedsite_12	Num	8		Insertion site of feeding tube
975	feedsitec_12	Char	12	$12.	Insertion site of feeding tube
976	tubesize_12	Num	8		Feeding tube size
977	tubesizec_12	Char	10	$10.	Feeding tube size
978	distalpos_12	Num	8		Distal position of feeding tube
979	distalposc_12	Char	12	$12.	Distal position of feeding tube
980	distalconf_12	Num	8		Was distal position confirmed during this 24 hour period?
981	distalconfc_12	Char	19	$19.	Was distal position confirmed during this 24 hour period?
982	distalhow_12	Num	8		Yes, how confirmed:

Num	Variable	Type	Len	Format	Label
983	distalhowc_12	Char	15	$15.	Yes, how confirmed:
984	distaloth_12	Char	40	$40.	Yes, how confirmed: Other
985	fullcal_12	Num	8		Was rate advanced to full-calorie rate during this calendar day?
986	fullcalc_12	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
987	fullcaltm_12	Num	8	TIMEAMPM.	Yes, time full calorie reached:
988	pronevent_12	Num	8		Prone ventilation this 24 hour period?
989	proneventc_12	Char	3	$3.	Prone ventilation this 24 hour period?
990	recfeedx_12	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
991	goalratex_12	Char	64	$64.	Tube feeding goal rate (Not Done)
992	goalchangex_12	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
993	brand1x_12	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
994	feedhrsx_12	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
995	giintoledenx_12	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
996	distalconfx_12	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
997	fullcalx_12	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)

Data Set Name: funnel_data.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	status	Num	8		Patient status (through Day 90):
14	homedt	Num	8	BEST12.	Home with UAB, date: (Day)
15	deathdt	Num	8	BEST12.	Dead prior to home with UAB, date: (Day)
16	othstatdt	Num	8	BEST12.	Other, date of last known patient status: (Day)
17	hospdcdt	Num	8	BEST12.	If yes, give date: (Day)
18	uabdt	Num	8	BEST12.	Patient reached 48 hour UAB before day 29: Date (Day)
19	uabdt1	Num	8	BEST12.	If yes, date of UAB (first date with no AB): (Day)
20	uabdt2	Num	8	BEST12.	If yes, date of UAB (2nd date with no AB): (Day)
21	uabdt3	Num	8	BEST12.	If yes, date of UAB (3rd date with no AB): (Day)
22	uabdt4	Num	8	BEST12.	If yes, date of UAB (4th date with no AB): (Day)
23	retabdt1	Num	8	BEST12.	If yes, date of return to AB: (Day)
24	retabdt2	Num	8	BEST12.	If yes, date of return to AB: (Day)
25	retabdt3	Num	8	BEST12.	If yes, date of return to AB: (Day)
26	dischargedt1	Num	8	BEST12.	If yes, date of ICU DC: (Day)
27	dischargedt2	Num	8	BEST12.	If yes, date of ICU DC: (Day)
28	dischargedt3	Num	8	BEST12.	If yes, date of ICU DC: (Day)
29	dischargedt4	Num	8	BEST12.	If yes, date of ICU DC: (Day)
30	dischargedt5	Num	8	BEST12.	If yes, date of ICU DC: (Day)
31	readmitdt1	Num	8	BEST12.	If yes, date of ICU readmission: (Day)
32	readmitdt2	Num	8	BEST12.	If yes, date of ICU readmission: (Day)
33	readmitdt3	Num	8	BEST12.	If yes, date of ICU readmission: (Day)
34	readmitdt4	Num	8	BEST12.	If yes, date of ICU readmission: (Day)
35	alive0	Num	8		Is patient alive on day 0?
36	alive1	Num	8		Is patient alive on day 1?

Num	Variable	Type	Len	Format	Label
37	alive2	Num	8		Is patient alive on day 2?
38	alive3	Num	8		Is patient alive on day 3?
39	alive4	Num	8		Is patient alive on day 4?
40	alive5	Num	8		Is patient alive on day 5?
41	alive6	Num	8		Is patient alive on day 6?
42	alive7	Num	8		Is patient alive on day 7?
43	alive8	Num	8		Is patient alive on day 8?
44	alive9	Num	8		Is patient alive on day 9?
45	alive10	Num	8		Is patient alive on day 10?
46	alive11	Num	8		Is patient alive on day 11?
47	alive12	Num	8		Is patient alive on day 12?
48	alive13	Num	8		Is patient alive on day 13?
49	alive14	Num	8		Is patient alive on day 14?
50	alive15	Num	8		Is patient alive on day 15?
51	alive16	Num	8		Is patient alive on day 16?
52	alive17	Num	8		Is patient alive on day 17?
53	alive18	Num	8		Is patient alive on day 18?
54	alive19	Num	8		Is patient alive on day 19?
55	alive20	Num	8		Is patient alive on day 20?
56	alive21	Num	8		Is patient alive on day 21?
57	alive22	Num	8		Is patient alive on day 22?
58	alive23	Num	8		Is patient alive on day 23?
59	alive24	Num	8		Is patient alive on day 24?
60	alive25	Num	8		Is patient alive on day 25?
61	alive26	Num	8		Is patient alive on day 26?
62	alive27	Num	8		Is patient alive on day 27?
63	alive28	Num	8		Is patient alive on day 28?
64	alive29	Num	8		Is patient alive on day 29?
65	alive30	Num	8		Is patient alive on day 30?
66	alive31	Num	8		Is patient alive on day 31?
67	alive32	Num	8		Is patient alive on day 32?
68	alive33	Num	8		Is patient alive on day 33?
69	alive34	Num	8		Is patient alive on day 34?
70	alive35	Num	8		Is patient alive on day 35?
71	alive36	Num	8		Is patient alive on day 36?
72	alive37	Num	8		Is patient alive on day 37?
73	alive38	Num	8		Is patient alive on day 38?
74	alive39	Num	8		Is patient alive on day 39?
75	alive40	Num	8		Is patient alive on day 40?

Num	Variable	Type	Len	Format	Label
76	alive41	Num	8		Is patient alive on day 41?
77	alive42	Num	8		Is patient alive on day 42?
78	alive43	Num	8		Is patient alive on day 43?
79	alive44	Num	8		Is patient alive on day 44?
80	alive45	Num	8		Is patient alive on day 45?
81	alive46	Num	8		Is patient alive on day 46?
82	alive47	Num	8		Is patient alive on day 47?
83	alive48	Num	8		Is patient alive on day 48?
84	alive49	Num	8		Is patient alive on day 49?
85	alive50	Num	8		Is patient alive on day 50?
86	alive51	Num	8		Is patient alive on day 51?
87	alive52	Num	8		Is patient alive on day 52?
88	alive53	Num	8		Is patient alive on day 53?
89	alive54	Num	8		Is patient alive on day 54?
90	alive55	Num	8		Is patient alive on day 55?
91	alive56	Num	8		Is patient alive on day 56?
92	alive57	Num	8		Is patient alive on day 57?
93	alive58	Num	8		Is patient alive on day 58?
94	alive59	Num	8		Is patient alive on day 59?
95	alive60	Num	8		Is patient alive on day 60?
96	home0	Num	8		Has patient been discharged home on day 0?
97	home1	Num	8		Has patient been discharged home on day 1?
98	home2	Num	8		Has patient been discharged home on day 2?
99	home3	Num	8		Has patient been discharged home on day 3?
100	home4	Num	8		Has patient been discharged home on day 4?
101	home5	Num	8		Has patient been discharged home on day 5?
102	home6	Num	8		Has patient been discharged home on day 6?
103	home7	Num	8		Has patient been discharged home on day 7?
104	home8	Num	8		Has patient been discharged home on day 8?
105	home9	Num	8		Has patient been discharged home on day 9?
106	home10	Num	8		Has patient been discharged home on day 10?
107	home11	Num	8		Has patient been discharged home on day 11?
108	home12	Num	8		Has patient been discharged home on day 12?
109	home13	Num	8		Has patient been discharged home on day 13?
110	home14	Num	8		Has patient been discharged home on day 14?
111	home15	Num	8		Has patient been discharged home on day 15?
112	home16	Num	8		Has patient been discharged home on day 16?
113	home17	Num	8		Has patient been discharged home on day 17?
114	home18	Num	8		Has patient been discharged home on day 18?

Num	Variable	Type	Len	Format	Label
115	home19	Num	8		Has patient been discharged home on day 19?
116	home20	Num	8		Has patient been discharged home on day 20?
117	home21	Num	8		Has patient been discharged home on day 21?
118	home22	Num	8		Has patient been discharged home on day 22?
119	home23	Num	8		Has patient been discharged home on day 23?
120	home24	Num	8		Has patient been discharged home on day 24?
121	home25	Num	8		Has patient been discharged home on day 25?
122	home26	Num	8		Has patient been discharged home on day 26?
123	home27	Num	8		Has patient been discharged home on day 27?
124	home28	Num	8		Has patient been discharged home on day 28?
125	home29	Num	8		Has patient been discharged home on day 29?
126	home30	Num	8		Has patient been discharged home on day 30?
127	home31	Num	8		Has patient been discharged home on day 31?
128	home32	Num	8		Has patient been discharged home on day 32?
129	home33	Num	8		Has patient been discharged home on day 33?
130	home34	Num	8		Has patient been discharged home on day 34?
131	home35	Num	8		Has patient been discharged home on day 35?
132	home36	Num	8		Has patient been discharged home on day 36?
133	home37	Num	8		Has patient been discharged home on day 37?
134	home38	Num	8		Has patient been discharged home on day 38?
135	home39	Num	8		Has patient been discharged home on day 39?
136	home40	Num	8		Has patient been discharged home on day 40?
137	home41	Num	8		Has patient been discharged home on day 41?
138	home42	Num	8		Has patient been discharged home on day 42?
139	home43	Num	8		Has patient been discharged home on day 43?
140	home44	Num	8		Has patient been discharged home on day 44?
141	home45	Num	8		Has patient been discharged home on day 45?
142	home46	Num	8		Has patient been discharged home on day 46?
143	home47	Num	8		Has patient been discharged home on day 47?
144	home48	Num	8		Has patient been discharged home on day 48?
145	home49	Num	8		Has patient been discharged home on day 49?
146	home50	Num	8		Has patient been discharged home on day 50?
147	home51	Num	8		Has patient been discharged home on day 51?
148	home52	Num	8		Has patient been discharged home on day 52?
149	home53	Num	8		Has patient been discharged home on day 53?
150	home54	Num	8		Has patient been discharged home on day 54?
151	home55	Num	8		Has patient been discharged home on day 55?
152	home56	Num	8		Has patient been discharged home on day 56?
153	home57	Num	8		Has patient been discharged home on day 57?

Num	Variable	Type	Len	Format	Label
154	home58	Num	8		Has patient been discharged home on day 58?
155	home59	Num	8		Has patient been discharged home on day 59?
156	home60	Num	8		Has patient been discharged home on day 60?
157	breathwoa0	Num	8		Is patient alive and breathing without assistance on day 0?
158	breathwoa1	Num	8		Is patient alive and breathing without assistance on day 1?
159	breathwoa2	Num	8		Is patient alive and breathing without assistance on day 2?
160	breathwoa3	Num	8		Is patient alive and breathing without assistance on day 3?
161	breathwoa4	Num	8		Is patient alive and breathing without assistance on day 4?
162	breathwoa5	Num	8		Is patient alive and breathing without assistance on day 5?
163	breathwoa6	Num	8		Is patient alive and breathing without assistance on day 6?
164	breathwoa7	Num	8		Is patient alive and breathing without assistance on day 7?
165	breathwoa8	Num	8		Is patient alive and breathing without assistance on day 8?
166	breathwoa9	Num	8		Is patient alive and breathing without assistance on day 9?
167	breathwoa10	Num	8		Is patient alive and breathing without assistance on day 10?
168	breathwoa11	Num	8		Is patient alive and breathing without assistance on day 11?
169	breathwoa12	Num	8		Is patient alive and breathing without assistance on day 12?
170	breathwoa13	Num	8		Is patient alive and breathing without assistance on day 13?
171	breathwoa14	Num	8		Is patient alive and breathing without assistance on day 14?
172	breathwoa15	Num	8		Is patient alive and breathing without assistance on day 15?
173	breathwoa16	Num	8		Is patient alive and breathing without assistance on day 16?
174	breathwoa17	Num	8		Is patient alive and breathing without assistance on day 17?
175	breathwoa18	Num	8		Is patient alive and breathing without assistance on day 18?
176	breathwoa19	Num	8		Is patient alive and breathing without assistance on day 19?
177	breathwoa20	Num	8		Is patient alive and breathing without assistance on day 20?
178	breathwoa21	Num	8		Is patient alive and breathing without assistance on day 21?
179	breathwoa22	Num	8		Is patient alive and breathing without assistance on day 22?
180	breathwoa23	Num	8		Is patient alive and breathing without assistance on day 23?
181	breathwoa24	Num	8		Is patient alive and breathing without assistance on day 24?
182	breathwoa25	Num	8		Is patient alive and breathing without assistance on day 25?
183	breathwoa26	Num	8		Is patient alive and breathing without assistance on day 26?
184	breathwoa27	Num	8		Is patient alive and breathing without assistance on day 27?
185	breathwoa28	Num	8		Is patient alive and breathing without assistance on day 28?
186	breathwoa29	Num	8		Is patient alive and breathing without assistance on day 29?
187	breathwoa30	Num	8		Is patient alive and breathing without assistance on day 30?
188	breathwoa31	Num	8		Is patient alive and breathing without assistance on day 31?
189	breathwoa32	Num	8		Is patient alive and breathing without assistance on day 32?
190	breathwoa33	Num	8		Is patient alive and breathing without assistance on day 33?
191	breathwoa34	Num	8		Is patient alive and breathing without assistance on day 34?
192	breathwoa35	Num	8		Is patient alive and breathing without assistance on day 35?

Num	Variable	Type	Len	Format	Label
193	breathwoa36	Num	8		Is patient alive and breathing without assistance on day 36?
194	breathwoa37	Num	8		Is patient alive and breathing without assistance on day 37?
195	breathwoa38	Num	8		Is patient alive and breathing without assistance on day 38?
196	breathwoa39	Num	8		Is patient alive and breathing without assistance on day 39?
197	breathwoa40	Num	8		Is patient alive and breathing without assistance on day 40?
198	breathwoa41	Num	8		Is patient alive and breathing without assistance on day 41?
199	breathwoa42	Num	8		Is patient alive and breathing without assistance on day 42?
200	breathwoa43	Num	8		Is patient alive and breathing without assistance on day 43?
201	breathwoa44	Num	8		Is patient alive and breathing without assistance on day 44?
202	breathwoa45	Num	8		Is patient alive and breathing without assistance on day 45?
203	breathwoa46	Num	8		Is patient alive and breathing without assistance on day 46?
204	breathwoa47	Num	8		Is patient alive and breathing without assistance on day 47?
205	breathwoa48	Num	8		Is patient alive and breathing without assistance on day 48?
206	breathwoa49	Num	8		Is patient alive and breathing without assistance on day 49?
207	breathwoa50	Num	8		Is patient alive and breathing without assistance on day 50?
208	breathwoa51	Num	8		Is patient alive and breathing without assistance on day 51?
209	breathwoa52	Num	8		Is patient alive and breathing without assistance on day 52?
210	breathwoa53	Num	8		Is patient alive and breathing without assistance on day 53?
211	breathwoa54	Num	8		Is patient alive and breathing without assistance on day 54?
212	breathwoa55	Num	8		Is patient alive and breathing without assistance on day 55?
213	breathwoa56	Num	8		Is patient alive and breathing without assistance on day 56?
214	breathwoa57	Num	8		Is patient alive and breathing without assistance on day 57?
215	breathwoa58	Num	8		Is patient alive and breathing without assistance on day 58?
216	breathwoa59	Num	8		Is patient alive and breathing without assistance on day 59?
217	breathwoa60	Num	8		Is patient alive and breathing without assistance on day 60?
218	inicu0	Num	8		Is patient alive and in the ICU on day 0?
219	inicu1	Num	8		Is patient alive and in the ICU on day 1?
220	inicu2	Num	8		Is patient alive and in the ICU on day 2?
221	inicu3	Num	8		Is patient alive and in the ICU on day 3?
222	inicu4	Num	8		Is patient alive and in the ICU on day 4?
223	inicu5	Num	8		Is patient alive and in the ICU on day 5?
224	inicu6	Num	8		Is patient alive and in the ICU on day 6?
225	inicu7	Num	8		Is patient alive and in the ICU on day 7?
226	inicu8	Num	8		Is patient alive and in the ICU on day 8?
227	inicu9	Num	8		Is patient alive and in the ICU on day 9?
228	inicu10	Num	8		Is patient alive and in the ICU on day 10?
229	inicu11	Num	8		Is patient alive and in the ICU on day 11?
230	inicu12	Num	8		Is patient alive and in the ICU on day 12?
231	inicu13	Num	8		Is patient alive and in the ICU on day 13?

Num	Variable	Type	Len	Format	Label
232	inicu14	Num	8		Is patient alive and in the ICU on day 14?
233	inicu15	Num	8		Is patient alive and in the ICU on day 15?
234	inicu16	Num	8		Is patient alive and in the ICU on day 16?
235	inicu17	Num	8		Is patient alive and in the ICU on day 17?
236	inicu18	Num	8		Is patient alive and in the ICU on day 18?
237	inicu19	Num	8		Is patient alive and in the ICU on day 19?
238	inicu20	Num	8		Is patient alive and in the ICU on day 20?
239	inicu21	Num	8		Is patient alive and in the ICU on day 21?
240	inicu22	Num	8		Is patient alive and in the ICU on day 22?
241	inicu23	Num	8		Is patient alive and in the ICU on day 23?
242	inicu24	Num	8		Is patient alive and in the ICU on day 24?
243	inicu25	Num	8		Is patient alive and in the ICU on day 25?
244	inicu26	Num	8		Is patient alive and in the ICU on day 26?
245	inicu27	Num	8		Is patient alive and in the ICU on day 27?
246	inicu28	Num	8		Is patient alive and in the ICU on day 28?
247	inicu29	Num	8		Is patient alive and in the ICU on day 29?
248	inicu30	Num	8		Is patient alive and in the ICU on day 30?
249	inicu31	Num	8		Is patient alive and in the ICU on day 31?
250	inicu32	Num	8		Is patient alive and in the ICU on day 32?
251	inicu33	Num	8		Is patient alive and in the ICU on day 33?
252	inicu34	Num	8		Is patient alive and in the ICU on day 34?
253	inicu35	Num	8		Is patient alive and in the ICU on day 35?
254	inicu36	Num	8		Is patient alive and in the ICU on day 36?
255	inicu37	Num	8		Is patient alive and in the ICU on day 37?
256	inicu38	Num	8		Is patient alive and in the ICU on day 38?
257	inicu39	Num	8		Is patient alive and in the ICU on day 39?
258	inicu40	Num	8		Is patient alive and in the ICU on day 40?
259	inicu41	Num	8		Is patient alive and in the ICU on day 41?
260	inicu42	Num	8		Is patient alive and in the ICU on day 42?
261	inicu43	Num	8		Is patient alive and in the ICU on day 43?
262	inicu44	Num	8		Is patient alive and in the ICU on day 44?
263	inicu45	Num	8		Is patient alive and in the ICU on day 45?
264	inicu46	Num	8		Is patient alive and in the ICU on day 46?
265	inicu47	Num	8		Is patient alive and in the ICU on day 47?
266	inicu48	Num	8		Is patient alive and in the ICU on day 48?
267	inicu49	Num	8		Is patient alive and in the ICU on day 49?
268	inicu50	Num	8		Is patient alive and in the ICU on day 50?
269	inicu51	Num	8		Is patient alive and in the ICU on day 51?
270	inicu52	Num	8		Is patient alive and in the ICU on day 52?

Num	Variable	Type	Len	Format	Label
271	inicu53	Num	8		Is patient alive and in the ICU on day 53?
272	inicu54	Num	8		Is patient alive and in the ICU on day 54?
273	inicu55	Num	8		Is patient alive and in the ICU on day 55?
274	inicu56	Num	8		Is patient alive and in the ICU on day 56?
275	inicu57	Num	8		Is patient alive and in the ICU on day 57?
276	inicu58	Num	8		Is patient alive and in the ICU on day 58?
277	inicu59	Num	8		Is patient alive and in the ICU on day 59?
278	inicu60	Num	8		Is patient alive and in the ICU on day 60?

Data Set Name: gcs_bypt.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	sedative_0	Num	8		Is patient on a sedative or neuromuscular blocker?
14	sedativec_0	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
15	eye_0	Num	8		Eye opening score:
16	eyec_0	Char	11	$11.	Eye opening score:
17	motor_0	Num	8		Motor response score:
18	motorc_0	Char	26	$26.	Motor response score:
19	verbal_0	Num	8		Verbal response score:
20	verbalc_0	Char	50	$50.	Verbal response score:
21	gcs_0	Num	8		Total
22	gcsdt_0	Num	8	BEST12.	Date Taken (Day)
23	sedativex_0	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
24	eyex_0	Char	64	$64.	Eye opening score: (Not Done)
25	motorx_0	Char	64	$64.	Motor response score: (Not Done)
26	verbalx_0	Char	64	$64.	Verbal response score: (Not Done)
27	VISITORDER_0	Num	8		VISITORDER
28	sedative_7	Num	8		Is patient on a sedative or neuromuscular blocker?
29	sedativec_7	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
30	eye_7	Num	8		Eye opening score:
31	eyec_7	Char	11	$11.	Eye opening score:
32	motor_7	Num	8		Motor response score:
33	motorc_7	Char	26	$26.	Motor response score:
34	verbal_7	Num	8		Verbal response score:
35	verbalc_7	Char	50	$50.	Verbal response score:
36	gcs_7	Num	8		Total

Num	Variable	Type	Len	Format	Label
37	gcsdt_7	Num	8	BEST12.	Date Taken (Day)
38	sedativex_7	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
39	eyex_7	Char	64	$64.	Eye opening score: (Not Done)
40	motorx_7	Char	64	$64.	Motor response score: (Not Done)
41	verbalx_7	Char	64	$64.	Verbal response score: (Not Done)
42	VISITORDER_7	Num	8		VISITORDER
43	sedative_13	Num	8		Is patient on a sedative or neuromuscular blocker?
44	sedativec_13	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
45	eye_13	Num	8		Eye opening score:
46	eyec_13	Char	11	$11.	Eye opening score:
47	motor_13	Num	8		Motor response score:
48	motorc_13	Char	26	$26.	Motor response score:
49	verbal_13	Num	8		Verbal response score:
50	verbalc_13	Char	50	$50.	Verbal response score:
51	gcs_13	Num	8		Total
52	gcsdt_13	Num	8	BEST12.	Date Taken (Day)
53	sedativex_13	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
54	eyex_13	Char	64	$64.	Eye opening score: (Not Done)
55	motorx_13	Char	64	$64.	Motor response score: (Not Done)
56	verbalx_13	Char	64	$64.	Verbal response score: (Not Done)
57	VISITORDER_13	Num	8		VISITORDER
58	sedative_14	Num	8		Is patient on a sedative or neuromuscular blocker?
59	sedativec_14	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
60	eye_14	Num	8		Eye opening score:
61	eyec_14	Char	11	$11.	Eye opening score:
62	motor_14	Num	8		Motor response score:
63	motorc_14	Char	26	$26.	Motor response score:
64	verbal_14	Num	8		Verbal response score:
65	verbalc_14	Char	50	$50.	Verbal response score:
66	gcs_14	Num	8		Total
67	gcsdt_14	Num	8	BEST12.	Date Taken (Day)
68	sedativex_14	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
69	eyex_14	Char	64	$64.	Eye opening score: (Not Done)
70	motorx_14	Char	64	$64.	Motor response score: (Not Done)
71	verbalx_14	Char	64	$64.	Verbal response score: (Not Done)
72	VISITORDER_14	Num	8		VISITORDER
73	sedative_15	Num	8		Is patient on a sedative or neuromuscular blocker?
74	sedativec_15	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
75	eye_15	Num	8		Eye opening score:

Num	Variable	Type	Len	Format	Label
76	eyec_15	Char	11	$11.	Eye opening score:
77	motor_15	Num	8		Motor response score:
78	motorc_15	Char	26	$26.	Motor response score:
79	verbal_15	Num	8		Verbal response score:
80	verbalc_15	Char	50	$50.	Verbal response score:
81	gcs_15	Num	8		Total
82	gcsdt_15	Num	8	BEST12.	Date Taken (Day)
83	sedativex_15	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
84	eyex_15	Char	64	$64.	Eye opening score: (Not Done)
85	motorx_15	Char	64	$64.	Motor response score: (Not Done)
86	verbalx_15	Char	64	$64.	Verbal response score: (Not Done)
87	VISITORDER_15	Num	8		VISITORDER
88	sedative_16	Num	8		Is patient on a sedative or neuromuscular blocker?
89	sedativec_16	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
90	eye_16	Num	8		Eye opening score:
91	eyec_16	Char	11	$11.	Eye opening score:
92	motor_16	Num	8		Motor response score:
93	motorc_16	Char	26	$26.	Motor response score:
94	verbal_16	Num	8		Verbal response score:
95	verbalc_16	Char	50	$50.	Verbal response score:
96	gcs_16	Num	8		Total
97	gcsdt_16	Num	8	BEST12.	Date Taken (Day)
98	sedativex_16	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
99	eyex_16	Char	64	$64.	Eye opening score: (Not Done)
100	motorx_16	Char	64	$64.	Motor response score: (Not Done)
101	verbalx_16	Char	64	$64.	Verbal response score: (Not Done)
102	VISITORDER_16	Num	8		VISITORDER
103	sedative_17	Num	8		Is patient on a sedative or neuromuscular blocker?
104	sedativec_17	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
105	eye_17	Num	8		Eye opening score:
106	eyec_17	Char	11	$11.	Eye opening score:
107	motor_17	Num	8		Motor response score:
108	motorc_17	Char	26	$26.	Motor response score:
109	verbal_17	Num	8		Verbal response score:
110	verbalc_17	Char	50	$50.	Verbal response score:
111	gcs_17	Num	8		Total
112	gcsdt_17	Num	8	BEST12.	Date Taken (Day)
113	sedativex_17	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
114	eyex_17	Char	64	$64.	Eye opening score: (Not Done)

Num	Variable	Type	Len	Format	Label
115	motorx_17	Char	64	$64.	Motor response score: (Not Done)
116	verbalx_17	Char	64	$64.	Verbal response score: (Not Done)
117	VISITORDER_17	Num	8		VISITORDER
118	sedative_18	Num	8		Is patient on a sedative or neuromuscular blocker?
119	sedativec_18	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
120	eye_18	Num	8		Eye opening score:
121	eyec_18	Char	11	$11.	Eye opening score:
122	motor_18	Num	8		Motor response score:
123	motorc_18	Char	26	$26.	Motor response score:
124	verbal_18	Num	8		Verbal response score:
125	verbalc_18	Char	50	$50.	Verbal response score:
126	gcs_18	Num	8		Total
127	gcsdt_18	Num	8	BEST12.	Date Taken (Day)
128	sedativex_18	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
129	eyex_18	Char	64	$64.	Eye opening score: (Not Done)
130	motorx_18	Char	64	$64.	Motor response score: (Not Done)
131	verbalx_18	Char	64	$64.	Verbal response score: (Not Done)
132	VISITORDER_18	Num	8		VISITORDER
133	sedative_19	Num	8		Is patient on a sedative or neuromuscular blocker?
134	sedativec_19	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
135	eye_19	Num	8		Eye opening score:
136	eyec_19	Char	11	$11.	Eye opening score:
137	motor_19	Num	8		Motor response score:
138	motorc_19	Char	26	$26.	Motor response score:
139	verbal_19	Num	8		Verbal response score:
140	verbalc_19	Char	50	$50.	Verbal response score:
141	gcs_19	Num	8		Total
142	gcsdt_19	Num	8	BEST12.	Date Taken (Day)
143	sedativex_19	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
144	eyex_19	Char	64	$64.	Eye opening score: (Not Done)
145	motorx_19	Char	64	$64.	Motor response score: (Not Done)
146	verbalx_19	Char	64	$64.	Verbal response score: (Not Done)
147	VISITORDER_19	Num	8		VISITORDER
148	sedative_20	Num	8		Is patient on a sedative or neuromuscular blocker?
149	sedativec_20	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
150	eye_20	Num	8		Eye opening score:
151	eyec_20	Char	11	$11.	Eye opening score:
152	motor_20	Num	8		Motor response score:
153	motorc_20	Char	26	$26.	Motor response score:

Num	Variable	Type	Len	Format	Label
154	verbal_20	Num	8		Verbal response score:
155	verbalc_20	Char	50	$50.	Verbal response score:
156	gcs_20	Num	8		Total
157	gcsdt_20	Num	8	BEST12.	Date Taken (Day)
158	sedativex_20	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
159	eyex_20	Char	64	$64.	Eye opening score: (Not Done)
160	motorx_20	Char	64	$64.	Motor response score: (Not Done)
161	verbalx_20	Char	64	$64.	Verbal response score: (Not Done)
162	VISITORDER_20	Num	8		VISITORDER
163	sedative_28	Num	8		Is patient on a sedative or neuromuscular blocker?
164	sedativec_28	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
165	eye_28	Num	8		Eye opening score:
166	eyec_28	Char	11	$11.	Eye opening score:
167	motor_28	Num	8		Motor response score:
168	motorc_28	Char	26	$26.	Motor response score:
169	verbal_28	Num	8		Verbal response score:
170	verbalc_28	Char	50	$50.	Verbal response score:
171	gcs_28	Num	8		Total
172	gcsdt_28	Num	8	BEST12.	Date Taken (Day)
173	sedativex_28	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
174	eyex_28	Char	64	$64.	Eye opening score: (Not Done)
175	motorx_28	Char	64	$64.	Motor response score: (Not Done)
176	verbalx_28	Char	64	$64.	Verbal response score: (Not Done)
177	VISITORDER_28	Num	8		VISITORDER
178	sedative_999	Num	8		Is patient on a sedative or neuromuscular blocker?
179	sedativec_999	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
180	eye_999	Num	8		Eye opening score:
181	eyec_999	Char	11	$11.	Eye opening score:
182	motor_999	Num	8		Motor response score:
183	motorc_999	Char	26	$26.	Motor response score:
184	verbal_999	Num	8		Verbal response score:
185	verbalc_999	Char	50	$50.	Verbal response score:
186	gcs_999	Num	8		Total
187	gcsdt_999	Num	8	BEST12.	Date Taken (Day)
188	sedativex_999	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
189	eyex_999	Char	64	$64.	Eye opening score: (Not Done)
190	motorx_999	Char	64	$64.	Motor response score: (Not Done)
191	verbalx_999	Char	64	$64.	Verbal response score: (Not Done)
192	VISITORDER_999	Num	8		VISITORDER

Data Set Name: giintol.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	proprate	Num	8		Propofol infusion rate at time of randomization
14	feedgrp	Num	8		Enteral Feeding Group
15	feedgrpc	Char	12	$12.	Enteral Feeding Group
16	prebasefeed	Num	8		In the 12 hours prior to enrollment, did patient receive any enteral feedings?
17	prebasefeedc	Char	72	$72.	In the 12 hours prior to enrollment, did patient receive any enteral feedings?
18	prebasevol	Num	8		Yes, enter total volume of enteral feeds in 12 hours prior to enrollment
19	feedinitdt	Num	8	BEST12.	Date and time of initiation of protocol specified enteral feeds (Day)
20	feedinittm	Num	8	TIME5.	Date and time of initiation of protocol specified enteral feeds (Time)
21	recfeed_0	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
22	recfeedc_0	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
23	goalrate_0	Num	8		Tube feeding goal rate
24	goalchange_0	Num	8		Did the goal rate change during the 24 hour period?
25	goalchangec_0	Char	19	$19.	Did the goal rate change during the 24 hour period?
26	newgoal_0	Num	8		New goal rate
27	brand1_0	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
28	brand1vol_0	Num	8		Total volume of enteral formula 1 infused for 24 hour period
29	brand2_0	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
30	brand2vol_0	Num	8		Total volume of enteral formula 2 infused for 24 hour period
31	feedhrs_0	Num	8		Number of hours enteral tube feeds on for this 24 hour period
32	feedoff_0	Num	8		Feeds turned off for > 30 minutes within 24 hour period
33	feedoffc_0	Char	61	$61.	Feeds turned off for > 30 minutes within 24 hour period
34	planext_0	Num	8		Planned Extubation
35	planextc_0	Char	18	$18.	Planned Extubation
36	giint_0	Num	8		GI Intolerance

Num	Variable	Type	Len	Format	Label
37	giintc_0	Char	14	$14.	GI Intolerance
38	invbside_0	Num	8		Invasive bedside procedure
39	invbsidec_0	Char	26	$26.	Invasive bedside procedure
40	surgery	Num	8		Surgery
41	surgeryc	Char	7	$7.	Surgery
42	leftfloor_0	Num	8		Patient left the floor
43	leftfloorc_0	Char	22	$22.	Patient left the floor
44	care_0	Num	8		Nursing Care(ie bathing, HOB down)
45	carec_0	Char	34	$34.	Nursing Care(ie bathing, HOB down)
46	medadm_0	Num	8		Medical Administration
47	medadmc_0	Char	22	$22.	Medical Administration
48	feedoffoth_0	Num	8		Other reason feed turned off:
49	feedoffothc_0	Char	5	$5.	Other reason feed turned off:
50	feedoffreas_0	Char	255	$255.	Other reason feed turned off: Reason
51	giintoleden_0	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
52	giintoledenc_0	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
53	diarrhea_0	Num	8		Diarrhea
54	diarrheac_0	Char	8	$8.	Diarrhea
55	vomiting_0	Num	8		Vomiting
56	vomitingc_0	Char	8	$8.	Vomiting
57	aspiration_0	Num	8		Aspiration
58	aspirationc_0	Char	10	$10.	Aspiration
59	elevresid	Num	8		Elevated Residuals
60	elevresidc	Char	18	$18.	Elevated Residuals
61	regurg_0	Num	8		Regurgitation
62	regurgc_0	Char	13	$13.	Regurgitation
63	constipation	Num	8		Constipation
64	constipationc	Char	12	$12.	Constipation
65	cramping	Num	8		Abdominal distention or cramping
66	crampingc	Char	32	$32.	Abdominal distention or cramping
67	feedsite_0	Num	8		Insertion site of feeding tube:
68	feedsitec_0	Char	12	$12.	Insertion site of feeding tube:
69	tubesize_0	Num	8		Feeding tube size
70	tubesizec_0	Char	10	$10.	Feeding tube size
71	distalpos_0	Num	8		Distal position of feeding tube
72	distalposc_0	Char	12	$12.	Distal position of feeding tube
73	distalconf_0	Num	8		Was distal position confirmed during this 24 hour period?

Num	Variable	Type	Len	Format	Label
74	distalconfc_0	Char	19	$19.	Was distal position confirmed during this 24 hour period?
75	distalhow_0	Num	8		How distal position confirmed
76	distalhowc_0	Char	15	$15.	How distal position confirmed
77	distaloth_0	Char	40	$40.	How distal position confirmed: other
78	fullcal_0	Num	8		Was rate advanced to full-calorie rate during this calendar day?
79	fullcalc_0	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
80	fullcaltm_0	Num	8	TIMEAMPM.	time full calorie reached
81	pronevent_0	Num	8		Prone ventilation between randomization and midnight?
82	proneventc_0	Char	3	$3.	Prone ventilation between randomization and midnight?
83	propratex	Char	64	$64.	Propofol infusion rate at time of randomization (Not Done)
84	feedgrpx	Char	64	$64.	Enteral Feeding Group (Not Done)
85	prebasefeedx	Char	64	$64.	In the 12 hours prior to enrollment, did patient receive any enteral feedings? (Not Done)
86	feedinitdtmx	Char	64	$64.	Date and time of initiation of protocol specified enteral feeds (Not Done)
87	recfeedx_0	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
88	goalratex_0	Char	64	$64.	Tube feeding goal rate (Not Done)
89	goalchangex_0	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
90	brand1x_0	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period (Not Done)
91	feedhrsx_0	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
92	feedoffX	Char	64	$64.	Feeds turned off for > 30 minutes within 24 hour period (Not Done)
93	giintoledenx_0	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
94	feedsiteX	Char	64	$64.	Insertion site of feeding tube: (Not Done)
95	tubesizeX	Char	64	$64.	Feeding tube size (Not Done)
96	distalposX	Char	64	$64.	Distal position of feeding tube (Not Done)
97	distalconfx_0	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
98	fullcalx_0	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
99	surg_1	Num	8		Surgery
100	surgc_1	Char	7	$7.	Surgery
101	residual_1	Num	8		Elevated Residuals
102	residualc_1	Char	18	$18.	Elevated Residuals
103	const_1	Num	8		Constipation
104	constc_1	Char	12	$12.	Constipation
105	cramp_1	Num	8		Abdominal distention or cramping
106	crampc_1	Char	32	$32.	Abdominal distention or cramping
107	feedoffx_1	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
108	feedsitex_1	Char	64	$64.	Insertion site of feeding tube (Not Done)
109	tubesizex_1	Char	64	$64.	Feeding tube size (Not Done)

Num	Variable	Type	Len	Format	Label
110	distalposx_1	Char	64	$64.	Distal position of feeding tube (Not Done)
111	proneventx_1	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
112	recfeed_1	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
113	recfeedc_1	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
114	goalrate_1	Num	8		Tube feeding goal rate
115	goalchange_1	Num	8		Did the goal rate change during the 24 hour period?
116	goalchangec_1	Char	19	$19.	Did the goal rate change during the 24 hour period?
117	newgoal_1	Num	8		Yes, new goal rate
118	brand1_1	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
119	brand1vol_1	Num	8		Total volume of enteral formula 1 infused for 24 hour period
120	brand2_1	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
121	brand2vol_1	Num	8		Total volume of enteral formula 2 infused for 24 hour period
122	feedhrs_1	Num	8		Number of hours enteral tube feeds on for this 24 hour period
123	feedoff_1	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
124	feedoffc_1	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
125	planext_1	Num	8		Planned Extubation
126	planextc_1	Char	18	$18.	Planned Extubation
127	giint_1	Num	8		GI Intolerance
128	giintc_1	Char	14	$14.	GI Intolerance
129	invbside_1	Num	8		Invasive bedside procedure
130	invbsidec_1	Char	26	$26.	Invasive bedside procedure
131	leftfloor_1	Num	8		Patient left the floor
132	leftfloorc_1	Char	22	$22.	Patient left the floor
133	care_1	Num	8		Nursing Care (i.e. bathing, HOB down)
134	carec_1	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
135	medadm_1	Num	8		Medical Administration
136	medadmc_1	Char	22	$22.	Medical Administration
137	feedoffoth_1	Num	8		Other reason feed turned off:
138	feedoffothc_1	Char	5	$5.	Other reason feed turned off:
139	feedoffreas_1	Char	255	$255.	Other reason feed turned off: Reason
140	giintoleden_1	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
141	giintoledenc_1	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
142	diarrhea_1	Num	8		Diarrhea
143	diarrheac_1	Char	8	$8.	Diarrhea
144	vomiting_1	Num	8		Vomiting
145	vomitingc_1	Char	8	$8.	Vomiting

Num	Variable	Type	Len	Format	Label
146	aspiration_1	Num	8		Aspiration
147	aspirationc_1	Char	10	$10.	Aspiration
148	regurg_1	Num	8		Regurgitation
149	regurgc_1	Char	13	$13.	Regurgitation
150	feedsite_1	Num	8		Insertion site of feeding tube
151	feedsitec_1	Char	12	$12.	Insertion site of feeding tube
152	tubesize_1	Num	8		Feeding tube size
153	tubesizec_1	Char	10	$10.	Feeding tube size
154	distalpos_1	Num	8		Distal position of feeding tube
155	distalposc_1	Char	12	$12.	Distal position of feeding tube
156	distalconf_1	Num	8		Was distal position confirmed during this 24 hour period?
157	distalconfc_1	Char	19	$19.	Was distal position confirmed during this 24 hour period?
158	distalhow_1	Num	8		Yes, how confirmed:
159	distalhowc_1	Char	15	$15.	Yes, how confirmed:
160	distaloth_1	Char	40	$40.	Yes, how confirmed: Other
161	fullcal_1	Num	8		Was rate advanced to full-calorie rate during this calendar day?
162	fullcalc_1	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
163	fullcaltm_1	Num	8	TIMEAMPM.	Yes, time full calorie reached:
164	pronevent_1	Num	8		Prone ventilation this 24 hour period?
165	proneventc_1	Char	3	$3.	Prone ventilation this 24 hour period?
166	recfeedx_1	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
167	goalratex_1	Char	64	$64.	Tube feeding goal rate (Not Done)
168	goalchangex_1	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
169	brand1x_1	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
170	feedhrsx_1	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
171	giintoledenx_1	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
172	distalconfx_1	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
173	fullcalx_1	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
174	surg_2	Num	8		Surgery
175	surgc_2	Char	7	$7.	Surgery
176	residual_2	Num	8		Elevated Residuals
177	residualc_2	Char	18	$18.	Elevated Residuals
178	const_2	Num	8		Constipation
179	constc_2	Char	12	$12.	Constipation
180	cramp_2	Num	8		Abdominal distention or cramping
181	crampc_2	Char	32	$32.	Abdominal distention or cramping
182	feedoffx_2	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)

Num	Variable	Type	Len	Format	Label
183	feedsitex_2	Char	64	$64.	Insertion site of feeding tube (Not Done)
184	tubesizex_2	Char	64	$64.	Feeding tube size (Not Done)
185	distalposx_2	Char	64	$64.	Distal position of feeding tube (Not Done)
186	proneventx_2	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
187	recfeed_2	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
188	recfeedc_2	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
189	goalrate_2	Num	8		Tube feeding goal rate
190	goalchange_2	Num	8		Did the goal rate change during the 24 hour period?
191	goalchangec_2	Char	19	$19.	Did the goal rate change during the 24 hour period?
192	newgoal_2	Num	8		Yes, new goal rate
193	brand1_2	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
194	brand1vol_2	Num	8		Total volume of enteral formula 1 infused for 24 hour period
195	brand2_2	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
196	brand2vol_2	Num	8		Total volume of enteral formula 2 infused for 24 hour period
197	feedhrs_2	Num	8		Number of hours enteral tube feeds on for this 24 hour period
198	feedoff_2	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
199	feedoffc_2	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
200	planext_2	Num	8		Planned Extubation
201	planextc_2	Char	18	$18.	Planned Extubation
202	giint_2	Num	8		GI Intolerance
203	giintc_2	Char	14	$14.	GI Intolerance
204	invbside_2	Num	8		Invasive bedside procedure
205	invbsidec_2	Char	26	$26.	Invasive bedside procedure
206	leftfloor_2	Num	8		Patient left the floor
207	leftfloorc_2	Char	22	$22.	Patient left the floor
208	care_2	Num	8		Nursing Care (i.e. bathing, HOB down)
209	carec_2	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
210	medadm_2	Num	8		Medical Administration
211	medadmc_2	Char	22	$22.	Medical Administration
212	feedoffoth_2	Num	8		Other reason feed turned off:
213	feedoffothc_2	Char	5	$5.	Other reason feed turned off:
214	feedoffreas_2	Char	255	$255.	Other reason feed turned off: Reason
215	giintoleden_2	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
216	giintoledenc_2	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
217	diarrhea_2	Num	8		Diarrhea
218	diarrheac_2	Char	8	$8.	Diarrhea

Num	Variable	Type	Len	Format	Label
219	vomiting_2	Num	8		Vomiting
220	vomitingc_2	Char	8	$8.	Vomiting
221	aspiration_2	Num	8		Aspiration
222	aspirationc_2	Char	10	$10.	Aspiration
223	regurg_2	Num	8		Regurgitation
224	regurgc_2	Char	13	$13.	Regurgitation
225	feedsite_2	Num	8		Insertion site of feeding tube
226	feedsitec_2	Char	12	$12.	Insertion site of feeding tube
227	tubesize_2	Num	8		Feeding tube size
228	tubesizec_2	Char	10	$10.	Feeding tube size
229	distalpos_2	Num	8		Distal position of feeding tube
230	distalposc_2	Char	12	$12.	Distal position of feeding tube
231	distalconf_2	Num	8		Was distal position confirmed during this 24 hour period?
232	distalconfc_2	Char	19	$19.	Was distal position confirmed during this 24 hour period?
233	distalhow_2	Num	8		Yes, how confirmed:
234	distalhowc_2	Char	15	$15.	Yes, how confirmed:
235	distaloth_2	Char	40	$40.	Yes, how confirmed: Other
236	fullcal_2	Num	8		Was rate advanced to full-calorie rate during this calendar day?
237	fullcalc_2	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
238	fullcaltm_2	Num	8	TIMEAMPM.	Yes, time full calorie reached:
239	pronevent_2	Num	8		Prone ventilation this 24 hour period?
240	proneventc_2	Char	3	$3.	Prone ventilation this 24 hour period?
241	recfeedx_2	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
242	goalratex_2	Char	64	$64.	Tube feeding goal rate (Not Done)
243	goalchangex_2	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
244	brand1x_2	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
245	feedhrsx_2	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
246	giintoledenx_2	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
247	distalconfx_2	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
248	fullcalx_2	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
249	surg_3	Num	8		Surgery
250	surgc_3	Char	7	$7.	Surgery
251	residual_3	Num	8		Elevated Residuals
252	residualc_3	Char	18	$18.	Elevated Residuals
253	const_3	Num	8		Constipation
254	constc_3	Char	12	$12.	Constipation
255	cramp_3	Num	8		Abdominal distention or cramping

Num	Variable	Type	Len	Format	Label
256	crampc_3	Char	32	$32.	Abdominal distention or cramping
257	feedoffx_3	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
258	feedsitex_3	Char	64	$64.	Insertion site of feeding tube (Not Done)
259	tubesizex_3	Char	64	$64.	Feeding tube size (Not Done)
260	distalposx_3	Char	64	$64.	Distal position of feeding tube (Not Done)
261	proneventx_3	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
262	recfeed_3	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
263	recfeedc_3	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
264	goalrate_3	Num	8		Tube feeding goal rate
265	goalchange_3	Num	8		Did the goal rate change during the 24 hour period?
266	goalchangec_3	Char	19	$19.	Did the goal rate change during the 24 hour period?
267	newgoal_3	Num	8		Yes, new goal rate
268	brand1_3	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
269	brand1vol_3	Num	8		Total volume of enteral formula 1 infused for 24 hour period
270	brand2_3	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
271	brand2vol_3	Num	8		Total volume of enteral formula 2 infused for 24 hour period
272	feedhrs_3	Num	8		Number of hours enteral tube feeds on for this 24 hour period
273	feedoff_3	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
274	feedoffc_3	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
275	planext_3	Num	8		Planned Extubation
276	planextc_3	Char	18	$18.	Planned Extubation
277	giint_3	Num	8		GI Intolerance
278	giintc_3	Char	14	$14.	GI Intolerance
279	invbside_3	Num	8		Invasive bedside procedure
280	invbsidec_3	Char	26	$26.	Invasive bedside procedure
281	leftfloor_3	Num	8		Patient left the floor
282	leftfloorc_3	Char	22	$22.	Patient left the floor
283	care_3	Num	8		Nursing Care (i.e. bathing, HOB down)
284	carec_3	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
285	medadm_3	Num	8		Medical Administration
286	medadmc_3	Char	22	$22.	Medical Administration
287	feedoffoth_3	Num	8		Other reason feed turned off:
288	feedoffothc_3	Char	5	$5.	Other reason feed turned off:
289	feedoffreas_3	Char	255	$255.	Other reason feed turned off: Reason
290	giintoleden_3	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?

Num	Variable	Type	Len	Format	Label
291	giintoledenc_3	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
292	diarrhea_3	Num	8		Diarrhea
293	diarrheac_3	Char	8	$8.	Diarrhea
294	vomiting_3	Num	8		Vomiting
295	vomitingc_3	Char	8	$8.	Vomiting
296	aspiration_3	Num	8		Aspiration
297	aspirationc_3	Char	10	$10.	Aspiration
298	regurg_3	Num	8		Regurgitation
299	regurgc_3	Char	13	$13.	Regurgitation
300	feedsite_3	Num	8		Insertion site of feeding tube
301	feedsitec_3	Char	12	$12.	Insertion site of feeding tube
302	tubesize_3	Num	8		Feeding tube size
303	tubesizec_3	Char	10	$10.	Feeding tube size
304	distalpos_3	Num	8		Distal position of feeding tube
305	distalposc_3	Char	12	$12.	Distal position of feeding tube
306	distalconf_3	Num	8		Was distal position confirmed during this 24 hour period?
307	distalconfc_3	Char	19	$19.	Was distal position confirmed during this 24 hour period?
308	distalhow_3	Num	8		Yes, how confirmed:
309	distalhowc_3	Char	15	$15.	Yes, how confirmed:
310	distaloth_3	Char	40	$40.	Yes, how confirmed: Other
311	fullcal_3	Num	8		Was rate advanced to full-calorie rate during this calendar day?
312	fullcalc_3	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
313	fullcaltm_3	Num	8	TIMEAMPM.	Yes, time full calorie reached:
314	pronevent_3	Num	8		Prone ventilation this 24 hour period?
315	proneventc_3	Char	3	$3.	Prone ventilation this 24 hour period?
316	recfeedx_3	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
317	goalratex_3	Char	64	$64.	Tube feeding goal rate (Not Done)
318	goalchangex_3	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
319	brand1x_3	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
320	feedhrsx_3	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
321	giintoledenx_3	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
322	distalconfx_3	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
323	fullcalx_3	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
324	surg_4	Num	8		Surgery
325	surgc_4	Char	7	$7.	Surgery
326	residual_4	Num	8		Elevated Residuals
327	residualc_4	Char	18	$18.	Elevated Residuals

Num	Variable	Type	Len	Format	Label
328	const_4	Num	8		Constipation
329	constc_4	Char	12	$12.	Constipation
330	cramp_4	Num	8		Abdominal distention or cramping
331	crampc_4	Char	32	$32.	Abdominal distention or cramping
332	feedoffx_4	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
333	feedsitex_4	Char	64	$64.	Insertion site of feeding tube (Not Done)
334	tubesizex_4	Char	64	$64.	Feeding tube size (Not Done)
335	distalposx_4	Char	64	$64.	Distal position of feeding tube (Not Done)
336	proneventx_4	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
337	recfeed_4	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
338	recfeedc_4	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
339	goalrate_4	Num	8		Tube feeding goal rate
340	goalchange_4	Num	8		Did the goal rate change during the 24 hour period?
341	goalchangec_4	Char	19	$19.	Did the goal rate change during the 24 hour period?
342	newgoal_4	Num	8		Yes, new goal rate
343	brand1_4	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
344	brand1vol_4	Num	8		Total volume of enteral formula 1 infused for 24 hour period
345	brand2_4	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
346	brand2vol_4	Num	8		Total volume of enteral formula 2 infused for 24 hour period
347	feedhrs_4	Num	8		Number of hours enteral tube feeds on for this 24 hour period
348	feedoff_4	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
349	feedoffc_4	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
350	planext_4	Num	8		Planned Extubation
351	planextc_4	Char	18	$18.	Planned Extubation
352	giint_4	Num	8		GI Intolerance
353	giintc_4	Char	14	$14.	GI Intolerance
354	invbside_4	Num	8		Invasive bedside procedure
355	invbsidec_4	Char	26	$26.	Invasive bedside procedure
356	leftfloor_4	Num	8		Patient left the floor
357	leftfloorc_4	Char	22	$22.	Patient left the floor
358	care_4	Num	8		Nursing Care (i.e. bathing, HOB down)
359	carec_4	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
360	medadm_4	Num	8		Medical Administration
361	medadmc_4	Char	22	$22.	Medical Administration
362	feedoffoth_4	Num	8		Other reason feed turned off:
363	feedoffothc_4	Char	5	$5.	Other reason feed turned off:
364	feedoffreas_4	Char	255	$255.	Other reason feed turned off: Reason

Num	Variable	Type	Len	Format	Label
365	giintoleden_4	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
366	giintoledenc_4	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
367	diarrhea_4	Num	8		Diarrhea
368	diarrheac_4	Char	8	$8.	Diarrhea
369	vomiting_4	Num	8		Vomiting
370	vomitingc_4	Char	8	$8.	Vomiting
371	aspiration_4	Num	8		Aspiration
372	aspirationc_4	Char	10	$10.	Aspiration
373	regurg_4	Num	8		Regurgitation
374	regurgc_4	Char	13	$13.	Regurgitation
375	feedsite_4	Num	8		Insertion site of feeding tube
376	feedsitec_4	Char	12	$12.	Insertion site of feeding tube
377	tubesize_4	Num	8		Feeding tube size
378	tubesizec_4	Char	10	$10.	Feeding tube size
379	distalpos_4	Num	8		Distal position of feeding tube
380	distalposc_4	Char	12	$12.	Distal position of feeding tube
381	distalconf_4	Num	8		Was distal position confirmed during this 24 hour period?
382	distalconfc_4	Char	19	$19.	Was distal position confirmed during this 24 hour period?
383	distalhow_4	Num	8		Yes, how confirmed:
384	distalhowc_4	Char	15	$15.	Yes, how confirmed:
385	distaloth_4	Char	40	$40.	Yes, how confirmed: Other
386	fullcal_4	Num	8		Was rate advanced to full-calorie rate during this calendar day?
387	fullcalc_4	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
388	fullcaltm_4	Num	8	TIMEAMPM.	Yes, time full calorie reached:
389	pronevent_4	Num	8		Prone ventilation this 24 hour period?
390	proneventc_4	Char	3	$3.	Prone ventilation this 24 hour period?
391	recfeedx_4	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
392	goalratex_4	Char	64	$64.	Tube feeding goal rate (Not Done)
393	goalchangex_4	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
394	brand1x_4	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
395	feedhrsx_4	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
396	giintoledenx_4	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
397	distalconfx_4	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
398	fullcalx_4	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
399	surg_5	Num	8		Surgery
400	surgc_5	Char	7	$7.	Surgery

Num	Variable	Type	Len	Format	Label
401	residual_5	Num	8		Elevated Residuals
402	residualc_5	Char	18	$18.	Elevated Residuals
403	const_5	Num	8		Constipation
404	constc_5	Char	12	$12.	Constipation
405	cramp_5	Num	8		Abdominal distention or cramping
406	crampc_5	Char	32	$32.	Abdominal distention or cramping
407	feedoffx_5	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
408	feedsitex_5	Char	64	$64.	Insertion site of feeding tube (Not Done)
409	tubesizex_5	Char	64	$64.	Feeding tube size (Not Done)
410	distalposx_5	Char	64	$64.	Distal position of feeding tube (Not Done)
411	proneventx_5	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
412	recfeed_5	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
413	recfeedc_5	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
414	goalrate_5	Num	8		Tube feeding goal rate
415	goalchange_5	Num	8		Did the goal rate change during the 24 hour period?
416	goalchangec_5	Char	19	$19.	Did the goal rate change during the 24 hour period?
417	newgoal_5	Num	8		Yes, new goal rate
418	brand1_5	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
419	brand1vol_5	Num	8		Total volume of enteral formula 1 infused for 24 hour period
420	brand2_5	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
421	brand2vol_5	Num	8		Total volume of enteral formula 2 infused for 24 hour period
422	feedhrs_5	Num	8		Number of hours enteral tube feeds on for this 24 hour period
423	feedoff_5	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
424	feedoffc_5	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
425	planext_5	Num	8		Planned Extubation
426	planextc_5	Char	18	$18.	Planned Extubation
427	giint_5	Num	8		GI Intolerance
428	giintc_5	Char	14	$14.	GI Intolerance
429	invbside_5	Num	8		Invasive bedside procedure
430	invbsidec_5	Char	26	$26.	Invasive bedside procedure
431	leftfloor_5	Num	8		Patient left the floor
432	leftfloorc_5	Char	22	$22.	Patient left the floor
433	care_5	Num	8		Nursing Care (i.e. bathing, HOB down)
434	carec_5	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
435	medadm_5	Num	8		Medical Administration
436	medadmc_5	Char	22	$22.	Medical Administration
437	feedoffoth_5	Num	8		Other reason feed turned off:

Num	Variable	Type	Len	Format	Label
438	feedoffothc_5	Char	5	$5.	Other reason feed turned off:
439	giintoleden_5	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
440	giintoledenc_5	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
441	diarrhea_5	Num	8		Diarrhea
442	diarrheac_5	Char	8	$8.	Diarrhea
443	vomiting_5	Num	8		Vomiting
444	vomitingc_5	Char	8	$8.	Vomiting
445	aspiration_5	Num	8		Aspiration
446	aspirationc_5	Char	10	$10.	Aspiration
447	regurg_5	Num	8		Regurgitation
448	regurgc_5	Char	13	$13.	Regurgitation
449	feedsite_5	Num	8		Insertion site of feeding tube
450	feedsitec_5	Char	12	$12.	Insertion site of feeding tube
451	tubesize_5	Num	8		Feeding tube size
452	tubesizec_5	Char	10	$10.	Feeding tube size
453	distalpos_5	Num	8		Distal position of feeding tube
454	distalposc_5	Char	12	$12.	Distal position of feeding tube
455	distalconf_5	Num	8		Was distal position confirmed during this 24 hour period?
456	distalconfc_5	Char	19	$19.	Was distal position confirmed during this 24 hour period?
457	distalhow_5	Num	8		Yes, how confirmed:
458	distalhowc_5	Char	15	$15.	Yes, how confirmed:
459	distaloth_5	Char	40	$40.	Yes, how confirmed: Other
460	fullcal_5	Num	8		Was rate advanced to full-calorie rate during this calendar day?
461	fullcalc_5	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
462	fullcaltm_5	Num	8	TIMEAMPM.	Yes, time full calorie reached:
463	pronevent_5	Num	8		Prone ventilation this 24 hour period?
464	proneventc_5	Char	3	$3.	Prone ventilation this 24 hour period?
465	recfeedx_5	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
466	goalratex_5	Char	64	$64.	Tube feeding goal rate (Not Done)
467	goalchangex_5	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
468	brand1x_5	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
469	feedhrsx_5	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
470	giintoledenx_5	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
471	distalconfx_5	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
472	fullcalx_5	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
473	surg_6	Num	8		Surgery

Num	Variable	Type	Len	Format	Label
474	surgc_6	Char	7	$7.	Surgery
475	residual_6	Num	8		Elevated Residuals
476	residualc_6	Char	18	$18.	Elevated Residuals
477	const_6	Num	8		Constipation
478	constc_6	Char	12	$12.	Constipation
479	cramp_6	Num	8		Abdominal distention or cramping
480	crampc_6	Char	32	$32.	Abdominal distention or cramping
481	feedoffx_6	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
482	feedsitex_6	Char	64	$64.	Insertion site of feeding tube (Not Done)
483	tubesizex_6	Char	64	$64.	Feeding tube size (Not Done)
484	distalposx_6	Char	64	$64.	Distal position of feeding tube (Not Done)
485	proneventx_6	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
486	recfeed_6	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
487	recfeedc_6	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
488	goalrate_6	Num	8		Tube feeding goal rate
489	goalchange_6	Num	8		Did the goal rate change during the 24 hour period?
490	goalchangec_6	Char	19	$19.	Did the goal rate change during the 24 hour period?
491	newgoal_6	Num	8		Yes, new goal rate
492	brand1_6	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
493	brand1vol_6	Num	8		Total volume of enteral formula 1 infused for 24 hour period
494	brand2_6	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
495	brand2vol_6	Num	8		Total volume of enteral formula 2 infused for 24 hour period
496	feedhrs_6	Num	8		Number of hours enteral tube feeds on for this 24 hour period
497	feedoff_6	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
498	feedoffc_6	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
499	planext_6	Num	8		Planned Extubation
500	planextc_6	Char	18	$18.	Planned Extubation
501	giint_6	Num	8		GI Intolerance
502	giintc_6	Char	14	$14.	GI Intolerance
503	invbside_6	Num	8		Invasive bedside procedure
504	invbsidec_6	Char	26	$26.	Invasive bedside procedure
505	leftfloor_6	Num	8		Patient left the floor
506	leftfloorc_6	Char	22	$22.	Patient left the floor
507	care_6	Num	8		Nursing Care (i.e. bathing, HOB down)
508	carec_6	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
509	medadm_6	Num	8		Medical Administration
510	medadmc_6	Char	22	$22.	Medical Administration

Num	Variable	Type	Len	Format	Label
511	feedoffoth_6	Num	8		Other reason feed turned off:
512	feedoffothc_6	Char	5	$5.	Other reason feed turned off:
513	feedoffreas_6	Char	255	$255.	Other reason feed turned off: Reason
514	giintoleden_6	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
515	giintoledenc_6	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
516	diarrhea_6	Num	8		Diarrhea
517	diarrheac_6	Char	8	$8.	Diarrhea
518	vomiting_6	Num	8		Vomiting
519	vomitingc_6	Char	8	$8.	Vomiting
520	aspiration_6	Num	8		Aspiration
521	aspirationc_6	Char	10	$10.	Aspiration
522	regurg_6	Num	8		Regurgitation
523	regurgc_6	Char	13	$13.	Regurgitation
524	feedsite_6	Num	8		Insertion site of feeding tube
525	feedsitec_6	Char	12	$12.	Insertion site of feeding tube
526	tubesize_6	Num	8		Feeding tube size
527	tubesizec_6	Char	10	$10.	Feeding tube size
528	distalpos_6	Num	8		Distal position of feeding tube
529	distalposc_6	Char	12	$12.	Distal position of feeding tube
530	distalconf_6	Num	8		Was distal position confirmed during this 24 hour period?
531	distalconfc_6	Char	19	$19.	Was distal position confirmed during this 24 hour period?
532	distalhow_6	Num	8		Yes, how confirmed:
533	distalhowc_6	Char	15	$15.	Yes, how confirmed:
534	distaloth_6	Char	40	$40.	Yes, how confirmed: Other
535	fullcal_6	Num	8		Was rate advanced to full-calorie rate during this calendar day?
536	fullcalc_6	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
537	fullcaltm_6	Num	8	TIMEAMPM.	Yes, time full calorie reached:
538	pronevent_6	Num	8		Prone ventilation this 24 hour period?
539	proneventc_6	Char	3	$3.	Prone ventilation this 24 hour period?
540	recfeedx_6	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
541	goalratex_6	Char	64	$64.	Tube feeding goal rate (Not Done)
542	goalchangex_6	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
543	brand1x_6	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
544	feedhrsx_6	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
545	giintoledenx_6	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
546	distalconfx_6	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)

Num	Variable	Type	Len	Format	Label
547	fullcalx_6	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
548	surg_7	Num	8		Surgery
549	surgc_7	Char	7	$7.	Surgery
550	residual_7	Num	8		Elevated Residuals
551	residualc_7	Char	18	$18.	Elevated Residuals
552	const_7	Num	8		Constipation
553	constc_7	Char	12	$12.	Constipation
554	cramp_7	Num	8		Abdominal distention or cramping
555	crampc_7	Char	32	$32.	Abdominal distention or cramping
556	feedoffx_7	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
557	feedsitex_7	Char	64	$64.	Insertion site of feeding tube (Not Done)
558	tubesizex_7	Char	64	$64.	Feeding tube size (Not Done)
559	distalposx_7	Char	64	$64.	Distal position of feeding tube (Not Done)
560	proneventx_7	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
561	recfeed_7	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
562	recfeedc_7	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
563	goalrate_7	Num	8		Tube feeding goal rate
564	goalchange_7	Num	8		Did the goal rate change during the 24 hour period?
565	goalchangec_7	Char	19	$19.	Did the goal rate change during the 24 hour period?
566	newgoal_7	Num	8		Yes, new goal rate
567	brand1_7	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
568	brand1vol_7	Num	8		Total volume of enteral formula 1 infused for 24 hour period
569	brand2_7	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
570	brand2vol_7	Num	8		Total volume of enteral formula 2 infused for 24 hour period
571	feedhrs_7	Num	8		Number of hours enteral tube feeds on for this 24 hour period
572	feedoff_7	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
573	feedoffc_7	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
574	planext_7	Num	8		Planned Extubation
575	planextc_7	Char	18	$18.	Planned Extubation
576	giint_7	Num	8		GI Intolerance
577	giintc_7	Char	14	$14.	GI Intolerance
578	invbside_7	Num	8		Invasive bedside procedure
579	invbsidec_7	Char	26	$26.	Invasive bedside procedure
580	leftfloor_7	Num	8		Patient left the floor
581	leftfloorc_7	Char	22	$22.	Patient left the floor
582	care_7	Num	8		Nursing Care (i.e. bathing, HOB down)
583	carec_7	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)

Num	Variable	Type	Len	Format	Label
584	medadm_7	Num	8		Medical Administration
585	medadmc_7	Char	22	$22.	Medical Administration
586	feedoffoth_7	Num	8		Other reason feed turned off:
587	feedoffothc_7	Char	5	$5.	Other reason feed turned off:
588	feedoffreas_7	Char	255	$255.	Other reason feed turned off: Reason
589	giintoleden_7	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
590	giintoledenc_7	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
591	diarrhea_7	Num	8		Diarrhea
592	diarrheac_7	Char	8	$8.	Diarrhea
593	vomiting_7	Num	8		Vomiting
594	vomitingc_7	Char	8	$8.	Vomiting
595	aspiration_7	Num	8		Aspiration
596	aspirationc_7	Char	10	$10.	Aspiration
597	regurg_7	Num	8		Regurgitation
598	regurgc_7	Char	13	$13.	Regurgitation
599	feedsite_7	Num	8		Insertion site of feeding tube
600	feedsitec_7	Char	12	$12.	Insertion site of feeding tube
601	tubesize_7	Num	8		Feeding tube size
602	tubesizec_7	Char	10	$10.	Feeding tube size
603	distalpos_7	Num	8		Distal position of feeding tube
604	distalposc_7	Char	12	$12.	Distal position of feeding tube
605	distalconf_7	Num	8		Was distal position confirmed during this 24 hour period?
606	distalconfc_7	Char	19	$19.	Was distal position confirmed during this 24 hour period?
607	distalhow_7	Num	8		Yes, how confirmed:
608	distalhowc_7	Char	15	$15.	Yes, how confirmed:
609	distaloth_7	Char	40	$40.	Yes, how confirmed: Other
610	fullcal_7	Num	8		Was rate advanced to full-calorie rate during this calendar day?
611	fullcalc_7	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
612	fullcaltm_7	Num	8	TIMEAMPM.	Yes, time full calorie reached:
613	pronevent_7	Num	8		Prone ventilation this 24 hour period?
614	proneventc_7	Char	3	$3.	Prone ventilation this 24 hour period?
615	recfeedx_7	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
616	goalratex_7	Char	64	$64.	Tube feeding goal rate (Not Done)
617	goalchangex_7	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
618	brand1x_7	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
619	feedhrsx_7	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)

Num	Variable	Type	Len	Format	Label
620	giintoledenx_7	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
621	distalconfx_7	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
622	fullcalx_7	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
623	surg_8	Num	8		Surgery
624	surgc_8	Char	7	$7.	Surgery
625	residual_8	Num	8		Elevated Residuals
626	residualc_8	Char	18	$18.	Elevated Residuals
627	const_8	Num	8		Constipation
628	constc_8	Char	12	$12.	Constipation
629	cramp_8	Num	8		Abdominal distention or cramping
630	crampc_8	Char	32	$32.	Abdominal distention or cramping
631	feedoffx_8	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
632	feedsitex_8	Char	64	$64.	Insertion site of feeding tube (Not Done)
633	tubesizex_8	Char	64	$64.	Feeding tube size (Not Done)
634	distalposx_8	Char	64	$64.	Distal position of feeding tube (Not Done)
635	proneventx_8	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
636	recfeed_8	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
637	recfeedc_8	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
638	goalrate_8	Num	8		Tube feeding goal rate
639	goalchange_8	Num	8		Did the goal rate change during the 24 hour period?
640	goalchangec_8	Char	19	$19.	Did the goal rate change during the 24 hour period?
641	newgoal_8	Num	8		Yes, new goal rate
642	brand1_8	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
643	brand1vol_8	Num	8		Total volume of enteral formula 1 infused for 24 hour period
644	brand2_8	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
645	brand2vol_8	Num	8		Total volume of enteral formula 2 infused for 24 hour period
646	feedhrs_8	Num	8		Number of hours enteral tube feeds on for this 24 hour period
647	feedoff_8	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
648	feedoffc_8	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
649	planext_8	Num	8		Planned Extubation
650	planextc_8	Char	18	$18.	Planned Extubation
651	giint_8	Num	8		GI Intolerance
652	giintc_8	Char	14	$14.	GI Intolerance
653	invbside_8	Num	8		Invasive bedside procedure
654	invbsidec_8	Char	26	$26.	Invasive bedside procedure
655	leftfloor_8	Num	8		Patient left the floor

Num	Variable	Type	Len	Format	Label
656	leftfloorc_8	Char	22	$22.	Patient left the floor
657	care_8	Num	8		Nursing Care (i.e. bathing, HOB down)
658	carec_8	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
659	medadm_8	Num	8		Medical Administration
660	medadmc_8	Char	22	$22.	Medical Administration
661	feedoffoth_8	Num	8		Other reason feed turned off:
662	feedoffothc_8	Char	5	$5.	Other reason feed turned off:
663	feedoffreas_8	Char	255	$255.	Other reason feed turned off: Reason
664	giintoleden_8	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
665	giintoledenc_8	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
666	diarrhea_8	Num	8		Diarrhea
667	diarrheac_8	Char	8	$8.	Diarrhea
668	vomiting_8	Num	8		Vomiting
669	vomitingc_8	Char	8	$8.	Vomiting
670	aspiration_8	Num	8		Aspiration
671	aspirationc_8	Char	10	$10.	Aspiration
672	regurg_8	Num	8		Regurgitation
673	regurgc_8	Char	13	$13.	Regurgitation
674	feedsite_8	Num	8		Insertion site of feeding tube
675	feedsitec_8	Char	12	$12.	Insertion site of feeding tube
676	tubesize_8	Num	8		Feeding tube size
677	tubesizec_8	Char	10	$10.	Feeding tube size
678	distalpos_8	Num	8		Distal position of feeding tube
679	distalposc_8	Char	12	$12.	Distal position of feeding tube
680	distalconf_8	Num	8		Was distal position confirmed during this 24 hour period?
681	distalconfc_8	Char	19	$19.	Was distal position confirmed during this 24 hour period?
682	distalhow_8	Num	8		Yes, how confirmed:
683	distalhowc_8	Char	15	$15.	Yes, how confirmed:
684	distaloth_8	Char	40	$40.	Yes, how confirmed: Other
685	fullcal_8	Num	8		Was rate advanced to full-calorie rate during this calendar day?
686	fullcalc_8	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
687	fullcaltm_8	Num	8	TIMEAMPM.	Yes, time full calorie reached:
688	pronevent_8	Num	8		Prone ventilation this 24 hour period?
689	proneventc_8	Char	3	$3.	Prone ventilation this 24 hour period?
690	recfeedx_8	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
691	goalratex_8	Char	64	$64.	Tube feeding goal rate (Not Done)
692	goalchangex_8	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)

Num	Variable	Type	Len	Format	Label
693	brand1x_8	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
694	feedhrsx_8	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
695	giintoledenx_8	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
696	distalconfx_8	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
697	fullcalx_8	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
698	surg_9	Num	8		Surgery
699	surgc_9	Char	7	$7.	Surgery
700	residual_9	Num	8		Elevated Residuals
701	residualc_9	Char	18	$18.	Elevated Residuals
702	const_9	Num	8		Constipation
703	constc_9	Char	12	$12.	Constipation
704	cramp_9	Num	8		Abdominal distention or cramping
705	crampc_9	Char	32	$32.	Abdominal distention or cramping
706	feedoffx_9	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
707	feedsitex_9	Char	64	$64.	Insertion site of feeding tube (Not Done)
708	tubesizex_9	Char	64	$64.	Feeding tube size (Not Done)
709	distalposx_9	Char	64	$64.	Distal position of feeding tube (Not Done)
710	proneventx_9	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
711	recfeed_9	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
712	recfeedc_9	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
713	goalrate_9	Num	8		Tube feeding goal rate
714	goalchange_9	Num	8		Did the goal rate change during the 24 hour period?
715	goalchangec_9	Char	19	$19.	Did the goal rate change during the 24 hour period?
716	newgoal_9	Num	8		Yes, new goal rate
717	brand1_9	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
718	brand1vol_9	Num	8		Total volume of enteral formula 1 infused for 24 hour period
719	brand2_9	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
720	brand2vol_9	Num	8		Total volume of enteral formula 2 infused for 24 hour period
721	feedhrs_9	Num	8		Number of hours enteral tube feeds on for this 24 hour period
722	feedoff_9	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
723	feedoffc_9	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
724	planext_9	Num	8		Planned Extubation
725	planextc_9	Char	18	$18.	Planned Extubation
726	giint_9	Num	8		GI Intolerance
727	giintc_9	Char	14	$14.	GI Intolerance
728	invbside_9	Num	8		Invasive bedside procedure

Num	Variable	Type	Len	Format	Label
729	invbsidec_9	Char	26	$26.	Invasive bedside procedure
730	leftfloor_9	Num	8		Patient left the floor
731	leftfloorc_9	Char	22	$22.	Patient left the floor
732	care_9	Num	8		Nursing Care (i.e. bathing, HOB down)
733	carec_9	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
734	medadm_9	Num	8		Medical Administration
735	medadmc_9	Char	22	$22.	Medical Administration
736	feedoffoth_9	Num	8		Other reason feed turned off:
737	feedoffothc_9	Char	5	$5.	Other reason feed turned off:
738	feedoffreas_9	Char	255	$255.	Other reason feed turned off: Reason
739	giintoleden_9	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
740	giintoledenc_9	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
741	diarrhea_9	Num	8		Diarrhea
742	diarrheac_9	Char	8	$8.	Diarrhea
743	vomiting_9	Num	8		Vomiting
744	vomitingc_9	Char	8	$8.	Vomiting
745	aspiration_9	Num	8		Aspiration
746	aspirationc_9	Char	10	$10.	Aspiration
747	regurg_9	Num	8		Regurgitation
748	regurgc_9	Char	13	$13.	Regurgitation
749	feedsite_9	Num	8		Insertion site of feeding tube
750	feedsitec_9	Char	12	$12.	Insertion site of feeding tube
751	tubesize_9	Num	8		Feeding tube size
752	tubesizec_9	Char	10	$10.	Feeding tube size
753	distalpos_9	Num	8		Distal position of feeding tube
754	distalposc_9	Char	12	$12.	Distal position of feeding tube
755	distalconf_9	Num	8		Was distal position confirmed during this 24 hour period?
756	distalconfc_9	Char	19	$19.	Was distal position confirmed during this 24 hour period?
757	distalhow_9	Num	8		Yes, how confirmed:
758	distalhowc_9	Char	15	$15.	Yes, how confirmed:
759	distaloth_9	Char	40	$40.	Yes, how confirmed: Other
760	fullcal_9	Num	8		Was rate advanced to full-calorie rate during this calendar day?
761	fullcalc_9	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
762	fullcaltm_9	Num	8	TIMEAMPM.	Yes, time full calorie reached:
763	pronevent_9	Num	8		Prone ventilation this 24 hour period?
764	proneventc_9	Char	3	$3.	Prone ventilation this 24 hour period?
765	recfeedx_9	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)

Num	Variable	Type	Len	Format	Label
766	goalratex_9	Char	64	$64.	Tube feeding goal rate (Not Done)
767	goalchangex_9	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
768	brand1x_9	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
769	feedhrsx_9	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
770	giintoledenx_9	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
771	distalconfx_9	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
772	fullcalx_9	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
773	surg_10	Num	8		Surgery
774	surgc_10	Char	7	$7.	Surgery
775	residual_10	Num	8		Elevated Residuals
776	residualc_10	Char	18	$18.	Elevated Residuals
777	const_10	Num	8		Constipation
778	constc_10	Char	12	$12.	Constipation
779	cramp_10	Num	8		Abdominal distention or cramping
780	crampc_10	Char	32	$32.	Abdominal distention or cramping
781	feedoffx_10	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
782	feedsitex_10	Char	64	$64.	Insertion site of feeding tube (Not Done)
783	tubesizex_10	Char	64	$64.	Feeding tube size (Not Done)
784	distalposx_10	Char	64	$64.	Distal position of feeding tube (Not Done)
785	proneventx_10	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
786	recfeed_10	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
787	recfeedc_10	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
788	goalrate_10	Num	8		Tube feeding goal rate
789	goalchange_10	Num	8		Did the goal rate change during the 24 hour period?
790	goalchangec_10	Char	19	$19.	Did the goal rate change during the 24 hour period?
791	newgoal_10	Num	8		Yes, new goal rate
792	brand1_10	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
793	brand1vol_10	Num	8		Total volume of enteral formula 1 infused for 24 hour period
794	brand2_10	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
795	brand2vol_10	Num	8		Total volume of enteral formula 2 infused for 24 hour period
796	feedhrs_10	Num	8		Number of hours enteral tube feeds on for this 24 hour period
797	feedoff_10	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
798	feedoffc_10	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
799	planext_10	Num	8		Planned Extubation
800	planextc_10	Char	18	$18.	Planned Extubation
801	giint_10	Num	8		GI Intolerance

Num	Variable	Type	Len	Format	Label
802	giintc_10	Char	14	$14.	GI Intolerance
803	invbside_10	Num	8		Invasive bedside procedure
804	invbsidec_10	Char	26	$26.	Invasive bedside procedure
805	leftfloor_10	Num	8		Patient left the floor
806	leftfloorc_10	Char	22	$22.	Patient left the floor
807	care_10	Num	8		Nursing Care (i.e. bathing, HOB down)
808	carec_10	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
809	medadm_10	Num	8		Medical Administration
810	medadmc_10	Char	22	$22.	Medical Administration
811	feedoffoth_10	Num	8		Other reason feed turned off:
812	feedoffothc_10	Char	5	$5.	Other reason feed turned off:
813	feedoffreas_10	Char	255	$255.	Other reason feed turned off: Reason
814	giintoleden_10	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
815	giintoledenc_10	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
816	diarrhea_10	Num	8		Diarrhea
817	diarrheac_10	Char	8	$8.	Diarrhea
818	vomiting_10	Num	8		Vomiting
819	vomitingc_10	Char	8	$8.	Vomiting
820	aspiration_10	Num	8		Aspiration
821	aspirationc_10	Char	10	$10.	Aspiration
822	regurg_10	Num	8		Regurgitation
823	regurgc_10	Char	13	$13.	Regurgitation
824	feedsite_10	Num	8		Insertion site of feeding tube
825	feedsitec_10	Char	12	$12.	Insertion site of feeding tube
826	tubesize_10	Num	8		Feeding tube size
827	tubesizec_10	Char	10	$10.	Feeding tube size
828	distalpos_10	Num	8		Distal position of feeding tube
829	distalposc_10	Char	12	$12.	Distal position of feeding tube
830	distalconf_10	Num	8		Was distal position confirmed during this 24 hour period?
831	distalconfc_10	Char	19	$19.	Was distal position confirmed during this 24 hour period?
832	distalhow_10	Num	8		Yes, how confirmed:
833	distalhowc_10	Char	15	$15.	Yes, how confirmed:
834	distaloth_10	Char	40	$40.	Yes, how confirmed: Other
835	fullcal_10	Num	8		Was rate advanced to full-calorie rate during this calendar day?
836	fullcalc_10	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
837	fullcaltm_10	Num	8	TIMEAMPM.	Yes, time full calorie reached:
838	pronevent_10	Num	8		Prone ventilation this 24 hour period?

Num	Variable	Type	Len	Format	Label
839	proneventc_10	Char	3	$3.	Prone ventilation this 24 hour period?
840	recfeedx_10	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
841	goalratex_10	Char	64	$64.	Tube feeding goal rate (Not Done)
842	goalchangex_10	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
843	brand1x_10	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
844	feedhrsx_10	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
845	giintoledenx_10	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
846	distalconfx_10	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
847	fullcalx_10	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
848	surg_11	Num	8		Surgery
849	surgc_11	Char	7	$7.	Surgery
850	residual_11	Num	8		Elevated Residuals
851	residualc_11	Char	18	$18.	Elevated Residuals
852	const_11	Num	8		Constipation
853	constc_11	Char	12	$12.	Constipation
854	cramp_11	Num	8		Abdominal distention or cramping
855	crampc_11	Char	32	$32.	Abdominal distention or cramping
856	feedoffx_11	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
857	feedsitex_11	Char	64	$64.	Insertion site of feeding tube (Not Done)
858	tubesizex_11	Char	64	$64.	Feeding tube size (Not Done)
859	distalposx_11	Char	64	$64.	Distal position of feeding tube (Not Done)
860	proneventx_11	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
861	recfeed_11	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
862	recfeedc_11	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
863	goalrate_11	Num	8		Tube feeding goal rate
864	goalchange_11	Num	8		Did the goal rate change during the 24 hour period?
865	goalchangec_11	Char	19	$19.	Did the goal rate change during the 24 hour period?
866	newgoal_11	Num	8		Yes, new goal rate
867	brand1_11	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
868	brand1vol_11	Num	8		Total volume of enteral formula 1 infused for 24 hour period
869	brand2_11	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
870	brand2vol_11	Num	8		Total volume of enteral formula 2 infused for 24 hour period
871	feedhrs_11	Num	8		Number of hours enteral tube feeds on for this 24 hour period
872	feedoff_11	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
873	feedoffc_11	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?

Num	Variable	Type	Len	Format	Label
874	planext_11	Num	8		Planned Extubation
875	planextc_11	Char	18	$18.	Planned Extubation
876	giint_11	Num	8		GI Intolerance
877	giintc_11	Char	14	$14.	GI Intolerance
878	invbside_11	Num	8		Invasive bedside procedure
879	invbsidec_11	Char	26	$26.	Invasive bedside procedure
880	leftfloor_11	Num	8		Patient left the floor
881	leftfloorc_11	Char	22	$22.	Patient left the floor
882	care_11	Num	8		Nursing Care (i.e. bathing, HOB down)
883	carec_11	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
884	medadm_11	Num	8		Medical Administration
885	medadmc_11	Char	22	$22.	Medical Administration
886	feedoffoth_11	Num	8		Other reason feed turned off:
887	feedoffothc_11	Char	5	$5.	Other reason feed turned off:
888	feedoffreas_11	Char	255	$255.	Other reason feed turned off: Reason
889	giintoleden_11	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
890	giintoledenc_11	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
891	diarrhea_11	Num	8		Diarrhea
892	diarrheac_11	Char	8	$8.	Diarrhea
893	vomiting_11	Num	8		Vomiting
894	vomitingc_11	Char	8	$8.	Vomiting
895	aspiration_11	Num	8		Aspiration
896	aspirationc_11	Char	10	$10.	Aspiration
897	regurg_11	Num	8		Regurgitation
898	regurgc_11	Char	13	$13.	Regurgitation
899	feedsite_11	Num	8		Insertion site of feeding tube
900	feedsitec_11	Char	12	$12.	Insertion site of feeding tube
901	tubesize_11	Num	8		Feeding tube size
902	tubesizec_11	Char	10	$10.	Feeding tube size
903	distalpos_11	Num	8		Distal position of feeding tube
904	distalposc_11	Char	12	$12.	Distal position of feeding tube
905	distalconf_11	Num	8		Was distal position confirmed during this 24 hour period?
906	distalconfc_11	Char	19	$19.	Was distal position confirmed during this 24 hour period?
907	distalhow_11	Num	8		Yes, how confirmed:
908	distalhowc_11	Char	15	$15.	Yes, how confirmed:
909	distaloth_11	Char	40	$40.	Yes, how confirmed: Other
910	fullcal_11	Num	8		Was rate advanced to full-calorie rate during this calendar day?

Num	Variable	Type	Len	Format	Label
911	fullcalc_11	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
912	fullcaltm_11	Num	8	TIMEAMPM.	Yes, time full calorie reached:
913	pronevent_11	Num	8		Prone ventilation this 24 hour period?
914	proneventc_11	Char	3	$3.	Prone ventilation this 24 hour period?
915	recfeedx_11	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
916	goalratex_11	Char	64	$64.	Tube feeding goal rate (Not Done)
917	goalchangex_11	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
918	brand1x_11	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
919	feedhrsx_11	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
920	giintoledenx_11	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
921	distalconfx_11	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
922	fullcalx_11	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
923	surg_12	Num	8		Surgery
924	surgc_12	Char	7	$7.	Surgery
925	residual_12	Num	8		Elevated Residuals
926	residualc_12	Char	18	$18.	Elevated Residuals
927	const_12	Num	8		Constipation
928	constc_12	Char	12	$12.	Constipation
929	cramp_12	Num	8		Abdominal distention or cramping
930	crampc_12	Char	32	$32.	Abdominal distention or cramping
931	feedoffx_12	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
932	feedsitex_12	Char	64	$64.	Insertion site of feeding tube (Not Done)
933	tubesizex_12	Char	64	$64.	Feeding tube size (Not Done)
934	distalposx_12	Char	64	$64.	Distal position of feeding tube (Not Done)
935	proneventx_12	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
936	recfeed_12	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
937	recfeedc_12	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
938	goalrate_12	Num	8		Tube feeding goal rate
939	goalchange_12	Num	8		Did the goal rate change during the 24 hour period?
940	goalchangec_12	Char	19	$19.	Did the goal rate change during the 24 hour period?
941	newgoal_12	Num	8		Yes, new goal rate
942	brand1_12	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
943	brand1vol_12	Num	8		Total volume of enteral formula 1 infused for 24 hour period
944	brand2_12	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
945	brand2vol_12	Num	8		Total volume of enteral formula 2 infused for 24 hour period
946	feedhrs_12	Num	8		Number of hours enteral tube feeds on for this 24 hour period

Num	Variable	Type	Len	Format	Label
947	feedoff_12	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
948	feedoffc_12	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
949	planext_12	Num	8		Planned Extubation
950	planextc_12	Char	18	$18.	Planned Extubation
951	giint_12	Num	8		GI Intolerance
952	giintc_12	Char	14	$14.	GI Intolerance
953	invbside_12	Num	8		Invasive bedside procedure
954	invbsidec_12	Char	26	$26.	Invasive bedside procedure
955	leftfloor_12	Num	8		Patient left the floor
956	leftfloorc_12	Char	22	$22.	Patient left the floor
957	care_12	Num	8		Nursing Care (i.e. bathing, HOB down)
958	carec_12	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
959	medadm_12	Num	8		Medical Administration
960	medadmc_12	Char	22	$22.	Medical Administration
961	feedoffoth_12	Num	8		Other reason feed turned off:
962	feedoffothc_12	Char	5	$5.	Other reason feed turned off:
963	feedoffreas_12	Char	255	$255.	Other reason feed turned off: Reason
964	giintoleden_12	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
965	giintoledenc_12	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
966	diarrhea_12	Num	8		Diarrhea
967	diarrheac_12	Char	8	$8.	Diarrhea
968	vomiting_12	Num	8		Vomiting
969	vomitingc_12	Char	8	$8.	Vomiting
970	aspiration_12	Num	8		Aspiration
971	aspirationc_12	Char	10	$10.	Aspiration
972	regurg_12	Num	8		Regurgitation
973	regurgc_12	Char	13	$13.	Regurgitation
974	feedsite_12	Num	8		Insertion site of feeding tube
975	feedsitec_12	Char	12	$12.	Insertion site of feeding tube
976	tubesize_12	Num	8		Feeding tube size
977	tubesizec_12	Char	10	$10.	Feeding tube size
978	distalpos_12	Num	8		Distal position of feeding tube
979	distalposc_12	Char	12	$12.	Distal position of feeding tube
980	distalconf_12	Num	8		Was distal position confirmed during this 24 hour period?
981	distalconfc_12	Char	19	$19.	Was distal position confirmed during this 24 hour period?
982	distalhow_12	Num	8		Yes, how confirmed:

Num	Variable	Type	Len	Format	Label
983	distalhowc_12	Char	15	$15.	Yes, how confirmed:
984	distaloth_12	Char	40	$40.	Yes, how confirmed: Other
985	fullcal_12	Num	8		Was rate advanced to full-calorie rate during this calendar day?
986	fullcalc_12	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
987	fullcaltm_12	Num	8	TIMEAMPM.	Yes, time full calorie reached:
988	pronevent_12	Num	8		Prone ventilation this 24 hour period?
989	proneventc_12	Char	3	$3.	Prone ventilation this 24 hour period?
990	recfeedx_12	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
991	goalratex_12	Char	64	$64.	Tube feeding goal rate (Not Done)
992	goalchangex_12	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
993	brand1x_12	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
994	feedhrsx_12	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
995	giintoledenx_12	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
996	distalconfx_12	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
997	fullcalx_12	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
998	residual_0	Num	8		
999	const_0	Num	8		
1000	cramp_0	Num	8		
1001	n_days	Num	8		N days with feeding data
1002	n_off	Num	8		N GI Intolerances
1003	n_off1	Num	8		Diarrhea
1004	n_off2	Num	8		Vomiting
1005	n_off3	Num	8		Aspiration
1006	n_off4	Num	8		Elevated Residuals
1007	n_off5	Num	8		Regurgitation
1008	n_off6	Num	8		Constipation
1009	n_off7	Num	8		Abdominal distention or cramping
1010	nostratvar	Num	8		

Data Set Name: glasgow_coma.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	sedative	Num	8		Is patient on a sedative or neuromuscular blocker?
16	sedativec	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
17	eye	Num	8		Eye opening score:
18	eyec	Char	11	$11.	Eye opening score:
19	motor	Num	8		Motor response score:
20	motorc	Char	26	$26.	Motor response score:
21	verbal	Num	8		Verbal response score:
22	verbalc	Char	50	$50.	Verbal response score:
23	gcs	Num	8		Total
24	gcsdt	Num	8	BEST12.	Date Taken (Day)
25	sedativex	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
26	eyex	Char	64	$64.	Eye opening score: (Not Done)
27	motorx	Char	64	$64.	Motor response score: (Not Done)
28	verbalx	Char	64	$64.	Verbal response score: (Not Done)
29	VISITORDER	Num	8		VISITORDER

Data Set Name: iando.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	fluidin	Num	8		Total Fluid Intake in last 24h
16	prbc24	Num	8		PRBC given in last 24 hours
17	ffp24	Num	8		FFP given in last 24 hours
18	fluidout	Num	8		Total fluid out last 24 hours
19	urineout	Num	8		Total urine output in the last 24 hours
20	notedenpt	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
21	notedenptc	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
22	entfeedvol	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
23	fluidinx	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
24	fluidoutx	Char	64	$64.	Total fluid out last 24 hours (Not Done)
25	urineoutx	Char	64	$64.	Total urine output in the last 24 hours (Not Done)

Data Set Name: labs_bypt.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	hgb_0	Num	8		Hgb (g/dL)
14	sodium_0	Num	8		Sodium (mEq/L):
15	potas_0	Num	8		Postassium (mEq/L)
16	gluc_0	Num	8		Glucose (mg/dL):
17	bicarb_0	Num	8		Serum Bicarb (mEq/L):
18	phos_0	Num	8		Serum Phosphorous (mg/dL)
19	mg_0	Num	8		Serum Magnesium (mEq/L)
20	protein_0	Num	8		Total Protein (g/dL)
21	album_0	Num	8		Albumin (g/dL):
22	glucmin_0	Num	8		Lowest glucose this day:
23	prothrombin_0	Num	8		Prothrombin time
24	hgbx	Char	64	$64.	Hgb (g/dL) (Not Done)
25	sodiumx	Char	64	$64.	Sodium (mEq/L): (Not Done)
26	potasx	Char	64	$64.	Postassium (mEq/L) (Not Done)
27	glucx	Char	64	$64.	Glucose (mg/dL): (Not Done)
28	bicarbx	Char	64	$64.	Serum Bicarb (mEq/L): (Not Done)
29	phosx_0	Char	64	$64.	Serum Phosphorous (mg/dL) (Not Done)
30	mgx_0	Char	64	$64.	Serum Magnesium (mEq/L) (Not Done)
31	proteinx_0	Char	64	$64.	Total Protein (g/dL) (Not Done)
32	albumx_0	Char	64	$64.	Albumin (g/dL): (Not Done)
33	alt_0	Num	8		ALT
34	ast	Num	8		AST
35	ck_0	Num	8		CK
36	crp_0	Num	8		CRP

Num	Variable	Type	Len	Format	Label
37	crphl_0	Num	8		High sensitivity or regular CRP
38	crphlc_0	Char	16	$16.	High sensitivity or regular CRP
39	insulinrt_1	Num	8		Insulin drip rate at time of glucose value
40	insulinsq_1	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
41	hgb_1	Num	8		Hgb (g/dL)
42	sodium_1	Num	8		Sodium (mEq/L):
43	potas_1	Num	8		Postassium (mEq/L)
44	gluc_1	Num	8		Glucose (mg/dL):
45	bicarb_1	Num	8		Serum Bicarb (mEq/L):
46	phos_1	Num	8		Serum Phosphorus (mEq/L)
47	mg_1	Num	8		Serum Magnesium (mg/dL)
48	protein_1	Num	8		Total Protein (g/dL)
49	album_1	Num	8		Albumin (g/dL):
50	prothrombin_1	Num	8		Prothrombin time (Seconds)
51	glucmin_1	Num	8		Lowest glucose this day
52	phosx_1	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
53	mgx_1	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
54	proteinx_1	Char	64	$64.	Total Protein (g/dL) (Not Done)
55	albumx_1	Char	64	$64.	Albumin (g/dL): (Not Done)
56	alt_1	Num	8		ALT
57	ck_1	Num	8		CK
58	crp_1	Num	8		CRP
59	crphl_1	Num	8		High sensitivity or regular CRP
60	crphlc_1	Char	16	$16.	High sensitivity or regular CRP
61	insulinrt_2	Num	8		Insulin drip rate at time of glucose value
62	insulinsq_2	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
63	hgb_2	Num	8		Hgb (g/dL)
64	sodium_2	Num	8		Sodium (mEq/L):
65	potas_2	Num	8		Postassium (mEq/L)
66	gluc_2	Num	8		Glucose (mg/dL):
67	bicarb_2	Num	8		Serum Bicarb (mEq/L):
68	phos_2	Num	8		Serum Phosphorus (mEq/L)
69	mg_2	Num	8		Serum Magnesium (mg/dL)
70	protein_2	Num	8		Total Protein (g/dL)
71	album_2	Num	8		Albumin (g/dL):
72	prothrombin_2	Num	8		Prothrombin time (Seconds)
73	glucmin_2	Num	8		Lowest glucose this day
74	phosx_2	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
75	mgx_2	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)

Num	Variable	Type	Len	Format	Label
76	proteinx_2	Char	64	$64.	Total Protein (g/dL) (Not Done)
77	albumx_2	Char	64	$64.	Albumin (g/dL): (Not Done)
78	alt_2	Num	8		ALT
79	ck_2	Num	8		CK
80	crp_2	Num	8		CRP
81	crphl_2	Num	8		High sensitivity or regular CRP
82	crphlc_2	Char	16	$16.	High sensitivity or regular CRP
83	insulinrt_3	Num	8		Insulin drip rate at time of glucose value
84	insulinsq_3	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
85	hgb_3	Num	8		Hgb (g/dL)
86	sodium_3	Num	8		Sodium (mEq/L):
87	potas_3	Num	8		Postassium (mEq/L)
88	gluc_3	Num	8		Glucose (mg/dL):
89	bicarb_3	Num	8		Serum Bicarb (mEq/L):
90	phos_3	Num	8		Serum Phosphorus (mEq/L)
91	mg_3	Num	8		Serum Magnesium (mg/dL)
92	protein_3	Num	8		Total Protein (g/dL)
93	album_3	Num	8		Albumin (g/dL):
94	prothrombin_3	Num	8		Prothrombin time (Seconds)
95	glucmin_3	Num	8		Lowest glucose this day
96	phosx_3	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
97	mgx_3	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
98	proteinx_3	Char	64	$64.	Total Protein (g/dL) (Not Done)
99	albumx_3	Char	64	$64.	Albumin (g/dL): (Not Done)
100	alt_3	Num	8		ALT
101	ck_3	Num	8		CK
102	crp_3	Num	8		CRP
103	crphl_3	Num	8		High sensitivity or regular CRP
104	crphlc_3	Char	16	$16.	High sensitivity or regular CRP
105	insulinrt_4	Num	8		Insulin drip rate at time of glucose value
106	insulinsq_4	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
107	hgb_4	Num	8		Hgb (g/dL)
108	sodium_4	Num	8		Sodium (mEq/L):
109	potas_4	Num	8		Postassium (mEq/L)
110	gluc_4	Num	8		Glucose (mg/dL):
111	bicarb_4	Num	8		Serum Bicarb (mEq/L):
112	phos_4	Num	8		Serum Phosphorus (mEq/L)
113	mg_4	Num	8		Serum Magnesium (mg/dL)
114	protein_4	Num	8		Total Protein (g/dL)

Num	Variable	Type	Len	Format	Label
115	album_4	Num	8		Albumin (g/dL):
116	prothrombin_4	Num	8		Prothrombin time (Seconds)
117	glucmin_4	Num	8		Lowest glucose this day
118	phosx_4	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
119	mgx_4	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
120	proteinx_4	Char	64	$64.	Total Protein (g/dL) (Not Done)
121	albumx_4	Char	64	$64.	Albumin (g/dL): (Not Done)
122	alt_4	Num	8		ALT
123	ck_4	Num	8		CK
124	crp_4	Num	8		CRP
125	crphl_4	Num	8		High sensitivity or regular CRP
126	crphlc_4	Char	16	$16.	High sensitivity or regular CRP
127	insulinrt_5	Num	8		Insulin drip rate at time of glucose value
128	insulinsq_5	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
129	hgb_5	Num	8		Hgb (g/dL)
130	sodium_5	Num	8		Sodium (mEq/L):
131	potas_5	Num	8		Postassium (mEq/L)
132	gluc_5	Num	8		Glucose (mg/dL):
133	bicarb_5	Num	8		Serum Bicarb (mEq/L):
134	phos_5	Num	8		Serum Phosphorus (mEq/L)
135	mg_5	Num	8		Serum Magnesium (mg/dL)
136	protein_5	Num	8		Total Protein (g/dL)
137	album_5	Num	8		Albumin (g/dL):
138	prothrombin_5	Num	8		Prothrombin time (Seconds)
139	glucmin_5	Num	8		Lowest glucose this day
140	phosx_5	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
141	mgx_5	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
142	proteinx_5	Char	64	$64.	Total Protein (g/dL) (Not Done)
143	albumx_5	Char	64	$64.	Albumin (g/dL): (Not Done)
144	alt_5	Num	8		ALT
145	ck_5	Num	8		CK
146	crp_5	Num	8		CRP
147	crphl_5	Num	8		High sensitivity or regular CRP
148	crphlc_5	Char	16	$16.	High sensitivity or regular CRP
149	insulinrt_6	Num	8		Insulin drip rate at time of glucose value
150	insulinsq_6	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
151	hgb_6	Num	8		Hgb (g/dL)
152	sodium_6	Num	8		Sodium (mEq/L):
153	potas_6	Num	8		Postassium (mEq/L)

Num	Variable	Type	Len	Format	Label
154	gluc_6	Num	8		Glucose (mg/dL):
155	bicarb_6	Num	8		Serum Bicarb (mEq/L):
156	phos_6	Num	8		Serum Phosphorus (mEq/L)
157	mg_6	Num	8		Serum Magnesium (mg/dL)
158	protein_6	Num	8		Total Protein (g/dL)
159	album_6	Num	8		Albumin (g/dL):
160	prothrombin_6	Num	8		Prothrombin time (Seconds)
161	glucmin_6	Num	8		Lowest glucose this day
162	phosx_6	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
163	mgx_6	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
164	proteinx_6	Char	64	$64.	Total Protein (g/dL) (Not Done)
165	albumx_6	Char	64	$64.	Albumin (g/dL): (Not Done)
166	alt_6	Num	8		ALT
167	ck_6	Num	8		CK
168	crp_6	Num	8		CRP
169	crphl_6	Num	8		High sensitivity or regular CRP
170	crphlc_6	Char	16	$16.	High sensitivity or regular CRP
171	insulinrt_7	Num	8		Insulin drip rate at time of glucose value
172	insulinsq_7	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
173	hgb_7	Num	8		Hgb (g/dL)
174	sodium_7	Num	8		Sodium (mEq/L):
175	potas_7	Num	8		Postassium (mEq/L)
176	gluc_7	Num	8		Glucose (mg/dL):
177	bicarb_7	Num	8		Serum Bicarb (mEq/L):
178	phos_7	Num	8		Serum Phosphorus (mEq/L)
179	mg_7	Num	8		Serum Magnesium (mg/dL)
180	protein_7	Num	8		Total Protein (g/dL)
181	album_7	Num	8		Albumin (g/dL):
182	prothrombin_7	Num	8		Prothrombin time (Seconds)
183	glucmin_7	Num	8		Lowest glucose this day
184	phosx_7	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
185	mgx_7	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
186	proteinx_7	Char	64	$64.	Total Protein (g/dL) (Not Done)
187	albumx_7	Char	64	$64.	Albumin (g/dL): (Not Done)
188	alt_7	Num	8		ALT
189	ck_7	Num	8		CK
190	crp_7	Num	8		CRP
191	crphl_7	Num	8		High sensitivity or regular CRP
192	crphlc_7	Char	16	$16.	High sensitivity or regular CRP

Num	Variable	Type	Len	Format	Label
193	insulinrt_8	Num	8		Insulin drip rate at time of glucose value
194	insulinsq_8	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
195	hgb_8	Num	8		Hgb (g/dL)
196	sodium_8	Num	8		Sodium (mEq/L):
197	potas_8	Num	8		Postassium (mEq/L)
198	gluc_8	Num	8		Glucose (mg/dL):
199	bicarb_8	Num	8		Serum Bicarb (mEq/L):
200	phos_8	Num	8		Serum Phosphorus (mEq/L)
201	mg_8	Num	8		Serum Magnesium (mg/dL)
202	protein_8	Num	8		Total Protein (g/dL)
203	album_8	Num	8		Albumin (g/dL):
204	prothrombin_8	Num	8		Prothrombin time (Seconds)
205	glucmin_8	Num	8		Lowest glucose this day
206	phosx_8	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
207	mgx_8	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
208	proteinx_8	Char	64	$64.	Total Protein (g/dL) (Not Done)
209	albumx_8	Char	64	$64.	Albumin (g/dL): (Not Done)
210	alt_8	Num	8		ALT
211	ck_8	Num	8		CK
212	crp_8	Num	8		CRP
213	crphl_8	Num	8		High sensitivity or regular CRP
214	crphlc_8	Char	16	$16.	High sensitivity or regular CRP
215	insulinrt_9	Num	8		Insulin drip rate at time of glucose value
216	insulinsq_9	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
217	hgb_9	Num	8		Hgb (g/dL)
218	sodium_9	Num	8		Sodium (mEq/L):
219	potas_9	Num	8		Postassium (mEq/L)
220	gluc_9	Num	8		Glucose (mg/dL):
221	bicarb_9	Num	8		Serum Bicarb (mEq/L):
222	phos_9	Num	8		Serum Phosphorus (mEq/L)
223	mg_9	Num	8		Serum Magnesium (mg/dL)
224	protein_9	Num	8		Total Protein (g/dL)
225	album_9	Num	8		Albumin (g/dL):
226	prothrombin_9	Num	8		Prothrombin time (Seconds)
227	glucmin_9	Num	8		Lowest glucose this day
228	phosx_9	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
229	mgx_9	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
230	proteinx_9	Char	64	$64.	Total Protein (g/dL) (Not Done)
231	albumx_9	Char	64	$64.	Albumin (g/dL): (Not Done)

Num	Variable	Type	Len	Format	Label
232	alt_9	Num	8		ALT
233	ck_9	Num	8		CK
234	crp_9	Num	8		CRP
235	crphl_9	Num	8		High sensitivity or regular CRP
236	crphlc_9	Char	16	$16.	High sensitivity or regular CRP
237	insulinrt_10	Num	8		Insulin drip rate at time of glucose value
238	insulinsq_10	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
239	hgb_10	Num	8		Hgb (g/dL)
240	sodium_10	Num	8		Sodium (mEq/L):
241	potas_10	Num	8		Postassium (mEq/L)
242	gluc_10	Num	8		Glucose (mg/dL):
243	bicarb_10	Num	8		Serum Bicarb (mEq/L):
244	phos_10	Num	8		Serum Phosphorus (mEq/L)
245	mg_10	Num	8		Serum Magnesium (mg/dL)
246	protein_10	Num	8		Total Protein (g/dL)
247	album_10	Num	8		Albumin (g/dL):
248	prothrombin_10	Num	8		Prothrombin time (Seconds)
249	glucmin_10	Num	8		Lowest glucose this day
250	phosx_10	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
251	mgx_10	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
252	proteinx_10	Char	64	$64.	Total Protein (g/dL) (Not Done)
253	albumx_10	Char	64	$64.	Albumin (g/dL): (Not Done)
254	alt_10	Num	8		ALT
255	ck_10	Num	8		CK
256	crp_10	Num	8		CRP
257	crphl_10	Num	8		High sensitivity or regular CRP
258	crphlc_10	Char	16	$16.	High sensitivity or regular CRP
259	insulinrt_11	Num	8		Insulin drip rate at time of glucose value
260	insulinsq_11	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
261	hgb_11	Num	8		Hgb (g/dL)
262	sodium_11	Num	8		Sodium (mEq/L):
263	potas_11	Num	8		Postassium (mEq/L)
264	gluc_11	Num	8		Glucose (mg/dL):
265	bicarb_11	Num	8		Serum Bicarb (mEq/L):
266	phos_11	Num	8		Serum Phosphorus (mEq/L)
267	mg_11	Num	8		Serum Magnesium (mg/dL)
268	protein_11	Num	8		Total Protein (g/dL)
269	album_11	Num	8		Albumin (g/dL):
270	prothrombin_11	Num	8		Prothrombin time (Seconds)

Num	Variable	Type	Len	Format	Label
271	glucmin_11	Num	8		Lowest glucose this day
272	phosx_11	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
273	mgx_11	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
274	proteinx_11	Char	64	$64.	Total Protein (g/dL) (Not Done)
275	albumx_11	Char	64	$64.	Albumin (g/dL): (Not Done)
276	alt_11	Num	8		ALT
277	ck_11	Num	8		CK
278	crp_11	Num	8		CRP
279	crphl_11	Num	8		High sensitivity or regular CRP
280	crphlc_11	Char	16	$16.	High sensitivity or regular CRP
281	insulinrt_12	Num	8		Insulin drip rate at time of glucose value
282	insulinsq_12	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
283	hgb_12	Num	8		Hgb (g/dL)
284	sodium_12	Num	8		Sodium (mEq/L):
285	potas_12	Num	8		Postassium (mEq/L)
286	gluc_12	Num	8		Glucose (mg/dL):
287	bicarb_12	Num	8		Serum Bicarb (mEq/L):
288	phos_12	Num	8		Serum Phosphorus (mEq/L)
289	mg_12	Num	8		Serum Magnesium (mg/dL)
290	protein_12	Num	8		Total Protein (g/dL)
291	album_12	Num	8		Albumin (g/dL):
292	prothrombin_12	Num	8		Prothrombin time (Seconds)
293	glucmin_12	Num	8		Lowest glucose this day
294	phosx_12	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
295	mgx_12	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
296	proteinx_12	Char	64	$64.	Total Protein (g/dL) (Not Done)
297	albumx_12	Char	64	$64.	Albumin (g/dL): (Not Done)
298	alt_12	Num	8		ALT
299	ck_12	Num	8		CK
300	crp_12	Num	8		CRP
301	crphl_12	Num	8		High sensitivity or regular CRP
302	crphlc_12	Char	16	$16.	High sensitivity or regular CRP
303	insulinrt_14	Num	8		Insulin drip rate at time of glucose value
304	insulinsq_14	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
305	hgb_14	Num	8		Hgb (g/dL)
306	sodium_14	Num	8		Sodium (mEq/L):
307	potas_14	Num	8		Postassium (mEq/L)
308	gluc_14	Num	8		Glucose (mg/dL):
309	bicarb_14	Num	8		Serum Bicarb (mEq/L):

Num	Variable	Type	Len	Format	Label
310	phos_14	Num	8		Serum Phosphorus (mEq/L)
311	mg_14	Num	8		Serum Magnesium (mg/dL)
312	protein_14	Num	8		Total Protein (g/dL)
313	album_14	Num	8		Albumin (g/dL):
314	prothrombin_14	Num	8		Prothrombin time (Seconds)
315	glucmin_14	Num	8		Lowest glucose this day
316	phosx_14	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
317	mgx_14	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
318	proteinx_14	Char	64	$64.	Total Protein (g/dL) (Not Done)
319	albumx_14	Char	64	$64.	Albumin (g/dL): (Not Done)
320	alt_14	Num	8		ALT
321	ck_14	Num	8		CK
322	crp_14	Num	8		CRP
323	crphl_14	Num	8		High sensitivity or regular CRP
324	crphlc_14	Char	16	$16.	High sensitivity or regular CRP
325	insulinrt_21	Num	8		Insulin drip rate at time of glucose value
326	insulinsq_21	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
327	hgb_21	Num	8		Hgb (g/dL)
328	sodium_21	Num	8		Sodium (mEq/L):
329	potas_21	Num	8		Postassium (mEq/L)
330	gluc_21	Num	8		Glucose (mg/dL):
331	bicarb_21	Num	8		Serum Bicarb (mEq/L):
332	phos_21	Num	8		Serum Phosphorus (mEq/L)
333	mg_21	Num	8		Serum Magnesium (mg/dL)
334	protein_21	Num	8		Total Protein (g/dL)
335	album_21	Num	8		Albumin (g/dL):
336	prothrombin_21	Num	8		Prothrombin time (Seconds)
337	glucmin_21	Num	8		Lowest glucose this day
338	phosx_21	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
339	mgx_21	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
340	proteinx_21	Char	64	$64.	Total Protein (g/dL) (Not Done)
341	albumx_21	Char	64	$64.	Albumin (g/dL): (Not Done)
342	alt_21	Num	8		ALT
343	ck_21	Num	8		CK
344	crp_21	Num	8		CRP
345	crphl_21	Num	8		High sensitivity or regular CRP
346	crphlc_21	Char	16	$16.	High sensitivity or regular CRP

Data Set Name: max_apache_abg2.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	abgidx	Num	8		Form index
15	visitname	Char	1024	$1024.	Visit Name
16	fio2abg	Num	8		FiO2:
17	pao2abg	Num	8		PaO2 (mmHg):
18	paco2abg	Num	8		PaCO2 (mmHg):
19	phabg	Num	8		pH:
20	intubat	Num	8		Intubated when ABG obtained:
21	intubatc	Char	3	$3.	Intubated when ABG obtained:
22	fio2abgx	Char	64	$64.	FiO2: (Not Done)
23	pao2abgX	Char	64	$64.	PaO2 (mmHg): (Not Done)
24	paco2abgX	Char	64	$64.	PaCO2 (mmHg): (Not Done)
25	phabgX	Char	64	$64.	pH: (Not Done)
26	intubatX	Char	64	$64.	Intubated when ABG obtained: (Not Done)

Data Set Name: omega_dose.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	omegadose	Num	8		Number of scheduled doses of study emulsion given
16	omegadosec	Char	1	$1.	Number of scheduled doses of study emulsion given
17	omegaheld1	Num	8		Reason 1
18	omegaheld1c	Char	7	$7.	Reason 1
19	omegaheldrsn1	Num	8		Reason 1: Pulldown Choice
20	omegaheldrsn1c	Char	23	$23.	Reason 1: Pulldown Choice
21	omegaheld1oth	Char	255	$255.	Reason 1: Other
22	omegaheld2	Num	8		Reason 2
23	omegaheld2c	Char	7	$7.	Reason 2
24	omegaheldrsn2	Num	8		Reason 2: Pulldown Choice
25	omegaheldrsn2c	Char	23	$23.	Reason 2: Pulldown Choice
26	omegaheld2oth	Char	255	$255.	Reason 2: Other
27	omegatol	Num	8		Number of administered doses tolerated
28	omegatolc	Char	1	$1.	Number of administered doses tolerated
29	omegadosex	Char	64	$64.	Number of scheduled doses of study emulsion given (Not Done)
30	omegaheld1x	Char	64	$64.	Reason 1 (Not Done)
31	omegaheld2x	Char	64	$64.	Reason 2 (Not Done)
32	omegatolx	Char	64	$64.	Number of administered doses tolerated (Not Done)

Data Set Name: os_feeding.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	recfeed	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
16	recfeedc	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
17	goalrate	Num	8		Tube feeding goal rate
18	goalchange	Num	8		Did the goal rate change during the 24 hour period?
19	goalchangec	Char	19	$19.	Did the goal rate change during the 24 hour period?
20	newgoal	Num	8		Yes, new goal rate
21	brand1	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
22	brand1vol	Num	8		Total volume of enteral formula 1 infused for 24 hour period
23	brand2	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
24	brand2vol	Num	8		Total volume of enteral formula 2 infused for 24 hour period
25	feedhrs	Num	8		Number of hours enteral tube feeds on for this 24 hour period
26	feedoff	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
27	feedoffc	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
28	planext	Num	8		Planned Extubation
29	planextc	Char	18	$18.	Planned Extubation
30	giint	Num	8		GI Intolerance
31	giintc	Char	14	$14.	GI Intolerance
32	invbside	Num	8		Invasive bedside procedure
33	invbsidec	Char	26	$26.	Invasive bedside procedure
34	surg	Num	8		Surgery
35	surgc	Char	7	$7.	Surgery

Num	Variable	Type	Len	Format	Label
36	leftfloor	Num	8		Patient left the floor
37	leftfloorc	Char	22	$22.	Patient left the floor
38	care	Num	8		Nursing Care (i.e. bathing, HOB down)
39	carec	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
40	medadm	Num	8		Medical Administration
41	medadmc	Char	22	$22.	Medical Administration
42	feedoffoth	Num	8		Other reason feed turned off:
43	feedoffothc	Char	5	$5.	Other reason feed turned off:
44	feedoffreas	Char	255	$255.	Other reason feed turned off: Reason
45	giintoleden	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
46	giintoledenc	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
47	diarrhea	Num	8		Diarrhea
48	diarrheac	Char	8	$8.	Diarrhea
49	vomiting	Num	8		Vomiting
50	vomitingc	Char	8	$8.	Vomiting
51	aspiration	Num	8		Aspiration
52	aspirationc	Char	10	$10.	Aspiration
53	residual	Num	8		Elevated Residuals
54	residualc	Char	18	$18.	Elevated Residuals
55	regurg	Num	8		Regurgitation
56	regurgc	Char	13	$13.	Regurgitation
57	const	Num	8		Constipation
58	constc	Char	12	$12.	Constipation
59	cramp	Num	8		Abdominal distention or cramping
60	crampc	Char	32	$32.	Abdominal distention or cramping
61	feedsite	Num	8		Insertion site of feeding tube
62	feedsitec	Char	12	$12.	Insertion site of feeding tube
63	tubesize	Num	8		Feeding tube size
64	tubesizec	Char	10	$10.	Feeding tube size
65	distalpos	Num	8		Distal position of feeding tube
66	distalposc	Char	12	$12.	Distal position of feeding tube
67	distalconf	Num	8		Was distal position confirmed during this 24 hour period?
68	distalconfc	Char	19	$19.	Was distal position confirmed during this 24 hour period?
69	distalhow	Num	8		Yes, how confirmed:
70	distalhowc	Char	15	$15.	Yes, how confirmed:
71	distaloth	Char	40	$40.	Yes, how confirmed: Other
72	fullcal	Num	8		Was rate advanced to full-calorie rate during this calendar day?

Num	Variable	Type	Len	Format	Label
73	fullcalc	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
74	fullcaltm	Num	8	TIMEAMPM.	Yes, time full calorie reached:
75	pronevent	Num	8		Prone ventilation this 24 hour period?
76	proneventc	Char	3	$3.	Prone ventilation this 24 hour period?
77	recfeedx	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
78	goalratex	Char	64	$64.	Tube feeding goal rate (Not Done)
79	goalchangex	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
80	brand1x	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
81	feedhrsx	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
82	feedoffx	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
83	giintoledenx	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
84	feedsitex	Char	64	$64.	Insertion site of feeding tube (Not Done)
85	tubesizex	Char	64	$64.	Feeding tube size (Not Done)
86	distalposx	Char	64	$64.	Distal position of feeding tube (Not Done)
87	distalconfx	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
88	fullcalx	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
89	proneventx	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)

Data Set Name: os_labs.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	hgb	Num	8		Hgb (g/dL)
16	sodium	Num	8		Sodium (mEq/L):
17	potas	Num	8		Postassium (mEq/L)
18	gluc	Num	8		Glucose (mg/dL):
19	bicarb	Num	8		Serum Bicarb (mEq/L):
20	phos	Num	8		Serum Phosphorus (mEq/L)
21	mg	Num	8		Serum Magnesium (mg/dL)
22	protein	Num	8		Total Protein (g/dL)
23	album	Num	8		Albumin (g/dL):
24	prothrombin	Num	8		Prothrombin time (Seconds)
25	insulinrt	Num	8		Insulin drip rate at time of glucose value
26	insulinsq	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
27	glucmin	Num	8		Lowest glucose this day
28	phosx	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
29	mgx	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
30	proteinx	Char	64	$64.	Total Protein (g/dL) (Not Done)
31	albumx	Char	64	$64.	Albumin (g/dL): (Not Done)

Data Set Name: os_labs_all.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	hgb	Num	8		Hgb (g/dL)
16	sodium	Num	8		Sodium (mEq/L):
17	potas	Num	8		Postassium (mEq/L)
18	gluc	Num	8		Glucose (mg/dL):
19	bicarb	Num	8		Serum Bicarb (mEq/L):
20	phos	Num	8		Serum Phosphorus (mEq/L)
21	mg	Num	8		Serum Magnesium (mg/dL)
22	protein	Num	8		Total Protein (g/dL)
23	album	Num	8		Albumin (g/dL):
24	prothrombin	Num	8		Prothrombin time (Seconds)
25	insulinrt	Num	8		Insulin drip rate at time of glucose value
26	insulinsq	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
27	glucmin	Num	8		Lowest glucose this day
28	phosx	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
29	mgx	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
30	proteinx	Char	64	$64.	Total Protein (g/dL) (Not Done)
31	albumx	Char	64	$64.	Albumin (g/dL): (Not Done)
32	alt	Num	8		ALT
33	ck	Num	8		CK
34	crp	Num	8		CRP
35	crphl	Num	8		High sensitivity or regular CRP
36	crphlc	Char	16	$16.	High sensitivity or regular CRP

Data Set Name: os_vent.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	simv	Num	8		SIMV
16	simvc	Char	4	$4.	SIMV
17	prvc	Num	8		PRVC (pressure regulated volume control) or equivalent
18	prvc2	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
19	pressup	Num	8		Pressure Support (y/n)
20	pressupc	Char	16	$16.	Pressure Support (y/n)
21	pressupcmh2o	Num	8		Pressure Support cmH2O
22	volassist	Num	8		Volume Assist/Control
23	volassistc	Char	21	$21.	Volume Assist/Control
24	presassist	Num	8		Pressure Assist (y/n)
25	presassistc	Char	15	$15.	Pressure Assist (y/n)
26	presascmh2o	Num	8		Pressure Assist cmH2O
27	pcirv	Num	8		PC IRV
28	pcirvc	Char	6	$6.	PC IRV
29	aprv	Num	8		Airway Pressure Release Ventilation (APRV)
30	aprvc	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
31	ventoth	Num	8		Other vent mode
32	ventothc	Char	5	$5.	Other vent mode
33	hfov	Num	8		HFOV
34	hfovc	Char	4	$4.	HFOV
35	tidal	Num	8		Calculated Delivered Tidal Volume
36	setrate	Num	8		Set Rate

Num	Variable	Type	Len	Format	Label
37	resp	Num	8		Total Respiratory Rate
38	minvent	Num	8		Total Minute Ventilation
39	peep	Num	8		PEEP (cm H2O):
40	fio2	Num	8		FiO2 at 0800
41	SpO2	Num	8		SpO2 at 0800
42	pplat	Num	8		Plateau Pressure (cm H2O):
43	pip	Num	8		Peak Inspiratory Pressure
44	meanair	Num	8		Mean airway pressure (cm H2O)
45	fio2abg	Num	8		FiO2 at time of ABG:
46	pao2abg	Num	8		PaO2 (cm H20):
47	paco2abg	Num	8		PaCO2 (cm H20):
48	phabg	Num	8		Arterial pH:
49	spo2abg	Num	8		SpO2 at time of ABG
50	ventmodex	Char	64	$64.	Vent mode: (Not Done)
51	tidalx	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
52	respx	Char	64	$64.	Total Respiratory Rate (Not Done)
53	minventx	Char	64	$64.	Total Minute Ventilation (Not Done)
54	peepx	Char	64	$64.	PEEP (cm H2O): (Not Done)
55	fio2x	Char	64	$64.	FiO2 at 0800 (Not Done)
56	SpO2x	Char	64	$64.	SpO2 at 0800 (Not Done)
57	meanairx	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)

Data Set Name: os_vitals.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	hrate	Num	8		Heart Rate (beat/min):
16	sysbp	Num	8		Systolic BP (mmHg):
17	diabp	Num	8		Diastolic BP (mmHg):
18	temp	Num	8		Temperature (Celcius):
19	cvp	Num	8		CVP (mmHg):
20	cxrquads	Num	8		CXR: Number of quadrants with infiltrates
21	vaso	Num	8		Vasopressors/inotropes this day?
22	vasoc	Char	3	$3.	Vasopressors/inotropes this day?
23	dobut	Num	8		IV Dobutamine Infusion Rate:
24	dobutu	Char	9	$9.	IV Dobutamine Infusion Rate Units
25	dopa	Num	8		IV Dopamine Infusion Rate:
26	dopau	Char	9	$9.	IV Dopamine Infusion Rate Units
27	norepi	Num	8		IV Norepinephrine Infusion Rate:
28	norepiu	Char	9	$9.	IV Norepinephrine Infusion Rate Units
29	epi	Num	8		IV Epinephrine Infusion Rate:
30	epiu	Char	9	$9.	ug/kg/min or ug/min
31	vasorate	Num	8		IV Vasopressin Infusion Rate (units/min):
32	neosyn	Num	8		IV Neosynephrine Infusion Rate:
33	neosynu	Char	9	$9.	IV Neosynephrine Infusion Rate Units
34	vasooth	Char	50	$50.	If Other Please Specify:
35	cort20	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?

Num	Variable	Type	Len	Format	Label
36	cort20c	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
37	betablock	Num	8		Beta Blockers (IV, PO, PGT) this day?
38	betablockc	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
39	ipatro	Num	8		Aerosolized or MDI delivered ipatropium?
40	ipatroc	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
41	ipadose	Num	8		Yes: Enter total number of doses this day:
42	nsbetag	Num	8		Non-study beta-agonist aerosol this day?
43	nsbetagc	Char	85	$85.	Non-study beta-agonist aerosol this day?
44	nsbetagdose	Num	8		Yes: Enter total dose in mg this day
45	hratex	Char	64	$64.	Heart Rate (beat/min): (Not Done)
46	sysbpx	Char	64	$64.	Systolic BP (mmHg): (Not Done)
47	diabpx	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
48	tempx	Char	64	$64.	Temperature (Celcius): (Not Done)
49	vasox	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
50	cort20x	Char	64	$64.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?(Not Done)
51	betablockx	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
52	ipatrox	Char	64	$64.	Aerosolized or MDI delivered ipatropium? (Not Done)
53	nsbetagx	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)

Data Set Name: os_vs.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	hrate	Num	8		Heart Rate (beat/min):
16	sysbp	Num	8		Systolic BP (mmHg):
17	diabp	Num	8		Diastolic BP (mmHg):
18	temp	Num	8		Temperature (Celcius):
19	cvp	Num	8		CVP (mmHg):
20	cxrquads	Num	8		CXR: Number of quadrants with infiltrates
21	vaso	Num	8		Vasopressors/inotropes this day?
22	vasoc	Char	3	$3.	Vasopressors/inotropes this day?
23	dobut	Num	8		IV Dobutamine Infusion Rate:
24	dobutu	Char	9	$9.	IV Dobutamine Infusion Rate Units
25	dopa	Num	8		IV Dopamine Infusion Rate:
26	dopau	Char	9	$9.	IV Dopamine Infusion Rate Units
27	norepi	Num	8		IV Norepinephrine Infusion Rate:
28	norepiu	Char	9	$9.	IV Norepinephrine Infusion Rate Units
29	epi	Num	8		IV Epinephrine Infusion Rate:
30	epiu	Char	9	$9.	ug/kg/min or ug/min
31	vasorate	Num	8		IV Vasopressin Infusion Rate (units/min):
32	neosyn	Num	8		IV Neosynephrine Infusion Rate:
33	neosynu	Char	9	$9.	IV Neosynephrine Infusion Rate Units
34	vasooth	Char	50	$50.	If Other Please Specify:
35	cort20	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?

Num	Variable	Type	Len	Format	Label
36	cort20c	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
37	betablock	Num	8		Beta Blockers (IV, PO, PGT) this day?
38	betablockc	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
39	ipatro	Num	8		Aerosolized or MDI delivered ipatropium?
40	ipatroc	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
41	ipadose	Num	8		Yes: Enter total number of doses this day:
42	nsbetag	Num	8		Non-study beta-agonist aerosol this day?
43	nsbetagc	Char	85	$85.	Non-study beta-agonist aerosol this day?
44	nsbetagdose	Num	8		Yes: Enter total dose in mg this day
45	hratex	Char	64	$64.	Heart Rate (beat/min): (Not Done)
46	sysbpx	Char	64	$64.	Systolic BP (mmHg): (Not Done)
47	diabpx	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
48	tempx	Char	64	$64.	Temperature (Celcius): (Not Done)
49	vasox	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
50	cort20x	Char	64	$64.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?(Not Done)
51	betablockx	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
52	ipatrox	Char	64	$64.	Aerosolized or MDI delivered ipatropium? (Not Done)
53	nsbetagx	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
54	cort	Num	8		IV or PO corticosteroids totaling more than 20 mg this calendar day
55	cortc	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg this calendar day

Data Set Name: randchecktime.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	chktm1	Char	11	$11.	Day 1 Check Time
16	chktm2	Char	11	$11.	Day 2 Check Time
17	chktm3	Char	11	$11.	Day 3 Check Time
18	chktm4	Char	11	$11.	Day 4 Check Time
19	chktm5	Char	11	$11.	Day 5 Check Time
20	chktm6	Char	11	$11.	Day 6 Check Time
21	chktm7	Char	11	$11.	Day 7 Check Time

Data Set Name: randomcheck.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	vaso12prior	Num	8		Patient received vasopressors in the 12 hours prior to random check time?
16	vaso12priorc	Char	3	$3.	Patient received vasopressors in the 12 hours prior to random check time?
17	map60	Num	8		Did MAP fall below 60 mmHg in the 12 hours prior to random check time?
18	map60c	Char	3	$3.	Did MAP fall below 60 mmHg in the 12 hours prior to random check time?
19	maintflu	Num	8		IV maintenance fluids running in the 4 hours prior to random check time?
20	maintfluc	Char	3	$3.	IV maintenance fluids running in the 4 hours prior to random check time?
21	lasix4	Num	8		Lasix given in the in the 4 hours prior to random check time?
22	lasix4c	Char	3	$3.	Lasix given in the in the 4 hours prior to random check time?
23	bolus12	Num	8		Fluid bolus given in the 12 hours prior to random check time?
24	bolus12c	Char	3	$3.	Fluid bolus given in the 12 hours prior to random check time?
25	avuop4	Num	8		Average UOP in the in the 4 hours prior to random check time?
26	avuop4c	Char	3	$3.	Average UOP in the in the 4 hours prior to random check time?
27	cvp_rc	Num	8		mmHg CVP
28	paop_rc	Num	8		mmHg PAOP
29	renal	Num	8		Renal therapy or renal failure this day?
30	renalc	Char	3	$3.	Renal therapy or renal failure this day?
31	edenptrc	Num	8		Is subject enrolled in EDEN or Co-Enrolled?
32	edenptrcc	Char	31	$31.	Is subject enrolled in EDEN or Co-Enrolled?
33	propinfrate	Num	8		Propofol Infusion Rate
34	vaso12priorx	Char	64	$64.	Patient received vasopressors in the 12 hours prior to random check time? (Not Done)
35	map60x	Char	64	$64.	Did MAP fall below 60 mmHg in the 12 hours prior to random check time? (Not Done)
36	maintflux	Char	64	$64.	IV maintenance fluids running in the 4 hours prior to random check time? (Not Done)

Num	Variable	Type	Len	Format	Label
37	lasix4x	Char	64	$64.	Lasix given in the in the 4 hours prior to random check time? (Not Done)
38	bolus12x	Char	64	$64.	Fluid bolus given in the 12 hours prior to random check time? (Not Done)
39	avuop4x	Char	64	$64.	Average UOP in the in the 4 hours prior to random check time? (Not Done)
40	propinfratex	Char	64	$64.	Propofol Infusion Rate (Not Done)

Data Set Name: spec_coll.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	cytocolldt0	Num	8	BEST12.	Day 0 Cytokine and coagulation parameters sample collected (Plasma) Date (Day)
16	cytofrozdt0	Num	8	BEST12.	Day 0 Cytokine and coagulation parameters sample frozen (Plasma) Date (Day)
17	cytoprocdt0	Num	8	BEST12.	Day 0 Cytokine and coagulation parameters sample processing initiated (Plasma) Date (Day)
18	urinecolldt0	Num	8	BEST12.	Day 0 Urine sample Collected Date? (Day)
19	urinefrozdt0	Num	8	BEST12.	Day 0 Urine sample Frozen Date? (Day)
20	unrineprocdt0	Num	8	BEST12.	Day 0 Urine sample Processing Initiated Date? (Day)
21	cyto0	Num	8		Day 0 Cytokine and coagulation parameters sample collected (Plasma)?
22	cyto0c	Char	11	$11.	Day 0 Cytokine and coagulation parameters sample collected (Plasma)?
23	cytoreas0	Char	255	$255.	Day 0 Cytokine not collected: Reason
24	fattyacid0	Num	8		Day 0 Plasma fatty acids sample collected (Plasma)?
25	fattyacid0c	Char	26	$26.	Day 0 Plasma fatty acids sample collected (Plasma)?
26	fattyacidreas0	Char	255	$255.	Day 0 Plasma fatty acids not collected: Reason
27	epi0	Num	8		Day 0 Plasma epinephrine level sample collected (Plasma)?
28	epi0c	Char	20	$20.	Day 0 Plasma epinephrine level sample collected (Plasma)?
29	epireas0	Char	255	$255.	Day 0 Plasma epinephrine not collected: Reason
30	urine0	Num	8		Day 0 Urine sample collected?
31	urine0c	Char	11	$11.	Day 0 Urine sample collected?
32	urinereas0	Char	255	$255.	Day 0 Urine not collected: Reason
33	bloodcolldt0	Num	8	BEST12.	Day 0 Whole blood sample collected (Genetics) Date (Day)

Num	Variable	Type	Len	Format	Label
34	bloodfrozendt0	Num	8	BEST12.	Day 0 Whole blood sample collected (Genetics) frozen Date (Day)
35	blood0	Num	8		Day 0 Whole blood sample collected (Genetics)?
36	blood0c	Char	20	$20.	Day 0 Whole blood sample collected (Genetics)?
37	bloodreas0	Char	255	$255.	Day 0 Whole blood sample not collected: Reason
38	colldt1	Num	8	BEST12.	Date Day 1 Specimens Collected (Day)
39	alb1	Num	8		Day 1 Plasma Albuterol level sample collected (Plasma)?
40	alb1c	Char	20	$20.	Day 1 Plasma Albuterol level sample collected (Plasma)?
41	albreas1	Char	255	$255.	Day 1 Plasma Albuterol level sample not collected: Reason
42	epi1	Num	8		Day 1 Plasma epinephrine level sample collected (Plasma)?
43	epi1c	Char	20	$20.	Day 1 Plasma epinephrine level sample collected (Plasma)?
44	epireas1	Char	255	$255.	Day 1 Plasma epinephrine level sample not collected: Reason
45	cytocolldt3	Num	8	BEST12.	Day 3 Cytokine and coagulation parameters sample collected (Plasma) Date (Day)
46	cytofrozdt3	Num	8	BEST12.	Day 3 Cytokine and coagulation parameters sample frozen (Plasma) Date (Day)
47	cytoprocdt3	Num	8	BEST12.	Day 3 Cytokine and coagulation parameters sample processing initiated (Plasma) Date (Day)
48	cyto3	Num	8		Day 3 Cytokine and coagulation parameters sample collected (Plasma)?
49	cyto3c	Char	20	$20.	Day 3 Cytokine and coagulation parameters sample collected (Plasma)?
50	cytoreas3n	Char	255	$255.	Day 3 Cytokine not collected: Reason
51	fattyacid3	Num	8		Day 3 Plasma fatty acids sample collected (Plasma)?
52	fattyacid3c	Char	26	$26.	Day 3 Plasma fatty acids sample collected (Plasma)?
53	fattyaciddt3	Num	8	BEST12.	Day 3 Plasma fatty acids: Date (Day)
54	fattyacidreas3	Char	255	$255.	Day 3 Plasma fatty acids not collected: Reason
55	unrinecolldt3	Num	8	BEST12.	Day 3 Urine sample Collected Date (Day)
56	urinefrozdt3	Num	8	BEST12.	Day 3 Urine sample Frozen Date? (Day)
57	urineprocdt3	Num	8	BEST12.	Day 3 Urine sample Processing Initiated Date (Day)
58	urine3	Num	8		Day 3 Urine sample collected?
59	urine3c	Char	20	$20.	Day 3 Urine sample collected?
60	urinereas3	Char	255	$255.	Day 3 Urine sample not collected: Reason
61	cytocolldt6	Num	8	BEST12.	Day 6 Cytokine and coagulation parameters sample collected (Plasma) Date (Day)
62	cytofrozdt6	Num	8	BEST12.	Day 6 Cytokine and coagulation parameters sample frozen (Plasma) Date (Day)
63	cytoprocdt6	Num	8	BEST12.	Day 6 Cytokine and coagulation parameters sample processing initiated (Plasma) Date (Day)
64	cyto6	Num	8		Day 6 Cytokine and coagulation parameters sample collected (Plasma)?
65	cyto6c	Char	20	$20.	Day 6 Cytokine and coagulation parameters sample collected (Plasma)?

Num	Variable	Type	Len	Format	Label
66	cytoreas6	Char	255	$255.	Day 6 Cytokine not collected: Reason
67	fattyacid6	Num	8		Day 6 Plasma fatty acids sample collected (Plasma)?
68	fattyacid6c	Char	26	$26.	Day 6 Plasma fatty acids sample collected (Plasma)?
69	fattyaciddt6	Num	8	BEST12.	Day 6 Plasma fatty acids: Date (Day)
70	fattyacidreas6	Char	255	$255.	Day 6 Plasma fatty acids not collected: Reason
71	urinecolldt6	Num	8	BEST12.	Day 6 Urine sample Collected Date (Day)
72	urinefrozdt6	Num	8	BEST12.	Day 6 Urine sample Frozen Date (Day)
73	urineprocdt6	Num	8	BEST12.	Day 6 Urine sample Processing Initiated Date (Day)
74	urine6	Num	8		Day 6 Urine sample collected?
75	urine6c	Char	20	$20.	Day 6 Urine sample collected?
76	urinereas6	Char	255	$255.	Day 6 Urine sample not collected: Reason
77	cytocolldt12	Num	8	BEST12.	Day 12 Cytokine and coagulation parameters sample collected (Plasma) Date (Day)
78	cytoprocdt12	Num	8	BEST12.	Day 12 Cytokine and coagulation parameters sample processing initiated (Plasma) Date (Day)
79	cytofrozdt12	Num	8	BEST12.	Day 12 Cytokine and coagulation parameters sample frozen (Plasma) Date (Day)
80	cyto12	Num	8		Day 12 Cytokine and coagulation parameters sample collected (Plasma)?
81	cyto12c	Char	20	$20.	Day 12 Cytokine and coagulation parameters sample collected (Plasma)?
82	cytoreas12	Char	255	$255.	Day 12 Cytokine not collected: Reason
83	fattyacid12	Num	8		Day 12 Plasma fatty acids sample collected (Plasma)?
84	fattyacid12c	Char	26	$26.	Day 12 Plasma fatty acids sample collected (Plasma)?
85	fattyaciddt12	Num	8	BEST12.	Day 12 Plasma fatty acids: Date (Day)
86	fattyacidreas12	Char	255	$255.	Day 12 Plasma fatty acids not collected: Reason
87	peakdt6	Num	8	BEST12.	DT_SPEC_COLL_DAY6_PEAK_COL_1 (Day)
88	peaktm6	Num	8	TIME5.	DT_SPEC_COLL_DAY6_PEAK_COL_1 (Time)
89	ptshipdt6	Num	8	BEST12.	Day 6 P&T samples shipped to Assay Lab Date (Day)
90	troughdt6	Num	8	BEST12.	DT_SPEC_COLL_DAY6_TROUGH_C_1 (Day)
91	troughtm6	Num	8	TIME5.	DT_SPEC_COLL_DAY6_TROUGH_C_1 (Time)
92	bloodstor0	Num	8		Day 0 Storage Temperature at -70 C or lower (+/- 10 degrees)?
93	bloodstor0c	Char	11	$11.	Day 0 Storage Temperature at -70 C or lower (+/- 10 degrees)?
94	bloodstorreas0	Char	255	$255.	Day 0 Storage Temperature at -70 C or lower : no reason
95	bloodtube0	Num	8		Day 0 Tube Type:
96	bloodtube0c	Char	13	$13.	Day 0 Tube Type:
97	bloodtubeoth0	Char	255	$255.	Day 0 Tube Type Other:
98	peakcollreas6	Char	255	$255.	Day 6 Peak level not collected reason?
99	ptship6	Num	8		Day 6 P&T samples shipped to Assay Lab?
100	ptship6c	Char	18	$18.	Day 6 P&T samples shipped to Assay Lab?

Num	Variable	Type	Len	Format	Label
101	ptshipreas6	Char	255	$255.	Day 6 P&T samples not shipped to Assay Lab Reason?
102	colldt0x	Char	64	$64.	Day 0 Date (Not Done)
103	cyto0x	Char	64	$64.	Day 0 Cytokine and coagulation parameters sample collected (Plasma) (Not Done)?
104	fattyacid0x	Char	64	$64.	Day 0 Plasma fatty acids sample collected (Plasma)? (Not Done)
105	urine0x	Char	64	$64.	Day 0 Urine sample collected? (Not Done)
106	blood0x	Char	64	$64.	Day 0 Whole blood sample collected (Genetics)? (Not Done)
107	cytocoll0x	Char	64	$64.	Day 0 Cytokine and coagulation parameters sample collected (Plasma) (Not Done)
108	urinecoll0x	Char	64	$64.	Day 0 Urine sample Collected (Not Done)
109	ND_SPEC_COLL_DAY0_BLOOD	Char	64	$64.	ND_SPEC_COLL_DAY0_BLOOD
110	cyto3x	Char	64	$64.	Day 3 Cytokine and coagulation parameters sample processing initiated (Plasma) (Not Done)
111	urine3x	Char	64	$64.	Day 3 Urine sample collected? (Not Done)
112	cyto6x	Char	64	$64.	Day 6 Cytokine and coagulation parameters sample collected (Plasma) (Not Done)
113	urine6x	Char	64	$64.	Day 6 Urine sample Collected (Not Done)
114	cyto12x	Char	64	$64.	Day 12 Cytokine and coagulation parameters sample collected (Plasma) (Not Done)

Data Set Name: study.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name

Data Set Name: study_term.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	status	Num	8		Patient status (through Day 90):
16	statusc	Char	69	$69.	Patient status (through Day 90):
17	homedt	Num	8	BEST12.	Home with UAB, date: (Day)
18	deathdt	Num	8	BEST12.	Dead prior to home with UAB, date: (Day)
19	othstatdt	Num	8	BEST12.	Other, date of last known patient status: (Day)
20	altapt	Num	8		ALTA patient?
21	altaptc	Char	12	$12.	ALTA patient?
22	altawdraw	Num	8		Was this patient permanently withdrawn from ALTA (through Day 28)?
23	altawdrawc	Char	13	$13.	Was this patient permanently withdrawn from ALTA (through Day 28)?
24	altawdrawdt	Num	8	BEST12.	Patient withdrawn from ALTA: Date (Day)
25	altawdrawreas	Char	255	$255.	Patient withdrawn from ALTA: Reason
26	eopt	Num	8		EDEN/Omega Patient?
27	eoptc	Char	18	$18.	EDEN/Omega Patient?
28	eowdraw	Num	8		Was this patient permanently withdrawn from EDEN/Omega (through Day 28)?
29	eowdrawc	Char	13	$13.	Was this patient permanently withdrawn from EDEN/Omega (through Day 28)?
30	eowdrawdt	Num	8	BEST12.	Patient withdrawn from EDEN/Omega: Date (Day)
31	eowdrawreas	Char	255	$255.	Patient withdrawn from EDEN/Omega: Reason
32	eoenroll	Num	8		If the patient was enrolled in EDEN/OMEGA study or Co-Enrolled
33	eoenrollc	Char	25	$25.	If the patient was enrolled in EDEN/OMEGA study or Co-Enrolled
34	eofullcal	Num	8		Did patient reach full-calorie enteral feeding rate?
35	eofullcalc	Char	51	$51.	Did patient reach full-calorie enteral feeding rate?
36	eofullcaldt	Num	8	BEST12.	Patient reach full-calorie enteral feeding rate: Date (Day)

Num	Variable	Type	Len	Format	Label
37	eofullcaltm	Num	8	TIME5.	Patient reach full-calorie enteral feeding rate: Date (Time)
38	hospdc	Num	8		Was patient discharged alive from study hospital (through Day 90)?
39	hospdcc	Char	10	$10.	Was patient discharged alive from study hospital (through Day 90)?
40	hospdcdt	Num	8	BEST12.	If yes, give date: (Day)
41	sbtcrit	Num	8		Did patient meet criteria for spontaneous breathing trial (SBT) before day 29?
42	sbtcritc	Char	10	$10.	Did patient meet criteria for spontaneous breathing trial (SBT) before day 29?
43	sbtcritdt	Num	8	BEST12.	If yes, enter date FIRST met criteria (Day)
44	sbttol	Num	8		Did patient tolerate SBT?
45	sbttolc	Char	10	$10.	Did patient tolerate SBT?
46	sbttoldt	Num	8	BEST12.	Patient tolerated SBT, date & time (Day)
47	uab	Num	8		Did patient reach 48 hour UAB before day 29?
48	uabc	Char	10	$10.	Did patient reach 48 hour UAB before day 29?
49	uabdt	Num	8	BEST12.	Patient reached 48 hour UAB before day 29: Date (Day)
50	extub	Num	8		Was patient extubated before day 29?
51	extubc	Char	10	$10.	Was patient extubated before day 29?
52	extubdt	Num	8	BEST12.	Patient extubated before day 29: Date (Day)
53	trach	Num	8		Did Subject undergo tracheostomy prior to day 29?
54	trachc	Char	10	$10.	Did Subject undergo tracheostomy prior to day 29?
55	trachdt	Num	8	BEST12.	Subject underwent tracheostomy prior to day 29: Date (Day)
56	discharge1	Num	8		Discharged from ICU?
57	discharge1c	Char	20	$20.	Discharged from ICU?
58	dischargedt1	Num	8	BEST12.	If yes, date of ICU DC: (Day)
59	readmit1	Num	8		Readmitted to ICU?
60	readmit1c	Char	29	$29.	Readmitted to ICU?
61	readmitdt1	Num	8	BEST12.	If yes, date of ICU readmission: (Day)
62	discharge2	Num	8		Discharged from ICU?
63	discharge2c	Char	20	$20.	Discharged from ICU?
64	dischargedt2	Num	8	BEST12.	If yes, date of ICU DC: (Day)
65	readmit2	Num	8		Readmitted to ICU?
66	readmit2c	Char	29	$29.	Readmitted to ICU?
67	readmitdt2	Num	8	BEST12.	If yes, date of ICU readmission: (Day)
68	discharge3	Num	8		Discharged from ICU?
69	discharge3c	Char	20	$20.	Discharged from ICU?
70	dischargedt3	Num	8	BEST12.	If yes, date of ICU DC: (Day)
71	readmit3	Num	8		Readmitted to ICU?
72	readmit3c	Char	29	$29.	Readmitted to ICU?
73	readmitdt3	Num	8	BEST12.	If yes, date of ICU readmission: (Day)
74	discharge4	Num	8		Discharged from ICU?
75	discharge4c	Char	20	$20.	Discharged from ICU?

Num	Variable	Type	Len	Format	Label
76	dischargedt4	Num	8	BEST12.	If yes, date of ICU DC: (Day)
77	readmit4	Num	8		Readmitted to ICU?
78	readmit4c	Char	29	$29.	Readmitted to ICU?
79	readmitdt4	Num	8	BEST12.	If yes, date of ICU readmission: (Day)
80	discharge5	Num	8		Discharged from ICU?
81	discharge5c	Char	20	$20.	Discharged from ICU?
82	dischargedt5	Num	8	BEST12.	If yes, date of ICU DC: (Day)
83	uab1	Num	8		Patient achieved unassisted breathing:
84	uab1c	Char	69	$69.	Patient achieved unassisted breathing:
85	uabdt1	Num	8	BEST12.	If yes, date of UAB (first date with no AB): (Day)
86	retab1	Num	8		Patient returned to assisted breathing?
87	retab1c	Char	26	$26.	Patient returned to assisted breathing?
88	retabdt1	Num	8	BEST12.	If yes, date of return to AB: (Day)
89	uab2	Num	8		Patient achieved unassisted breathing again:
90	uab2c	Char	61	$61.	Patient achieved unassisted breathing again:
91	uabdt2	Num	8	BEST12.	If yes, date of UAB (2nd date with no AB): (Day)
92	retab2	Num	8		Patient returned to assisted breathing?
93	retab2c	Char	26	$26.	Patient returned to assisted breathing?
94	retabdt2	Num	8	BEST12.	If yes, date of return to AB: (Day)
95	uab3	Num	8		Patient achieved unassisted breathing again:
96	uab3c	Char	61	$61.	Patient achieved unassisted breathing again:
97	uabdt3	Num	8	BEST12.	If yes, date of UAB (3rd date with no AB): (Day)
98	retab3	Num	8		Patient returned to assisted breathing?
99	retab3c	Char	26	$26.	Patient returned to assisted breathing?
100	retabdt3	Num	8	BEST12.	If yes, date of return to AB: (Day)
101	uab4	Num	8		Patient achieved unassisted breathing again:
102	uab4c	Char	61	$61.	Patient achieved unassisted breathing again:
103	uabdt4	Num	8	BEST12.	If yes, date of UAB (4th date with no AB): (Day)
104	dnr	Num	8		End of Life Decision-making (for all patients, alive or dead)
105	dnrc	Char	59	$59.	End of Life Decision-making (for all patients, alive or dead)
106	wconsent	Num	8		Was written consent obtained from subject during study hospitalization?
107	wconsentc	Char	11	$11.	Was written consent obtained from subject during study hospitalization?
108	wconsentreas	Num	8		Written consent not obtained: Reason
109	wconsentreasc	Char	47	$47.	Written consent not obtained: Reason
110	wconsentreasoth	Char	255	$255.	Written consent not obtained: Reason = Other
111	dialysis	Num	8		Did patient require dialysis during study hospitalization?
112	dialysisc	Char	3	$3.	Did patient require dialysis during study hospitalization?
113	dialfirstdt	Num	8	BEST12.	Date of first dialysis: (Day)
114	diallastdt	Num	8	BEST12.	Date of last dialysis during study hospitalization (Day)

Num	Variable	Type	Len	Format	Label
115	tpn	Num	8		Did the subject receive TPN during the EDEN Omega Study?
116	tpnc	Char	3	$3.	Did the subject receive TPN during the EDEN Omega Study?
117	statusx	Char	64	$64.	Patient Status (Not done)
118	withdrawnX	Char	64	$64.	Patient Withdrawn (Not done)
119	eoenrollX	Char	64	$64.	Did patient reach full-calorie enteral feeding rate? (Not Done)
120	sbtcritx	Char	64	$64.	Did patient meet criteria for spontaneous breathing trial? (Not Done)
121	sbttolx	Char	64	$64.	Patient tolerated SBT (Not Done)
122	uabx	Char	64	$64.	Did patient reach 48 hour UAB before day 29? (Not Done)
123	extubX	Char	64	$64.	Patient extubated before day 29 (Not Done)
124	trachX	Char	64	$64.	Was patient extubated before day 29? (Not Done)

Data Set Name: vap.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	visit	Num	8		
14	visitname	Char	1024	$1024.	Visit Name
15	vapdt	Num	8	BEST12.	VAP Date (Day)
16	infiltrate	Num	8		Chest radiograph shows new infiltrate that persisted for 48 hours?
17	infiltratec	Char	3	$3.	Chest radiograph shows new infiltrate that persisted for 48 hours?
18	feverleuk	Num	8		New fever or hypothermia or leukocytosis or leukopenia?
19	feverleukc	Char	3	$3.	New fever or hypothermia or leukocytosis or leukopenia?
20	pulminf	Num	8		Bacteriological confirmation of pulmonary infection?
21	pulminfc	Char	3	$3.	Bacteriological confirmation of pulmonary infection?

Data Set Name: vent_bypt.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	simv_0	Num	8		SIMV
14	simvc_0	Char	4	$4.	SIMV
15	prvc_0	Num	8		PRVC (pressure regulated volume control) or equivalent
16	prvc2_0	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
17	pressup_0	Num	8		Pressure Support (y/n)
18	pressupc_0	Char	16	$16.	Pressure Support (y/n)
19	pressupcmH2O	Num	8		Pressure Support cmH2O
20	volassist_0	Num	8		Volume Assist/Control
21	volassistc_0	Char	21	$21.	Volume Assist/Control
22	presassist_0	Num	8		Pressure Assist (y/n)
23	presassistc_0	Char	15	$15.	Pressure Assist (y/n)
24	presascmH2O	Num	8		Pressure Assist cmH2O
25	pcirv_0	Num	8		PC IRV
26	pcirvc_0	Char	6	$6.	PC IRV
27	aprv_0	Num	8		Airway Pressure Release Ventilation (APRV)
28	aprvc_0	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
29	ventoth_0	Num	8		Other vent mode
30	ventothc_0	Char	5	$5.	Other vent mode
31	hfov_0	Num	8		HFOV
32	hfovc_0	Char	4	$4.	HFOV
33	othvent_0	Char	255	$255.	Enter other vent mode:
34	tidal_0	Num	8		Calculated Delivered Tidal Volume
35	setrate_0	Num	8		Set Rate
36	resp_0	Num	8		Total Respiratory Rate

Num	Variable	Type	Len	Format	Label
37	minvent_0	Num	8		Total Minute Ventilation (L/min)
38	peep_0	Num	8		PEEP (cm H2O):
39	fio2_0	Num	8		FiO2 prior to randomization
40	SpO2_0	Num	8		SpO2 prior to randomization
41	pplat_0	Num	8		Plateau Pressure (cm H2O):
42	pip_0	Num	8		Peak Inspiratory Pressure
43	meanair_0	Num	8		Mean airway pressure
44	tidalpost	Num	8		Calculated delivered tidal volume after vent change
45	pplatpost	Num	8		Plateau Pressure after vent change
46	peeppost	Num	8		PEEP after vent change
47	fio2abg_0	Num	8		FiO2 at time of ABG:
48	pao2abg_0	Num	8		PaO2 (cm H20):
49	paco2abg_0	Num	8		PaCO2 (cm H20):
50	phabg_0	Num	8		Arterial pH:
51	spo2abg_0	Num	8		SpO2 at time of ABG
52	ventX	Char	64	$64.	Vent Mode (Not Done)
53	tidalx_0	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
54	respX	Char	64	$64.	Total Respiratory Rate (Not Done)
55	minventX	Char	64	$64.	Total Minute Ventilation (L/min) (Not Done)
56	peepx_0	Char	64	$64.	PEEP (cm H2O): (Not Done)
57	fio2x_0	Char	64	$64.	FiO2 prior to randomization (Not Done)
58	SpO2x_0	Char	64	$64.	SpO2 prior to randomization (Not Done)
59	meanairX	Char	64	$64.	Mean airway pressure (Not Done)
60	pressupcmh2o_1	Num	8		Pressure Support cmH2O
61	presascmh2o_1	Num	8		Pressure Assist cmH2O
62	ventmodex_1	Char	64	$64.	Vent mode: (Not Done)
63	respx_1	Char	64	$64.	Total Respiratory Rate (Not Done)
64	minventx_1	Char	64	$64.	Total Minute Ventilation (Not Done)
65	meanairx_1	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
66	simv_1	Num	8		SIMV
67	simvc_1	Char	4	$4.	SIMV
68	prvc_1	Num	8		PRVC (pressure regulated volume control) or equivalent
69	prvc2_1	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
70	pressup_1	Num	8		Pressure Support (y/n)
71	pressupc_1	Char	16	$16.	Pressure Support (y/n)
72	volassist_1	Num	8		Volume Assist/Control
73	volassistc_1	Char	21	$21.	Volume Assist/Control
74	presassist_1	Num	8		Pressure Assist (y/n)
75	presassistc_1	Char	15	$15.	Pressure Assist (y/n)

Num	Variable	Type	Len	Format	Label
76	pcirv_1	Num	8		PC IRV
77	pcirvc_1	Char	6	$6.	PC IRV
78	aprv_1	Num	8		Airway Pressure Release Ventilation (APRV)
79	aprvc_1	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
80	ventoth_1	Num	8		Other vent mode
81	ventothc_1	Char	5	$5.	Other vent mode
82	hfov_1	Num	8		HFOV
83	hfovc_1	Char	4	$4.	HFOV
84	othvent_1	Char	255	$255.	Enter other vent mode:
85	tidal_1	Num	8		Calculated Delivered Tidal Volume
86	setrate_1	Num	8		Set Rate
87	resp_1	Num	8		Total Respiratory Rate
88	minvent_1	Num	8		Total Minute Ventilation
89	peep_1	Num	8		PEEP (cm H2O):
90	fio2_1	Num	8		FiO2 at 0800
91	SpO2_1	Num	8		SpO2 at 0800
92	pplat_1	Num	8		Plateau Pressure (cm H2O):
93	pip_1	Num	8		Peak Inspiratory Pressure
94	meanair_1	Num	8		Mean airway pressure (cm H2O)
95	fio2abg_1	Num	8		FiO2 at time of ABG:
96	pao2abg_1	Num	8		PaO2 (cm H20):
97	paco2abg_1	Num	8		PaCO2 (cm H20):
98	phabg_1	Num	8		Arterial pH:
99	spo2abg_1	Num	8		SpO2 at time of ABG
100	tidalx_1	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
101	peepx_1	Char	64	$64.	PEEP (cm H2O): (Not Done)
102	fio2x_1	Char	64	$64.	FiO2 at 0800 (Not Done)
103	SpO2x_1	Char	64	$64.	SpO2 at 0800 (Not Done)
104	pressupcmh2o_2	Num	8		Pressure Support cmH2O
105	presascmh2o_2	Num	8		Pressure Assist cmH2O
106	ventmodex_2	Char	64	$64.	Vent mode: (Not Done)
107	respx_2	Char	64	$64.	Total Respiratory Rate (Not Done)
108	minventx_2	Char	64	$64.	Total Minute Ventilation (Not Done)
109	meanairx_2	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
110	simv_2	Num	8		SIMV
111	simvc_2	Char	4	$4.	SIMV
112	prvc_2	Num	8		PRVC (pressure regulated volume control) or equivalent
113	prvc2_2	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
114	pressup_2	Num	8		Pressure Support (y/n)

Num	Variable	Type	Len	Format	Label
115	pressupc_2	Char	16	$16.	Pressure Support (y/n)
116	volassist_2	Num	8		Volume Assist/Control
117	volassistc_2	Char	21	$21.	Volume Assist/Control
118	presassist_2	Num	8		Pressure Assist (y/n)
119	presassistc_2	Char	15	$15.	Pressure Assist (y/n)
120	pcirv_2	Num	8		PC IRV
121	pcirvc_2	Char	6	$6.	PC IRV
122	aprv_2	Num	8		Airway Pressure Release Ventilation (APRV)
123	aprvc_2	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
124	ventoth_2	Num	8		Other vent mode
125	ventothc_2	Char	5	$5.	Other vent mode
126	hfov_2	Num	8		HFOV
127	hfovc_2	Char	4	$4.	HFOV
128	othvent_2	Char	255	$255.	Enter other vent mode:
129	tidal_2	Num	8		Calculated Delivered Tidal Volume
130	setrate_2	Num	8		Set Rate
131	resp_2	Num	8		Total Respiratory Rate
132	minvent_2	Num	8		Total Minute Ventilation
133	peep_2	Num	8		PEEP (cm H2O):
134	fio2_2	Num	8		FiO2 at 0800
135	SpO2_2	Num	8		SpO2 at 0800
136	pplat_2	Num	8		Plateau Pressure (cm H2O):
137	pip_2	Num	8		Peak Inspiratory Pressure
138	meanair_2	Num	8		Mean airway pressure (cm H2O)
139	fio2abg_2	Num	8		FiO2 at time of ABG:
140	pao2abg_2	Num	8		PaO2 (cm H20):
141	paco2abg_2	Num	8		PaCO2 (cm H20):
142	phabg_2	Num	8		Arterial pH:
143	spo2abg_2	Num	8		SpO2 at time of ABG
144	tidalx_2	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
145	peepx_2	Char	64	$64.	PEEP (cm H2O): (Not Done)
146	fio2x_2	Char	64	$64.	FiO2 at 0800 (Not Done)
147	SpO2x_2	Char	64	$64.	SpO2 at 0800 (Not Done)
148	pressupcmh2o_3	Num	8		Pressure Support cmH2O
149	presascmh2o_3	Num	8		Pressure Assist cmH2O
150	ventmodex_3	Char	64	$64.	Vent mode: (Not Done)
151	respx_3	Char	64	$64.	Total Respiratory Rate (Not Done)
152	minventx_3	Char	64	$64.	Total Minute Ventilation (Not Done)
153	meanairx_3	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)

Num	Variable	Type	Len	Format	Label
154	simv_3	Num	8		SIMV
155	simvc_3	Char	4	$4.	SIMV
156	prvc_3	Num	8		PRVC (pressure regulated volume control) or equivalent
157	prvc2_3	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
158	pressup_3	Num	8		Pressure Support (y/n)
159	pressupc_3	Char	16	$16.	Pressure Support (y/n)
160	volassist_3	Num	8		Volume Assist/Control
161	volassistc_3	Char	21	$21.	Volume Assist/Control
162	presassist_3	Num	8		Pressure Assist (y/n)
163	presassistc_3	Char	15	$15.	Pressure Assist (y/n)
164	pcirv_3	Num	8		PC IRV
165	pcirvc_3	Char	6	$6.	PC IRV
166	aprv_3	Num	8		Airway Pressure Release Ventilation (APRV)
167	aprvc_3	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
168	ventoth_3	Num	8		Other vent mode
169	ventothc_3	Char	5	$5.	Other vent mode
170	hfov_3	Num	8		HFOV
171	hfovc_3	Char	4	$4.	HFOV
172	othvent_3	Char	255	$255.	Enter other vent mode:
173	tidal_3	Num	8		Calculated Delivered Tidal Volume
174	setrate_3	Num	8		Set Rate
175	resp_3	Num	8		Total Respiratory Rate
176	minvent_3	Num	8		Total Minute Ventilation
177	peep_3	Num	8		PEEP (cm H2O):
178	fio2_3	Num	8		FiO2 at 0800
179	SpO2_3	Num	8		SpO2 at 0800
180	pplat_3	Num	8		Plateau Pressure (cm H2O):
181	pip_3	Num	8		Peak Inspiratory Pressure
182	meanair_3	Num	8		Mean airway pressure (cm H2O)
183	fio2abg_3	Num	8		FiO2 at time of ABG:
184	pao2abg_3	Num	8		PaO2 (cm H20):
185	paco2abg_3	Num	8		PaCO2 (cm H20):
186	phabg_3	Num	8		Arterial pH:
187	spo2abg_3	Num	8		SpO2 at time of ABG
188	tidalx_3	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
189	peepx_3	Char	64	$64.	PEEP (cm H2O): (Not Done)
190	fio2x_3	Char	64	$64.	FiO2 at 0800 (Not Done)
191	SpO2x_3	Char	64	$64.	SpO2 at 0800 (Not Done)
192	pressupcmh2o_4	Num	8		Pressure Support cmH2O

Num	Variable	Type	Len	Format	Label
193	presascmh2o_4	Num	8		Pressure Assist cmH2O
194	ventmodex_4	Char	64	$64.	Vent mode: (Not Done)
195	respx_4	Char	64	$64.	Total Respiratory Rate (Not Done)
196	minventx_4	Char	64	$64.	Total Minute Ventilation (Not Done)
197	meanairx_4	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
198	simv_4	Num	8		SIMV
199	simvc_4	Char	4	$4.	SIMV
200	prvc_4	Num	8		PRVC (pressure regulated volume control) or equivalent
201	prvc2_4	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
202	pressup_4	Num	8		Pressure Support (y/n)
203	pressupc_4	Char	16	$16.	Pressure Support (y/n)
204	volassist_4	Num	8		Volume Assist/Control
205	volassistc_4	Char	21	$21.	Volume Assist/Control
206	presassist_4	Num	8		Pressure Assist (y/n)
207	presassistc_4	Char	15	$15.	Pressure Assist (y/n)
208	pcirv_4	Num	8		PC IRV
209	pcirvc_4	Char	6	$6.	PC IRV
210	aprv_4	Num	8		Airway Pressure Release Ventilation (APRV)
211	aprvc_4	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
212	ventoth_4	Num	8		Other vent mode
213	ventothc_4	Char	5	$5.	Other vent mode
214	hfov_4	Num	8		HFOV
215	hfovc_4	Char	4	$4.	HFOV
216	othvent_4	Char	255	$255.	Enter other vent mode:
217	tidal_4	Num	8		Calculated Delivered Tidal Volume
218	setrate_4	Num	8		Set Rate
219	resp_4	Num	8		Total Respiratory Rate
220	minvent_4	Num	8		Total Minute Ventilation
221	peep_4	Num	8		PEEP (cm H2O):
222	fio2_4	Num	8		FiO2 at 0800
223	SpO2_4	Num	8		SpO2 at 0800
224	pplat_4	Num	8		Plateau Pressure (cm H2O):
225	pip_4	Num	8		Peak Inspiratory Pressure
226	meanair_4	Num	8		Mean airway pressure (cm H2O)
227	fio2abg_4	Num	8		FiO2 at time of ABG:
228	pao2abg_4	Num	8		PaO2 (cm H20):
229	paco2abg_4	Num	8		PaCO2 (cm H20):
230	phabg_4	Num	8		Arterial pH:
231	spo2abg_4	Num	8		SpO2 at time of ABG

Num	Variable	Type	Len	Format	Label
232	tidalx_4	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
233	peepx_4	Char	64	$64.	PEEP (cm H2O): (Not Done)
234	fio2x_4	Char	64	$64.	FiO2 at 0800 (Not Done)
235	SpO2x_4	Char	64	$64.	SpO2 at 0800 (Not Done)
236	pressupcmh2o_7	Num	8		Pressure Support cmH2O
237	presascmh2o_7	Num	8		Pressure Assist cmH2O
238	ventmodex_7	Char	64	$64.	Vent mode: (Not Done)
239	respx_7	Char	64	$64.	Total Respiratory Rate (Not Done)
240	minventx_7	Char	64	$64.	Total Minute Ventilation (Not Done)
241	meanairx_7	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
242	simv_7	Num	8		SIMV
243	simvc_7	Char	4	$4.	SIMV
244	prvc_7	Num	8		PRVC (pressure regulated volume control) or equivalent
245	prvc2_7	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
246	pressup_7	Num	8		Pressure Support (y/n)
247	pressupc_7	Char	16	$16.	Pressure Support (y/n)
248	volassist_7	Num	8		Volume Assist/Control
249	volassistc_7	Char	21	$21.	Volume Assist/Control
250	presassist_7	Num	8		Pressure Assist (y/n)
251	presassistc_7	Char	15	$15.	Pressure Assist (y/n)
252	pcirv_7	Num	8		PC IRV
253	pcirvc_7	Char	6	$6.	PC IRV
254	aprv_7	Num	8		Airway Pressure Release Ventilation (APRV)
255	aprvc_7	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
256	ventoth_7	Num	8		Other vent mode
257	ventothc_7	Char	5	$5.	Other vent mode
258	hfov_7	Num	8		HFOV
259	hfovc_7	Char	4	$4.	HFOV
260	othvent_7	Char	255	$255.	Enter other vent mode:
261	tidal_7	Num	8		Calculated Delivered Tidal Volume
262	setrate_7	Num	8		Set Rate
263	resp_7	Num	8		Total Respiratory Rate
264	minvent_7	Num	8		Total Minute Ventilation
265	peep_7	Num	8		PEEP (cm H2O):
266	fio2_7	Num	8		FiO2 at 0800
267	SpO2_7	Num	8		SpO2 at 0800
268	pplat_7	Num	8		Plateau Pressure (cm H2O):
269	pip_7	Num	8		Peak Inspiratory Pressure
270	meanair_7	Num	8		Mean airway pressure (cm H2O)

Num	Variable	Type	Len	Format	Label
271	fio2abg_7	Num	8		FiO2 at time of ABG:
272	pao2abg_7	Num	8		PaO2 (cm H20):
273	paco2abg_7	Num	8		PaCO2 (cm H20):
274	phabg_7	Num	8		Arterial pH:
275	spo2abg_7	Num	8		SpO2 at time of ABG
276	tidalx_7	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
277	peepx_7	Char	64	$64.	PEEP (cm H2O): (Not Done)
278	fio2x_7	Char	64	$64.	FiO2 at 0800 (Not Done)
279	SpO2x_7	Char	64	$64.	SpO2 at 0800 (Not Done)
280	pressupcmh2o_12	Num	8		Pressure Support cmH2O
281	presascmh2o_12	Num	8		Pressure Assist cmH2O
282	ventmodex_12	Char	64	$64.	Vent mode: (Not Done)
283	respx_12	Char	64	$64.	Total Respiratory Rate (Not Done)
284	minventx_12	Char	64	$64.	Total Minute Ventilation (Not Done)
285	meanairx_12	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
286	simv_12	Num	8		SIMV
287	simvc_12	Char	4	$4.	SIMV
288	prvc_12	Num	8		PRVC (pressure regulated volume control) or equivalent
289	prvc2_12	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
290	pressup_12	Num	8		Pressure Support (y/n)
291	pressupc_12	Char	16	$16.	Pressure Support (y/n)
292	volassist_12	Num	8		Volume Assist/Control
293	volassistc_12	Char	21	$21.	Volume Assist/Control
294	presassist_12	Num	8		Pressure Assist (y/n)
295	presassistc_12	Char	15	$15.	Pressure Assist (y/n)
296	pcirv_12	Num	8		PC IRV
297	pcirvc_12	Char	6	$6.	PC IRV
298	aprv_12	Num	8		Airway Pressure Release Ventilation (APRV)
299	aprvc_12	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
300	ventoth_12	Num	8		Other vent mode
301	ventothc_12	Char	5	$5.	Other vent mode
302	hfov_12	Num	8		HFOV
303	hfovc_12	Char	4	$4.	HFOV
304	othvent_12	Char	255	$255.	Enter other vent mode:
305	tidal_12	Num	8		Calculated Delivered Tidal Volume
306	setrate_12	Num	8		Set Rate
307	resp_12	Num	8		Total Respiratory Rate
308	minvent_12	Num	8		Total Minute Ventilation
309	peep_12	Num	8		PEEP (cm H2O):

Num	Variable	Type	Len	Format	Label
310	fio2_12	Num	8		FiO2 at 0800
311	SpO2_12	Num	8		SpO2 at 0800
312	pplat_12	Num	8		Plateau Pressure (cm H2O):
313	pip_12	Num	8		Peak Inspiratory Pressure
314	meanair_12	Num	8		Mean airway pressure (cm H2O)
315	fio2abg_12	Num	8		FiO2 at time of ABG:
316	pao2abg_12	Num	8		PaO2 (cm H20):
317	paco2abg_12	Num	8		PaCO2 (cm H20):
318	phabg_12	Num	8		Arterial pH:
319	spo2abg_12	Num	8		SpO2 at time of ABG
320	tidalx_12	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
321	peepx_12	Char	64	$64.	PEEP (cm H2O): (Not Done)
322	fio2x_12	Char	64	$64.	FiO2 at 0800 (Not Done)
323	SpO2x_12	Char	64	$64.	SpO2 at 0800 (Not Done)
324	pressupcmh2o_21	Num	8		Pressure Support cmH2O
325	presascmh2o_21	Num	8		Pressure Assist cmH2O
326	ventmodex_21	Char	64	$64.	Vent mode: (Not Done)
327	respx_21	Char	64	$64.	Total Respiratory Rate (Not Done)
328	minventx_21	Char	64	$64.	Total Minute Ventilation (Not Done)
329	meanairx_21	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
330	simv_21	Num	8		SIMV
331	simvc_21	Char	4	$4.	SIMV
332	prvc_21	Num	8		PRVC (pressure regulated volume control) or equivalent
333	prvc2_21	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
334	pressup_21	Num	8		Pressure Support (y/n)
335	pressupc_21	Char	16	$16.	Pressure Support (y/n)
336	volassist_21	Num	8		Volume Assist/Control
337	volassistc_21	Char	21	$21.	Volume Assist/Control
338	presassist_21	Num	8		Pressure Assist (y/n)
339	presassistc_21	Char	15	$15.	Pressure Assist (y/n)
340	pcirv_21	Num	8		PC IRV
341	pcirvc_21	Char	6	$6.	PC IRV
342	aprv_21	Num	8		Airway Pressure Release Ventilation (APRV)
343	aprvc_21	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
344	ventoth_21	Num	8		Other vent mode
345	ventothc_21	Char	5	$5.	Other vent mode
346	hfov_21	Num	8		HFOV
347	hfovc_21	Char	4	$4.	HFOV
348	othvent_21	Char	255	$255.	Enter other vent mode:

Num	Variable	Type	Len	Format	Label
349	tidal_21	Num	8		Calculated Delivered Tidal Volume
350	setrate_21	Num	8		Set Rate
351	resp_21	Num	8		Total Respiratory Rate
352	minvent_21	Num	8		Total Minute Ventilation
353	peep_21	Num	8		PEEP (cm H2O):
354	fio2_21	Num	8		FiO2 at 0800
355	SpO2_21	Num	8		SpO2 at 0800
356	pplat_21	Num	8		Plateau Pressure (cm H2O):
357	pip_21	Num	8		Peak Inspiratory Pressure
358	meanair_21	Num	8		Mean airway pressure (cm H2O)
359	fio2abg_21	Num	8		FiO2 at time of ABG:
360	pao2abg_21	Num	8		PaO2 (cm H20):
361	paco2abg_21	Num	8		PaCO2 (cm H20):
362	phabg_21	Num	8		Arterial pH:
363	spo2abg_21	Num	8		SpO2 at time of ABG
364	tidalx_21	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
365	peepx_21	Char	64	$64.	PEEP (cm H2O): (Not Done)
366	fio2x_21	Char	64	$64.	FiO2 at 0800 (Not Done)
367	SpO2x_21	Char	64	$64.	SpO2 at 0800 (Not Done)
368	pressupcmh2o_28	Num	8		Pressure Support cmH2O
369	presascmh2o_28	Num	8		Pressure Assist cmH2O
370	ventmodex_28	Char	64	$64.	Vent mode: (Not Done)
371	respx_28	Char	64	$64.	Total Respiratory Rate (Not Done)
372	minventx_28	Char	64	$64.	Total Minute Ventilation (Not Done)
373	meanairx_28	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
374	simv_28	Num	8		SIMV
375	simvc_28	Char	4	$4.	SIMV
376	prvc_28	Num	8		PRVC (pressure regulated volume control) or equivalent
377	prvc2_28	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
378	pressup_28	Num	8		Pressure Support (y/n)
379	pressupc_28	Char	16	$16.	Pressure Support (y/n)
380	volassist_28	Num	8		Volume Assist/Control
381	volassistc_28	Char	21	$21.	Volume Assist/Control
382	presassist_28	Num	8		Pressure Assist (y/n)
383	presassistc_28	Char	15	$15.	Pressure Assist (y/n)
384	pcirv_28	Num	8		PC IRV
385	pcirvc_28	Char	6	$6.	PC IRV
386	aprv_28	Num	8		Airway Pressure Release Ventilation (APRV)
387	aprvc_28	Char	42	$42.	Airway Pressure Release Ventilation (APRV)

Num	Variable	Type	Len	Format	Label
388	ventoth_28	Num	8		Other vent mode
389	ventothc_28	Char	5	$5.	Other vent mode
390	hfov_28	Num	8		HFOV
391	hfovc_28	Char	4	$4.	HFOV
392	tidal_28	Num	8		Calculated Delivered Tidal Volume
393	setrate_28	Num	8		Set Rate
394	resp_28	Num	8		Total Respiratory Rate
395	minvent_28	Num	8		Total Minute Ventilation
396	peep_28	Num	8		PEEP (cm H2O):
397	fio2_28	Num	8		FiO2 at 0800
398	SpO2_28	Num	8		SpO2 at 0800
399	pplat_28	Num	8		Plateau Pressure (cm H2O):
400	pip_28	Num	8		Peak Inspiratory Pressure
401	meanair_28	Num	8		Mean airway pressure (cm H2O)
402	fio2abg_28	Num	8		FiO2 at time of ABG:
403	pao2abg_28	Num	8		PaO2 (cm H20):
404	paco2abg_28	Num	8		PaCO2 (cm H20):
405	phabg_28	Num	8		Arterial pH:
406	spo2abg_28	Num	8		SpO2 at time of ABG
407	tidalx_28	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
408	peepx_28	Char	64	$64.	PEEP (cm H2O): (Not Done)
409	fio2x_28	Char	64	$64.	FiO2 at 0800 (Not Done)
410	SpO2x_28	Char	64	$64.	SpO2 at 0800 (Not Done)

Data Set Name: vitals_bypt.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	ipatrox	Char	64		
14	hrate_0	Num	8		Heart Rate (beats/min):
15	sysbp_0	Num	8		Systolic BP (mmHg):
16	diabp_0	Num	8		Diastolic BP (mmHg)
17	cvp_0	Num	8		Central Venous Pressure (mmHg):
18	map	Num	8		Mean Arterial Pressure (mmHg):
19	temp_0	Num	8		Temperature (C)
20	height	Num	8		Measured Height (cm)
21	weight	Num	8		Measured Weight (Kg)
22	pbw	Char	255	$255.	Predicted Body Weight
23	vaso_0	Num	8		IV Vasopressors or inotropes in 24 hrs preceding randomization
24	vasoc_0	Char	3	$3.	IV Vasopressors or inotropes in 24 hrs preceding randomization
25	dobut_0	Num	8		Dobutamine Infusion Rate
26	dobutu_0	Char	9	$9.	Dobutamine Units
27	dopa_0	Num	8		Dopamine Infusion Rate:
28	dopau_0	Char	9	$9.	Dopamine Units
29	norepi_0	Num	8		Norepinephrine Infusion Rate
30	norepiu_0	Char	9	$9.	Norepinephrine Units
31	epi_0	Num	8		Epinephrine Infusion Rate
32	epiu_0	Char	9	$9.	Epinephrine Units
33	vasorate_0	Num	8		Vasopressin Infusion Rate
34	neosyn_0	Num	8		Neosynephrine (phenylephrine) Infusion Rate
35	neosynu_0	Char	9	$9.	Neosynephrine (phenylephrine) Units
36	vasooth_0	Char	50	$50.	Other Vasopressor

Num	Variable	Type	Len	Format	Label
37	betablock_0	Num	8		Beta blockers (IV, PO, PGT) in 24 hours preceding randomization?
38	betablockc_0	Char	3	$3.	Beta blockers (IV, PO, PGT) in 24 hours preceding randomization?
39	hratex_0	Char	64	$64.	Heart Rate (beats/min): (Not done)
40	sysbpx_0	Char	64	$64.	Systolic BP (mmHg): (Not Done)
41	diabpx_0	Char	64	$64.	Diastolic BP (mmHg) (Not Done)
42	tempx_0	Char	64	$64.	Temperature (C) (Not Done)
43	heightx	Char	64	$64.	Measured Height (cm) (Not Done)
44	vasox_0	Char	64	$64.	IV Vasopressors or inotropes in 24 hrs preceding randomization (Not Done)
45	betablockx_0	Char	64	$64.	Beta blockers (IV, PO, PGT) in 24 hours preceding randomization? (Not Done)
46	cxrquads_1	Num	8		CXR: Number of quadrants with infiltrates
47	cort20_1	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
48	cort20c_1	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
49	ipatro_1	Num	8		Aerosolized or MDI delivered ipatropium?
50	ipatroc_1	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
51	ipadose_1	Num	8		Yes: Enter total number of doses this day:
52	nsbetag_1	Num	8		Non-study beta-agonist aerosol this day?
53	nsbetagc_1	Char	85	$85.	Non-study beta-agonist aerosol this day?
54	nsbetagdose_1	Num	8		Yes: Enter total dose in mg this day
55	cort20x_1	Char	64	$64.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?(Not Done)
56	nsbetagx_1	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
57	hrate_1	Num	8		Heart Rate (beat/min):
58	sysbp_1	Num	8		Systolic BP (mmHg):
59	diabp_1	Num	8		Diastolic BP (mmHg):
60	temp_1	Num	8		Temperature (Celcius):
61	cvp_1	Num	8		CVP (mmHg):
62	vaso_1	Num	8		Vasopressors/inotropes this day?
63	vasoc_1	Char	3	$3.	Vasopressors/inotropes this day?
64	dobut_1	Num	8		IV Dobutamine Infusion Rate:
65	dobutu_1	Char	9	$9.	IV Dobutamine Infusion Rate Units
66	dopa_1	Num	8		IV Dopamine Infusion Rate:
67	dopau_1	Char	9	$9.	IV Dopamine Infusion Rate Units
68	norepi_1	Num	8		IV Norepinephrine Infusion Rate:
69	norepiu_1	Char	9	$9.	IV Norepinephrine Infusion Rate Units
70	epi_1	Num	8		IV Epinephrine Infusion Rate:
71	epiu_1	Char	9	$9.	ug/kg/min or ug/min
72	vasorate_1	Num	8		IV Vasopressin Infusion Rate (units/min):
73	neosyn_1	Num	8		IV Neosynephrine Infusion Rate:

Num	Variable	Type	Len	Format	Label
74	neosynu_1	Char	9	$9.	IV Neosynephrine Infusion Rate Units
75	vasooth_1	Char	50	$50.	If Other Please Specify:
76	betablock_1	Num	8		Beta Blockers (IV, PO, PGT) this day?
77	betablockc_1	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
78	hratex_1	Char	64	$64.	Heart Rate (beat/min): (Not Done)
79	sysbpx_1	Char	64	$64.	Systolic BP (mmHg): (Not Done)
80	diabpx_1	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
81	tempx_1	Char	64	$64.	Temperature (Celcius): (Not Done)
82	vasox_1	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
83	betablockx_1	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
84	cxrquads_2	Num	8		CXR: Number of quadrants with infiltrates
85	cort20_2	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
86	cort20c_2	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
87	ipatro_2	Num	8		Aerosolized or MDI delivered ipatropium?
88	ipatroc_2	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
89	ipadose_2	Num	8		Yes: Enter total number of doses this day:
90	nsbetag_2	Num	8		Non-study beta-agonist aerosol this day?
91	nsbetagc_2	Char	85	$85.	Non-study beta-agonist aerosol this day?
92	nsbetagdose_2	Num	8		Yes: Enter total dose in mg this day
93	cort20x_2	Char	64	$64.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?(Not Done)
94	nsbetagx_2	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
95	hrate_2	Num	8		Heart Rate (beat/min):
96	sysbp_2	Num	8		Systolic BP (mmHg):
97	diabp_2	Num	8		Diastolic BP (mmHg):
98	temp_2	Num	8		Temperature (Celcius):
99	cvp_2	Num	8		CVP (mmHg):
100	vaso_2	Num	8		Vasopressors/inotropes this day?
101	vasoc_2	Char	3	$3.	Vasopressors/inotropes this day?
102	dobut_2	Num	8		IV Dobutamine Infusion Rate:
103	dobutu_2	Char	9	$9.	IV Dobutamine Infusion Rate Units
104	dopa_2	Num	8		IV Dopamine Infusion Rate:
105	dopau_2	Char	9	$9.	IV Dopamine Infusion Rate Units
106	norepi_2	Num	8		IV Norepinephrine Infusion Rate:
107	norepiu_2	Char	9	$9.	IV Norepinephrine Infusion Rate Units
108	epi_2	Num	8		IV Epinephrine Infusion Rate:
109	epiu_2	Char	9	$9.	ug/kg/min or ug/min
110	vasorate_2	Num	8		IV Vasopressin Infusion Rate (units/min):

Num	Variable	Type	Len	Format	Label
111	neosyn_2	Num	8		IV Neosynephrine Infusion Rate:
112	neosynu_2	Char	9	$9.	IV Neosynephrine Infusion Rate Units
113	vasooth_2	Char	50	$50.	If Other Please Specify:
114	betablock_2	Num	8		Beta Blockers (IV, PO, PGT) this day?
115	betablockc_2	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
116	hratex_2	Char	64	$64.	Heart Rate (beat/min): (Not Done)
117	sysbpx_2	Char	64	$64.	Systolic BP (mmHg): (Not Done)
118	diabpx_2	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
119	tempx_2	Char	64	$64.	Temperature (Celcius): (Not Done)
120	vasox_2	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
121	betablockx_2	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
122	cxrquads_3	Num	8		CXR: Number of quadrants with infiltrates
123	cort20_3	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
124	cort20c_3	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
125	ipatro_3	Num	8		Aerosolized or MDI delivered ipatropium?
126	ipatroc_3	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
127	ipadose_3	Num	8		Yes: Enter total number of doses this day:
128	nsbetag_3	Num	8		Non-study beta-agonist aerosol this day?
129	nsbetagc_3	Char	85	$85.	Non-study beta-agonist aerosol this day?
130	nsbetagdose_3	Num	8		Yes: Enter total dose in mg this day
131	cort20x_3	Char	64	$64.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?(Not Done)
132	nsbetagx_3	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
133	hrate_3	Num	8		Heart Rate (beat/min):
134	sysbp_3	Num	8		Systolic BP (mmHg):
135	diabp_3	Num	8		Diastolic BP (mmHg):
136	temp_3	Num	8		Temperature (Celcius):
137	cvp_3	Num	8		CVP (mmHg):
138	vaso_3	Num	8		Vasopressors/inotropes this day?
139	vasoc_3	Char	3	$3.	Vasopressors/inotropes this day?
140	dobut_3	Num	8		IV Dobutamine Infusion Rate:
141	dobutu_3	Char	9	$9.	IV Dobutamine Infusion Rate Units
142	dopa_3	Num	8		IV Dopamine Infusion Rate:
143	dopau_3	Char	9	$9.	IV Dopamine Infusion Rate Units
144	norepi_3	Num	8		IV Norepinephrine Infusion Rate:
145	norepiu_3	Char	9	$9.	IV Norepinephrine Infusion Rate Units
146	epi_3	Num	8		IV Epinephrine Infusion Rate:
147	epiu_3	Char	9	$9.	ug/kg/min or ug/min

Num	Variable	Type	Len	Format	Label
148	vasorate_3	Num	8		IV Vasopressin Infusion Rate (units/min):
149	neosyn_3	Num	8		IV Neosynephrine Infusion Rate:
150	neosynu_3	Char	9	$9.	IV Neosynephrine Infusion Rate Units
151	vasooth_3	Char	50	$50.	If Other Please Specify:
152	betablock_3	Num	8		Beta Blockers (IV, PO, PGT) this day?
153	betablockc_3	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
154	hratex_3	Char	64	$64.	Heart Rate (beat/min): (Not Done)
155	sysbpx_3	Char	64	$64.	Systolic BP (mmHg): (Not Done)
156	diabpx_3	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
157	tempx_3	Char	64	$64.	Temperature (Celcius): (Not Done)
158	vasox_3	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
159	betablockx_3	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
160	cxrquads_4	Num	8		CXR: Number of quadrants with infiltrates
161	cort20_4	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
162	cort20c_4	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
163	ipatro_4	Num	8		Aerosolized or MDI delivered ipatropium?
164	ipatroc_4	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
165	ipadose_4	Num	8		Yes: Enter total number of doses this day:
166	nsbetag_4	Num	8		Non-study beta-agonist aerosol this day?
167	nsbetagc_4	Char	85	$85.	Non-study beta-agonist aerosol this day?
168	nsbetagdose_4	Num	8		Yes: Enter total dose in mg this day
169	cort20x_4	Char	64	$64.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?(Not Done)
170	nsbetagx_4	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
171	hrate_4	Num	8		Heart Rate (beat/min):
172	sysbp_4	Num	8		Systolic BP (mmHg):
173	diabp_4	Num	8		Diastolic BP (mmHg):
174	temp_4	Num	8		Temperature (Celcius):
175	cvp_4	Num	8		CVP (mmHg):
176	vaso_4	Num	8		Vasopressors/inotropes this day?
177	vasoc_4	Char	3	$3.	Vasopressors/inotropes this day?
178	dobut_4	Num	8		IV Dobutamine Infusion Rate:
179	dobutu_4	Char	9	$9.	IV Dobutamine Infusion Rate Units
180	dopa_4	Num	8		IV Dopamine Infusion Rate:
181	dopau_4	Char	9	$9.	IV Dopamine Infusion Rate Units
182	norepi_4	Num	8		IV Norepinephrine Infusion Rate:
183	norepiu_4	Char	9	$9.	IV Norepinephrine Infusion Rate Units
184	epi_4	Num	8		IV Epinephrine Infusion Rate:

Num	Variable	Type	Len	Format	Label
185	epiu_4	Char	9	$9.	ug/kg/min or ug/min
186	vasorate_4	Num	8		IV Vasopressin Infusion Rate (units/min):
187	neosyn_4	Num	8		IV Neosynephrine Infusion Rate:
188	neosynu_4	Char	9	$9.	IV Neosynephrine Infusion Rate Units
189	vasooth_4	Char	50	$50.	If Other Please Specify:
190	betablock_4	Num	8		Beta Blockers (IV, PO, PGT) this day?
191	betablockc_4	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
192	hratex_4	Char	64	$64.	Heart Rate (beat/min): (Not Done)
193	sysbpx_4	Char	64	$64.	Systolic BP (mmHg): (Not Done)
194	diabpx_4	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
195	tempx_4	Char	64	$64.	Temperature (Celcius): (Not Done)
196	vasox_4	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
197	betablockx_4	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
198	cxrquads_5	Num	8		CXR: Number of quadrants with infiltrates
199	cort20_5	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
200	cort20c_5	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
201	ipatro_5	Num	8		Aerosolized or MDI delivered ipatropium?
202	ipatroc_5	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
203	ipadose_5	Num	8		Yes: Enter total number of doses this day:
204	nsbetag_5	Num	8		Non-study beta-agonist aerosol this day?
205	nsbetagc_5	Char	85	$85.	Non-study beta-agonist aerosol this day?
206	nsbetagdose_5	Num	8		Yes: Enter total dose in mg this day
207	cort20x_5	Char	64	$64.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?(Not Done)
208	nsbetagx_5	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
209	hrate_5	Num	8		Heart Rate (beat/min):
210	sysbp_5	Num	8		Systolic BP (mmHg):
211	diabp_5	Num	8		Diastolic BP (mmHg):
212	temp_5	Num	8		Temperature (Celcius):
213	cvp_5	Num	8		CVP (mmHg):
214	vaso_5	Num	8		Vasopressors/inotropes this day?
215	vasoc_5	Char	3	$3.	Vasopressors/inotropes this day?
216	dobut_5	Num	8		IV Dobutamine Infusion Rate:
217	dobutu_5	Char	9	$9.	IV Dobutamine Infusion Rate Units
218	dopa_5	Num	8		IV Dopamine Infusion Rate:
219	dopau_5	Char	9	$9.	IV Dopamine Infusion Rate Units
220	norepi_5	Num	8		IV Norepinephrine Infusion Rate:
221	norepiu_5	Char	9	$9.	IV Norepinephrine Infusion Rate Units

Num	Variable	Type	Len	Format	Label
222	epi_5	Num	8		IV Epinephrine Infusion Rate:
223	epiu_5	Char	9	$9.	ug/kg/min or ug/min
224	vasorate_5	Num	8		IV Vasopressin Infusion Rate (units/min):
225	neosyn_5	Num	8		IV Neosynephrine Infusion Rate:
226	neosynu_5	Char	9	$9.	IV Neosynephrine Infusion Rate Units
227	vasooth_5	Char	50	$50.	If Other Please Specify:
228	betablock_5	Num	8		Beta Blockers (IV, PO, PGT) this day?
229	betablockc_5	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
230	hratex_5	Char	64	$64.	Heart Rate (beat/min): (Not Done)
231	sysbpx_5	Char	64	$64.	Systolic BP (mmHg): (Not Done)
232	diabpx_5	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
233	tempx_5	Char	64	$64.	Temperature (Celcius): (Not Done)
234	vasox_5	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
235	betablockx_5	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
236	cxrquads_6	Num	8		CXR: Number of quadrants with infiltrates
237	cort20_6	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
238	cort20c_6	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
239	ipatro_6	Num	8		Aerosolized or MDI delivered ipatropium?
240	ipatroc_6	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
241	ipadose_6	Num	8		Yes: Enter total number of doses this day:
242	nsbetag_6	Num	8		Non-study beta-agonist aerosol this day?
243	nsbetagc_6	Char	85	$85.	Non-study beta-agonist aerosol this day?
244	nsbetagdose_6	Num	8		Yes: Enter total dose in mg this day
245	cort20x_6	Char	64	$64.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?(Not Done)
246	nsbetagx_6	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
247	hrate_6	Num	8		Heart Rate (beat/min):
248	sysbp_6	Num	8		Systolic BP (mmHg):
249	diabp_6	Num	8		Diastolic BP (mmHg):
250	temp_6	Num	8		Temperature (Celcius):
251	cvp_6	Num	8		CVP (mmHg):
252	vaso_6	Num	8		Vasopressors/inotropes this day?
253	vasoc_6	Char	3	$3.	Vasopressors/inotropes this day?
254	dobut_6	Num	8		IV Dobutamine Infusion Rate:
255	dobutu_6	Char	9	$9.	IV Dobutamine Infusion Rate Units
256	dopa_6	Num	8		IV Dopamine Infusion Rate:
257	dopau_6	Char	9	$9.	IV Dopamine Infusion Rate Units
258	norepi_6	Num	8		IV Norepinephrine Infusion Rate:

Num	Variable	Type	Len	Format	Label
259	norepiu_6	Char	9	$9.	IV Norepinephrine Infusion Rate Units
260	epi_6	Num	8		IV Epinephrine Infusion Rate:
261	epiu_6	Char	9	$9.	ug/kg/min or ug/min
262	vasorate_6	Num	8		IV Vasopressin Infusion Rate (units/min):
263	neosyn_6	Num	8		IV Neosynephrine Infusion Rate:
264	neosynu_6	Char	9	$9.	IV Neosynephrine Infusion Rate Units
265	vasooth_6	Char	50	$50.	If Other Please Specify:
266	betablock_6	Num	8		Beta Blockers (IV, PO, PGT) this day?
267	betablockc_6	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
268	hratex_6	Char	64	$64.	Heart Rate (beat/min): (Not Done)
269	sysbpx_6	Char	64	$64.	Systolic BP (mmHg): (Not Done)
270	diabpx_6	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
271	tempx_6	Char	64	$64.	Temperature (Celcius): (Not Done)
272	vasox_6	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
273	betablockx_6	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
274	cxrquads_7	Num	8		CXR: Number of quadrants with infiltrates
275	cort20_7	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
276	cort20c_7	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
277	ipatro_7	Num	8		Aerosolized or MDI delivered ipatropium?
278	ipatroc_7	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
279	ipadose_7	Num	8		Yes: Enter total number of doses this day:
280	nsbetag_7	Num	8		Non-study beta-agonist aerosol this day?
281	nsbetagc_7	Char	85	$85.	Non-study beta-agonist aerosol this day?
282	nsbetagdose_7	Num	8		Yes: Enter total dose in mg this day
283	cort20x_7	Char	64	$64.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?(Not Done)
284	nsbetagx_7	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
285	hrate_7	Num	8		Heart Rate (beat/min):
286	sysbp_7	Num	8		Systolic BP (mmHg):
287	diabp_7	Num	8		Diastolic BP (mmHg):
288	temp_7	Num	8		Temperature (Celcius):
289	cvp_7	Num	8		CVP (mmHg):
290	vaso_7	Num	8		Vasopressors/inotropes this day?
291	vasoc_7	Char	3	$3.	Vasopressors/inotropes this day?
292	dobut_7	Num	8		IV Dobutamine Infusion Rate:
293	dobutu_7	Char	9	$9.	IV Dobutamine Infusion Rate Units
294	dopa_7	Num	8		IV Dopamine Infusion Rate:
295	dopau_7	Char	9	$9.	IV Dopamine Infusion Rate Units

Num	Variable	Type	Len	Format	Label
296	norepi_7	Num	8		IV Norepinephrine Infusion Rate:
297	norepiu_7	Char	9	$9.	IV Norepinephrine Infusion Rate Units
298	epi_7	Num	8		IV Epinephrine Infusion Rate:
299	epiu_7	Char	9	$9.	ug/kg/min or ug/min
300	vasorate_7	Num	8		IV Vasopressin Infusion Rate (units/min):
301	neosyn_7	Num	8		IV Neosynephrine Infusion Rate:
302	neosynu_7	Char	9	$9.	IV Neosynephrine Infusion Rate Units
303	vasooth_7	Char	50	$50.	If Other Please Specify:
304	betablock_7	Num	8		Beta Blockers (IV, PO, PGT) this day?
305	betablockc_7	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
306	hratex_7	Char	64	$64.	Heart Rate (beat/min): (Not Done)
307	sysbpx_7	Char	64	$64.	Systolic BP (mmHg): (Not Done)
308	diabpx_7	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
309	tempx_7	Char	64	$64.	Temperature (Celcius): (Not Done)
310	vasox_7	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
311	betablockx_7	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
312	cxrquads_8	Num	8		CXR: Number of quadrants with infiltrates
313	cort20_8	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
314	cort20c_8	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
315	ipatro_8	Num	8		Aerosolized or MDI delivered ipatropium?
316	ipatroc_8	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
317	ipadose_8	Num	8		Yes: Enter total number of doses this day:
318	nsbetag_8	Num	8		Non-study beta-agonist aerosol this day?
319	nsbetagc_8	Char	85	$85.	Non-study beta-agonist aerosol this day?
320	nsbetagdose_8	Num	8		Yes: Enter total dose in mg this day
321	cort20x_8	Char	64	$64.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?(Not Done)
322	nsbetagx_8	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
323	hrate_8	Num	8		Heart Rate (beat/min):
324	sysbp_8	Num	8		Systolic BP (mmHg):
325	diabp_8	Num	8		Diastolic BP (mmHg):
326	temp_8	Num	8		Temperature (Celcius):
327	cvp_8	Num	8		CVP (mmHg):
328	vaso_8	Num	8		Vasopressors/inotropes this day?
329	vasoc_8	Char	3	$3.	Vasopressors/inotropes this day?
330	dobut_8	Num	8		IV Dobutamine Infusion Rate:
331	dobutu_8	Char	9	$9.	IV Dobutamine Infusion Rate Units
332	dopa_8	Num	8		IV Dopamine Infusion Rate:

Num	Variable	Type	Len	Format	Label
333	dopau_8	Char	9	$9.	IV Dopamine Infusion Rate Units
334	norepi_8	Num	8		IV Norepinephrine Infusion Rate:
335	norepiu_8	Char	9	$9.	IV Norepinephrine Infusion Rate Units
336	epi_8	Num	8		IV Epinephrine Infusion Rate:
337	epiu_8	Char	9	$9.	ug/kg/min or ug/min
338	vasorate_8	Num	8		IV Vasopressin Infusion Rate (units/min):
339	neosyn_8	Num	8		IV Neosynephrine Infusion Rate:
340	neosynu_8	Char	9	$9.	IV Neosynephrine Infusion Rate Units
341	vasooth_8	Char	50	$50.	If Other Please Specify:
342	betablock_8	Num	8		Beta Blockers (IV, PO, PGT) this day?
343	betablockc_8	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
344	hratex_8	Char	64	$64.	Heart Rate (beat/min): (Not Done)
345	sysbpx_8	Char	64	$64.	Systolic BP (mmHg): (Not Done)
346	diabpx_8	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
347	tempx_8	Char	64	$64.	Temperature (Celcius): (Not Done)
348	vasox_8	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
349	betablockx_8	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
350	cxrquads_9	Num	8		CXR: Number of quadrants with infiltrates
351	cort20_9	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
352	cort20c_9	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
353	ipatro_9	Num	8		Aerosolized or MDI delivered ipatropium?
354	ipatroc_9	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
355	ipadose_9	Num	8		Yes: Enter total number of doses this day:
356	nsbetag_9	Num	8		Non-study beta-agonist aerosol this day?
357	nsbetagc_9	Char	85	$85.	Non-study beta-agonist aerosol this day?
358	nsbetagdose_9	Num	8		Yes: Enter total dose in mg this day
359	cort20x_9	Char	64	$64.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?(Not Done)
360	nsbetagx_9	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
361	hrate_9	Num	8		Heart Rate (beat/min):
362	sysbp_9	Num	8		Systolic BP (mmHg):
363	diabp_9	Num	8		Diastolic BP (mmHg):
364	temp_9	Num	8		Temperature (Celcius):
365	cvp_9	Num	8		CVP (mmHg):
366	vaso_9	Num	8		Vasopressors/inotropes this day?
367	vasoc_9	Char	3	$3.	Vasopressors/inotropes this day?
368	dobut_9	Num	8		IV Dobutamine Infusion Rate:
369	dobutu_9	Char	9	$9.	IV Dobutamine Infusion Rate Units

Num	Variable	Type	Len	Format	Label
370	dopa_9	Num	8		IV Dopamine Infusion Rate:
371	dopau_9	Char	9	$9.	IV Dopamine Infusion Rate Units
372	norepi_9	Num	8		IV Norepinephrine Infusion Rate:
373	norepiu_9	Char	9	$9.	IV Norepinephrine Infusion Rate Units
374	epi_9	Num	8		IV Epinephrine Infusion Rate:
375	epiu_9	Char	9	$9.	ug/kg/min or ug/min
376	vasorate_9	Num	8		IV Vasopressin Infusion Rate (units/min):
377	neosyn_9	Num	8		IV Neosynephrine Infusion Rate:
378	neosynu_9	Char	9	$9.	IV Neosynephrine Infusion Rate Units
379	vasooth_9	Char	50	$50.	If Other Please Specify:
380	betablock_9	Num	8		Beta Blockers (IV, PO, PGT) this day?
381	betablockc_9	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
382	hratex_9	Char	64	$64.	Heart Rate (beat/min): (Not Done)
383	sysbpx_9	Char	64	$64.	Systolic BP (mmHg): (Not Done)
384	diabpx_9	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
385	tempx_9	Char	64	$64.	Temperature (Celcius): (Not Done)
386	vasox_9	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
387	betablockx_9	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
388	cxrquads_10	Num	8		CXR: Number of quadrants with infiltrates
389	cort20_10	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
390	cort20c_10	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
391	ipatro_10	Num	8		Aerosolized or MDI delivered ipatropium?
392	ipatroc_10	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
393	ipadose_10	Num	8		Yes: Enter total number of doses this day:
394	nsbetag_10	Num	8		Non-study beta-agonist aerosol this day?
395	nsbetagc_10	Char	85	$85.	Non-study beta-agonist aerosol this day?
396	nsbetagdose_10	Num	8		Yes: Enter total dose in mg this day
397	cort20x_10	Char	64	$64.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?(Not Done)
398	nsbetagx_10	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
399	hrate_10	Num	8		Heart Rate (beat/min):
400	sysbp_10	Num	8		Systolic BP (mmHg):
401	diabp_10	Num	8		Diastolic BP (mmHg):
402	temp_10	Num	8		Temperature (Celcius):
403	cvp_10	Num	8		CVP (mmHg):
404	vaso_10	Num	8		Vasopressors/inotropes this day?
405	vasoc_10	Char	3	$3.	Vasopressors/inotropes this day?
406	dobut_10	Num	8		IV Dobutamine Infusion Rate:

Num	Variable	Type	Len	Format	Label
407	dobutu_10	Char	9	$9.	IV Dobutamine Infusion Rate Units
408	dopa_10	Num	8		IV Dopamine Infusion Rate:
409	dopau_10	Char	9	$9.	IV Dopamine Infusion Rate Units
410	norepi_10	Num	8		IV Norepinephrine Infusion Rate:
411	norepiu_10	Char	9	$9.	IV Norepinephrine Infusion Rate Units
412	epi_10	Num	8		IV Epinephrine Infusion Rate:
413	epiu_10	Char	9	$9.	ug/kg/min or ug/min
414	vasorate_10	Num	8		IV Vasopressin Infusion Rate (units/min):
415	neosyn_10	Num	8		IV Neosynephrine Infusion Rate:
416	neosynu_10	Char	9	$9.	IV Neosynephrine Infusion Rate Units
417	vasooth_10	Char	50	$50.	If Other Please Specify:
418	betablock_10	Num	8		Beta Blockers (IV, PO, PGT) this day?
419	betablockc_10	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
420	hratex_10	Char	64	$64.	Heart Rate (beat/min): (Not Done)
421	sysbpx_10	Char	64	$64.	Systolic BP (mmHg): (Not Done)
422	diabpx_10	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
423	tempx_10	Char	64	$64.	Temperature (Celcius): (Not Done)
424	vasox_10	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
425	betablockx_10	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)

Data Set Name: whyoff.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
3	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
4	altapatient	Num	8		
5	omegapatient	Num	8		
6	edenpatient	Num	8		
7	alta	Char	20		
8	altachar	Char	20		
9	omega	Char	20		
10	omegachar	Char	20		
11	eden	Char	20	$EDENHID.	
12	edenchar	Char	12		EDEN
13	proprate	Num	8		Propofol infusion rate at time of randomization
14	feedgrp	Num	8		Enteral Feeding Group
15	feedgrpc	Char	12	$12.	Enteral Feeding Group
16	prebasefeed	Num	8		In the 12 hours prior to enrollment, did patient receive any enteral feedings?
17	prebasefeedc	Char	72	$72.	In the 12 hours prior to enrollment, did patient receive any enteral feedings?
18	prebasevol	Num	8		Yes, enter total volume of enteral feeds in 12 hours prior to enrollment
19	feedinitdt	Num	8	BEST12.	Date and time of initiation of protocol specified enteral feeds (Day)
20	feedinittm	Num	8	TIME5.	Date and time of initiation of protocol specified enteral feeds (Time)
21	recfeed_0	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
22	recfeedc_0	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
23	goalrate_0	Num	8		Tube feeding goal rate
24	goalchange_0	Num	8		Did the goal rate change during the 24 hour period?
25	goalchangec_0	Char	19	$19.	Did the goal rate change during the 24 hour period?
26	newgoal_0	Num	8		New goal rate
27	brand1_0	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
28	brand1vol_0	Num	8		Total volume of enteral formula 1 infused for 24 hour period
29	brand2_0	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
30	brand2vol_0	Num	8		Total volume of enteral formula 2 infused for 24 hour period
31	feedhrs_0	Num	8		Number of hours enteral tube feeds on for this 24 hour period
32	feedoff_0	Num	8		Feeds turned off for > 30 minutes within 24 hour period
33	feedoffc_0	Char	61	$61.	Feeds turned off for > 30 minutes within 24 hour period
34	planext_0	Num	8		Planned Extubation
35	planextc_0	Char	18	$18.	Planned Extubation
36	giint_0	Num	8		GI Intolerance

Num	Variable	Type	Len	Format	Label
37	giintc_0	Char	14	$14.	GI Intolerance
38	invbside_0	Num	8		Invasive bedside procedure
39	invbsidec_0	Char	26	$26.	Invasive bedside procedure
40	surgery	Num	8		Surgery
41	surgeryc	Char	7	$7.	Surgery
42	leftfloor_0	Num	8		Patient left the floor
43	leftfloorc_0	Char	22	$22.	Patient left the floor
44	care_0	Num	8		Nursing Care(ie bathing, HOB down)
45	carec_0	Char	34	$34.	Nursing Care(ie bathing, HOB down)
46	medadm_0	Num	8		Medical Administration
47	medadmc_0	Char	22	$22.	Medical Administration
48	feedoffoth_0	Num	8		Other reason feed turned off:
49	feedoffothc_0	Char	5	$5.	Other reason feed turned off:
50	feedoffreas_0	Char	255	$255.	Other reason feed turned off: Reason
51	giintoleden_0	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
52	giintoledenc_0	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
53	diarrhea_0	Num	8		Diarrhea
54	diarrheac_0	Char	8	$8.	Diarrhea
55	vomiting_0	Num	8		Vomiting
56	vomitingc_0	Char	8	$8.	Vomiting
57	aspiration_0	Num	8		Aspiration
58	aspirationc_0	Char	10	$10.	Aspiration
59	elevresid	Num	8		Elevated Residuals
60	elevresidc	Char	18	$18.	Elevated Residuals
61	regurg_0	Num	8		Regurgitation
62	regurgc_0	Char	13	$13.	Regurgitation
63	constipation	Num	8		Constipation
64	constipationc	Char	12	$12.	Constipation
65	cramping	Num	8		Abdominal distention or cramping
66	crampingc	Char	32	$32.	Abdominal distention or cramping
67	feedsite_0	Num	8		Insertion site of feeding tube:
68	feedsitec_0	Char	12	$12.	Insertion site of feeding tube:
69	tubesize_0	Num	8		Feeding tube size
70	tubesizec_0	Char	10	$10.	Feeding tube size
71	distalpos_0	Num	8		Distal position of feeding tube
72	distalposc_0	Char	12	$12.	Distal position of feeding tube
73	distalconf_0	Num	8		Was distal position confirmed during this 24 hour period?

Num	Variable	Type	Len	Format	Label
74	distalconfc_0	Char	19	$19.	Was distal position confirmed during this 24 hour period?
75	distalhow_0	Num	8		How distal position confirmed
76	distalhowc_0	Char	15	$15.	How distal position confirmed
77	distaloth_0	Char	40	$40.	How distal position confirmed: other
78	fullcal_0	Num	8		Was rate advanced to full-calorie rate during this calendar day?
79	fullcalc_0	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
80	fullcaltm_0	Num	8	TIMEAMPM.	time full calorie reached
81	pronevent_0	Num	8		Prone ventilation between randomization and midnight?
82	proneventc_0	Char	3	$3.	Prone ventilation between randomization and midnight?
83	propratex	Char	64	$64.	Propofol infusion rate at time of randomization (Not Done)
84	feedgrpx	Char	64	$64.	Enteral Feeding Group (Not Done)
85	prebasefeedx	Char	64	$64.	In the 12 hours prior to enrollment, did patient receive any enteral feedings? (Not Done)
86	feedinitdtmx	Char	64	$64.	Date and time of initiation of protocol specified enteral feeds (Not Done)
87	recfeedx_0	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
88	goalratex_0	Char	64	$64.	Tube feeding goal rate (Not Done)
89	goalchangex_0	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
90	brand1x_0	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period (Not Done)
91	feedhrsx_0	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
92	feedoffX	Char	64	$64.	Feeds turned off for > 30 minutes within 24 hour period (Not Done)
93	giintoledenx_0	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
94	feedsiteX	Char	64	$64.	Insertion site of feeding tube: (Not Done)
95	tubesizeX	Char	64	$64.	Feeding tube size (Not Done)
96	distalposX	Char	64	$64.	Distal position of feeding tube (Not Done)
97	distalconfx_0	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
98	fullcalx_0	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
99	surg_1	Num	8		Surgery
100	surgc_1	Char	7	$7.	Surgery
101	residual_1	Num	8		Elevated Residuals
102	residualc_1	Char	18	$18.	Elevated Residuals
103	const_1	Num	8		Constipation
104	constc_1	Char	12	$12.	Constipation
105	cramp_1	Num	8		Abdominal distention or cramping
106	crampc_1	Char	32	$32.	Abdominal distention or cramping
107	feedoffx_1	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
108	feedsitex_1	Char	64	$64.	Insertion site of feeding tube (Not Done)
109	tubesizex_1	Char	64	$64.	Feeding tube size (Not Done)

Num	Variable	Type	Len	Format	Label
110	distalposx_1	Char	64	$64.	Distal position of feeding tube (Not Done)
111	proneventx_1	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
112	recfeed_1	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
113	recfeedc_1	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
114	goalrate_1	Num	8		Tube feeding goal rate
115	goalchange_1	Num	8		Did the goal rate change during the 24 hour period?
116	goalchangec_1	Char	19	$19.	Did the goal rate change during the 24 hour period?
117	newgoal_1	Num	8		Yes, new goal rate
118	brand1_1	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
119	brand1vol_1	Num	8		Total volume of enteral formula 1 infused for 24 hour period
120	brand2_1	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
121	brand2vol_1	Num	8		Total volume of enteral formula 2 infused for 24 hour period
122	feedhrs_1	Num	8		Number of hours enteral tube feeds on for this 24 hour period
123	feedoff_1	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
124	feedoffc_1	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
125	planext_1	Num	8		Planned Extubation
126	planextc_1	Char	18	$18.	Planned Extubation
127	giint_1	Num	8		GI Intolerance
128	giintc_1	Char	14	$14.	GI Intolerance
129	invbside_1	Num	8		Invasive bedside procedure
130	invbsidec_1	Char	26	$26.	Invasive bedside procedure
131	leftfloor_1	Num	8		Patient left the floor
132	leftfloorc_1	Char	22	$22.	Patient left the floor
133	care_1	Num	8		Nursing Care (i.e. bathing, HOB down)
134	carec_1	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
135	medadm_1	Num	8		Medical Administration
136	medadmc_1	Char	22	$22.	Medical Administration
137	feedoffoth_1	Num	8		Other reason feed turned off:
138	feedoffothc_1	Char	5	$5.	Other reason feed turned off:
139	feedoffreas_1	Char	255	$255.	Other reason feed turned off: Reason
140	giintoleden_1	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
141	giintoledenc_1	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
142	diarrhea_1	Num	8		Diarrhea
143	diarrheac_1	Char	8	$8.	Diarrhea
144	vomiting_1	Num	8		Vomiting
145	vomitingc_1	Char	8	$8.	Vomiting

Num	Variable	Type	Len	Format	Label
146	aspiration_1	Num	8		Aspiration
147	aspirationc_1	Char	10	$10.	Aspiration
148	regurg_1	Num	8		Regurgitation
149	regurgc_1	Char	13	$13.	Regurgitation
150	feedsite_1	Num	8		Insertion site of feeding tube
151	feedsitec_1	Char	12	$12.	Insertion site of feeding tube
152	tubesize_1	Num	8		Feeding tube size
153	tubesizec_1	Char	10	$10.	Feeding tube size
154	distalpos_1	Num	8		Distal position of feeding tube
155	distalposc_1	Char	12	$12.	Distal position of feeding tube
156	distalconf_1	Num	8		Was distal position confirmed during this 24 hour period?
157	distalconfc_1	Char	19	$19.	Was distal position confirmed during this 24 hour period?
158	distalhow_1	Num	8		Yes, how confirmed:
159	distalhowc_1	Char	15	$15.	Yes, how confirmed:
160	distaloth_1	Char	40	$40.	Yes, how confirmed: Other
161	fullcal_1	Num	8		Was rate advanced to full-calorie rate during this calendar day?
162	fullcalc_1	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
163	fullcaltm_1	Num	8	TIMEAMPM.	Yes, time full calorie reached:
164	pronevent_1	Num	8		Prone ventilation this 24 hour period?
165	proneventc_1	Char	3	$3.	Prone ventilation this 24 hour period?
166	recfeedx_1	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
167	goalratex_1	Char	64	$64.	Tube feeding goal rate (Not Done)
168	goalchangex_1	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
169	brand1x_1	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
170	feedhrsx_1	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
171	giintoledenx_1	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
172	distalconfx_1	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
173	fullcalx_1	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
174	surg_2	Num	8		Surgery
175	surgc_2	Char	7	$7.	Surgery
176	residual_2	Num	8		Elevated Residuals
177	residualc_2	Char	18	$18.	Elevated Residuals
178	const_2	Num	8		Constipation
179	constc_2	Char	12	$12.	Constipation
180	cramp_2	Num	8		Abdominal distention or cramping
181	crampc_2	Char	32	$32.	Abdominal distention or cramping
182	feedoffx_2	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)

Num	Variable	Type	Len	Format	Label
183	feedsitex_2	Char	64	$64.	Insertion site of feeding tube (Not Done)
184	tubesizex_2	Char	64	$64.	Feeding tube size (Not Done)
185	distalposx_2	Char	64	$64.	Distal position of feeding tube (Not Done)
186	proneventx_2	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
187	recfeed_2	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
188	recfeedc_2	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
189	goalrate_2	Num	8		Tube feeding goal rate
190	goalchange_2	Num	8		Did the goal rate change during the 24 hour period?
191	goalchangec_2	Char	19	$19.	Did the goal rate change during the 24 hour period?
192	newgoal_2	Num	8		Yes, new goal rate
193	brand1_2	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
194	brand1vol_2	Num	8		Total volume of enteral formula 1 infused for 24 hour period
195	brand2_2	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
196	brand2vol_2	Num	8		Total volume of enteral formula 2 infused for 24 hour period
197	feedhrs_2	Num	8		Number of hours enteral tube feeds on for this 24 hour period
198	feedoff_2	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
199	feedoffc_2	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
200	planext_2	Num	8		Planned Extubation
201	planextc_2	Char	18	$18.	Planned Extubation
202	giint_2	Num	8		GI Intolerance
203	giintc_2	Char	14	$14.	GI Intolerance
204	invbside_2	Num	8		Invasive bedside procedure
205	invbsidec_2	Char	26	$26.	Invasive bedside procedure
206	leftfloor_2	Num	8		Patient left the floor
207	leftfloorc_2	Char	22	$22.	Patient left the floor
208	care_2	Num	8		Nursing Care (i.e. bathing, HOB down)
209	carec_2	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
210	medadm_2	Num	8		Medical Administration
211	medadmc_2	Char	22	$22.	Medical Administration
212	feedoffoth_2	Num	8		Other reason feed turned off:
213	feedoffothc_2	Char	5	$5.	Other reason feed turned off:
214	feedoffreas_2	Char	255	$255.	Other reason feed turned off: Reason
215	giintoleden_2	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
216	giintoledenc_2	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
217	diarrhea_2	Num	8		Diarrhea
218	diarrheac_2	Char	8	$8.	Diarrhea

Num	Variable	Type	Len	Format	Label
219	vomiting_2	Num	8		Vomiting
220	vomitingc_2	Char	8	$8.	Vomiting
221	aspiration_2	Num	8		Aspiration
222	aspirationc_2	Char	10	$10.	Aspiration
223	regurg_2	Num	8		Regurgitation
224	regurgc_2	Char	13	$13.	Regurgitation
225	feedsite_2	Num	8		Insertion site of feeding tube
226	feedsitec_2	Char	12	$12.	Insertion site of feeding tube
227	tubesize_2	Num	8		Feeding tube size
228	tubesizec_2	Char	10	$10.	Feeding tube size
229	distalpos_2	Num	8		Distal position of feeding tube
230	distalposc_2	Char	12	$12.	Distal position of feeding tube
231	distalconf_2	Num	8		Was distal position confirmed during this 24 hour period?
232	distalconfc_2	Char	19	$19.	Was distal position confirmed during this 24 hour period?
233	distalhow_2	Num	8		Yes, how confirmed:
234	distalhowc_2	Char	15	$15.	Yes, how confirmed:
235	distaloth_2	Char	40	$40.	Yes, how confirmed: Other
236	fullcal_2	Num	8		Was rate advanced to full-calorie rate during this calendar day?
237	fullcalc_2	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
238	fullcaltm_2	Num	8	TIMEAMPM.	Yes, time full calorie reached:
239	pronevent_2	Num	8		Prone ventilation this 24 hour period?
240	proneventc_2	Char	3	$3.	Prone ventilation this 24 hour period?
241	recfeedx_2	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
242	goalratex_2	Char	64	$64.	Tube feeding goal rate (Not Done)
243	goalchangex_2	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
244	brand1x_2	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
245	feedhrsx_2	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
246	giintoledenx_2	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
247	distalconfx_2	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
248	fullcalx_2	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
249	surg_3	Num	8		Surgery
250	surgc_3	Char	7	$7.	Surgery
251	residual_3	Num	8		Elevated Residuals
252	residualc_3	Char	18	$18.	Elevated Residuals
253	const_3	Num	8		Constipation
254	constc_3	Char	12	$12.	Constipation
255	cramp_3	Num	8		Abdominal distention or cramping

Num	Variable	Type	Len	Format	Label
256	crampc_3	Char	32	$32.	Abdominal distention or cramping
257	feedoffx_3	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
258	feedsitex_3	Char	64	$64.	Insertion site of feeding tube (Not Done)
259	tubesizex_3	Char	64	$64.	Feeding tube size (Not Done)
260	distalposx_3	Char	64	$64.	Distal position of feeding tube (Not Done)
261	proneventx_3	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
262	recfeed_3	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
263	recfeedc_3	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
264	goalrate_3	Num	8		Tube feeding goal rate
265	goalchange_3	Num	8		Did the goal rate change during the 24 hour period?
266	goalchangec_3	Char	19	$19.	Did the goal rate change during the 24 hour period?
267	newgoal_3	Num	8		Yes, new goal rate
268	brand1_3	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
269	brand1vol_3	Num	8		Total volume of enteral formula 1 infused for 24 hour period
270	brand2_3	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
271	brand2vol_3	Num	8		Total volume of enteral formula 2 infused for 24 hour period
272	feedhrs_3	Num	8		Number of hours enteral tube feeds on for this 24 hour period
273	feedoff_3	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
274	feedoffc_3	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
275	planext_3	Num	8		Planned Extubation
276	planextc_3	Char	18	$18.	Planned Extubation
277	giint_3	Num	8		GI Intolerance
278	giintc_3	Char	14	$14.	GI Intolerance
279	invbside_3	Num	8		Invasive bedside procedure
280	invbsidec_3	Char	26	$26.	Invasive bedside procedure
281	leftfloor_3	Num	8		Patient left the floor
282	leftfloorc_3	Char	22	$22.	Patient left the floor
283	care_3	Num	8		Nursing Care (i.e. bathing, HOB down)
284	carec_3	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
285	medadm_3	Num	8		Medical Administration
286	medadmc_3	Char	22	$22.	Medical Administration
287	feedoffoth_3	Num	8		Other reason feed turned off:
288	feedoffothc_3	Char	5	$5.	Other reason feed turned off:
289	feedoffreas_3	Char	255	$255.	Other reason feed turned off: Reason
290	giintoleden_3	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?

Num	Variable	Type	Len	Format	Label
291	giintoledenc_3	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
292	diarrhea_3	Num	8		Diarrhea
293	diarrheac_3	Char	8	$8.	Diarrhea
294	vomiting_3	Num	8		Vomiting
295	vomitingc_3	Char	8	$8.	Vomiting
296	aspiration_3	Num	8		Aspiration
297	aspirationc_3	Char	10	$10.	Aspiration
298	regurg_3	Num	8		Regurgitation
299	regurgc_3	Char	13	$13.	Regurgitation
300	feedsite_3	Num	8		Insertion site of feeding tube
301	feedsitec_3	Char	12	$12.	Insertion site of feeding tube
302	tubesize_3	Num	8		Feeding tube size
303	tubesizec_3	Char	10	$10.	Feeding tube size
304	distalpos_3	Num	8		Distal position of feeding tube
305	distalposc_3	Char	12	$12.	Distal position of feeding tube
306	distalconf_3	Num	8		Was distal position confirmed during this 24 hour period?
307	distalconfc_3	Char	19	$19.	Was distal position confirmed during this 24 hour period?
308	distalhow_3	Num	8		Yes, how confirmed:
309	distalhowc_3	Char	15	$15.	Yes, how confirmed:
310	distaloth_3	Char	40	$40.	Yes, how confirmed: Other
311	fullcal_3	Num	8		Was rate advanced to full-calorie rate during this calendar day?
312	fullcalc_3	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
313	fullcaltm_3	Num	8	TIMEAMPM.	Yes, time full calorie reached:
314	pronevent_3	Num	8		Prone ventilation this 24 hour period?
315	proneventc_3	Char	3	$3.	Prone ventilation this 24 hour period?
316	recfeedx_3	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
317	goalratex_3	Char	64	$64.	Tube feeding goal rate (Not Done)
318	goalchangex_3	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
319	brand1x_3	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
320	feedhrsx_3	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
321	giintoledenx_3	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
322	distalconfx_3	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
323	fullcalx_3	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
324	surg_4	Num	8		Surgery
325	surgc_4	Char	7	$7.	Surgery
326	residual_4	Num	8		Elevated Residuals
327	residualc_4	Char	18	$18.	Elevated Residuals

Num	Variable	Type	Len	Format	Label
328	const_4	Num	8		Constipation
329	constc_4	Char	12	$12.	Constipation
330	cramp_4	Num	8		Abdominal distention or cramping
331	crampc_4	Char	32	$32.	Abdominal distention or cramping
332	feedoffx_4	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
333	feedsitex_4	Char	64	$64.	Insertion site of feeding tube (Not Done)
334	tubesizex_4	Char	64	$64.	Feeding tube size (Not Done)
335	distalposx_4	Char	64	$64.	Distal position of feeding tube (Not Done)
336	proneventx_4	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
337	recfeed_4	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
338	recfeedc_4	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
339	goalrate_4	Num	8		Tube feeding goal rate
340	goalchange_4	Num	8		Did the goal rate change during the 24 hour period?
341	goalchangec_4	Char	19	$19.	Did the goal rate change during the 24 hour period?
342	newgoal_4	Num	8		Yes, new goal rate
343	brand1_4	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
344	brand1vol_4	Num	8		Total volume of enteral formula 1 infused for 24 hour period
345	brand2_4	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
346	brand2vol_4	Num	8		Total volume of enteral formula 2 infused for 24 hour period
347	feedhrs_4	Num	8		Number of hours enteral tube feeds on for this 24 hour period
348	feedoff_4	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
349	feedoffc_4	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
350	planext_4	Num	8		Planned Extubation
351	planextc_4	Char	18	$18.	Planned Extubation
352	giint_4	Num	8		GI Intolerance
353	giintc_4	Char	14	$14.	GI Intolerance
354	invbside_4	Num	8		Invasive bedside procedure
355	invbsidec_4	Char	26	$26.	Invasive bedside procedure
356	leftfloor_4	Num	8		Patient left the floor
357	leftfloorc_4	Char	22	$22.	Patient left the floor
358	care_4	Num	8		Nursing Care (i.e. bathing, HOB down)
359	carec_4	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
360	medadm_4	Num	8		Medical Administration
361	medadmc_4	Char	22	$22.	Medical Administration
362	feedoffoth_4	Num	8		Other reason feed turned off:
363	feedoffothc_4	Char	5	$5.	Other reason feed turned off:
364	feedoffreas_4	Char	255	$255.	Other reason feed turned off: Reason

Num	Variable	Type	Len	Format	Label
365	giintoleden_4	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
366	giintoledenc_4	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
367	diarrhea_4	Num	8		Diarrhea
368	diarrheac_4	Char	8	$8.	Diarrhea
369	vomiting_4	Num	8		Vomiting
370	vomitingc_4	Char	8	$8.	Vomiting
371	aspiration_4	Num	8		Aspiration
372	aspirationc_4	Char	10	$10.	Aspiration
373	regurg_4	Num	8		Regurgitation
374	regurgc_4	Char	13	$13.	Regurgitation
375	feedsite_4	Num	8		Insertion site of feeding tube
376	feedsitec_4	Char	12	$12.	Insertion site of feeding tube
377	tubesize_4	Num	8		Feeding tube size
378	tubesizec_4	Char	10	$10.	Feeding tube size
379	distalpos_4	Num	8		Distal position of feeding tube
380	distalposc_4	Char	12	$12.	Distal position of feeding tube
381	distalconf_4	Num	8		Was distal position confirmed during this 24 hour period?
382	distalconfc_4	Char	19	$19.	Was distal position confirmed during this 24 hour period?
383	distalhow_4	Num	8		Yes, how confirmed:
384	distalhowc_4	Char	15	$15.	Yes, how confirmed:
385	distaloth_4	Char	40	$40.	Yes, how confirmed: Other
386	fullcal_4	Num	8		Was rate advanced to full-calorie rate during this calendar day?
387	fullcalc_4	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
388	fullcaltm_4	Num	8	TIMEAMPM.	Yes, time full calorie reached:
389	pronevent_4	Num	8		Prone ventilation this 24 hour period?
390	proneventc_4	Char	3	$3.	Prone ventilation this 24 hour period?
391	recfeedx_4	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
392	goalratex_4	Char	64	$64.	Tube feeding goal rate (Not Done)
393	goalchangex_4	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
394	brand1x_4	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
395	feedhrsx_4	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
396	giintoledenx_4	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
397	distalconfx_4	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
398	fullcalx_4	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
399	surg_5	Num	8		Surgery
400	surgc_5	Char	7	$7.	Surgery

Num	Variable	Type	Len	Format	Label
401	residual_5	Num	8		Elevated Residuals
402	residualc_5	Char	18	$18.	Elevated Residuals
403	const_5	Num	8		Constipation
404	constc_5	Char	12	$12.	Constipation
405	cramp_5	Num	8		Abdominal distention or cramping
406	crampc_5	Char	32	$32.	Abdominal distention or cramping
407	feedoffx_5	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
408	feedsitex_5	Char	64	$64.	Insertion site of feeding tube (Not Done)
409	tubesizex_5	Char	64	$64.	Feeding tube size (Not Done)
410	distalposx_5	Char	64	$64.	Distal position of feeding tube (Not Done)
411	proneventx_5	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
412	recfeed_5	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
413	recfeedc_5	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
414	goalrate_5	Num	8		Tube feeding goal rate
415	goalchange_5	Num	8		Did the goal rate change during the 24 hour period?
416	goalchangec_5	Char	19	$19.	Did the goal rate change during the 24 hour period?
417	newgoal_5	Num	8		Yes, new goal rate
418	brand1_5	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
419	brand1vol_5	Num	8		Total volume of enteral formula 1 infused for 24 hour period
420	brand2_5	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
421	brand2vol_5	Num	8		Total volume of enteral formula 2 infused for 24 hour period
422	feedhrs_5	Num	8		Number of hours enteral tube feeds on for this 24 hour period
423	feedoff_5	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
424	feedoffc_5	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
425	planext_5	Num	8		Planned Extubation
426	planextc_5	Char	18	$18.	Planned Extubation
427	giint_5	Num	8		GI Intolerance
428	giintc_5	Char	14	$14.	GI Intolerance
429	invbside_5	Num	8		Invasive bedside procedure
430	invbsidec_5	Char	26	$26.	Invasive bedside procedure
431	leftfloor_5	Num	8		Patient left the floor
432	leftfloorc_5	Char	22	$22.	Patient left the floor
433	care_5	Num	8		Nursing Care (i.e. bathing, HOB down)
434	carec_5	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
435	medadm_5	Num	8		Medical Administration
436	medadmc_5	Char	22	$22.	Medical Administration
437	feedoffoth_5	Num	8		Other reason feed turned off:

Num	Variable	Type	Len	Format	Label
438	feedoffothc_5	Char	5	$5.	Other reason feed turned off:
439	giintoleden_5	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
440	giintoledenc_5	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
441	diarrhea_5	Num	8		Diarrhea
442	diarrheac_5	Char	8	$8.	Diarrhea
443	vomiting_5	Num	8		Vomiting
444	vomitingc_5	Char	8	$8.	Vomiting
445	aspiration_5	Num	8		Aspiration
446	aspirationc_5	Char	10	$10.	Aspiration
447	regurg_5	Num	8		Regurgitation
448	regurgc_5	Char	13	$13.	Regurgitation
449	feedsite_5	Num	8		Insertion site of feeding tube
450	feedsitec_5	Char	12	$12.	Insertion site of feeding tube
451	tubesize_5	Num	8		Feeding tube size
452	tubesizec_5	Char	10	$10.	Feeding tube size
453	distalpos_5	Num	8		Distal position of feeding tube
454	distalposc_5	Char	12	$12.	Distal position of feeding tube
455	distalconf_5	Num	8		Was distal position confirmed during this 24 hour period?
456	distalconfc_5	Char	19	$19.	Was distal position confirmed during this 24 hour period?
457	distalhow_5	Num	8		Yes, how confirmed:
458	distalhowc_5	Char	15	$15.	Yes, how confirmed:
459	distaloth_5	Char	40	$40.	Yes, how confirmed: Other
460	fullcal_5	Num	8		Was rate advanced to full-calorie rate during this calendar day?
461	fullcalc_5	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
462	fullcaltm_5	Num	8	TIMEAMPM.	Yes, time full calorie reached:
463	pronevent_5	Num	8		Prone ventilation this 24 hour period?
464	proneventc_5	Char	3	$3.	Prone ventilation this 24 hour period?
465	recfeedx_5	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
466	goalratex_5	Char	64	$64.	Tube feeding goal rate (Not Done)
467	goalchangex_5	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
468	brand1x_5	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
469	feedhrsx_5	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
470	giintoledenx_5	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
471	distalconfx_5	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
472	fullcalx_5	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
473	surg_6	Num	8		Surgery

Num	Variable	Type	Len	Format	Label
474	surgc_6	Char	7	$7.	Surgery
475	residual_6	Num	8		Elevated Residuals
476	residualc_6	Char	18	$18.	Elevated Residuals
477	const_6	Num	8		Constipation
478	constc_6	Char	12	$12.	Constipation
479	cramp_6	Num	8		Abdominal distention or cramping
480	crampc_6	Char	32	$32.	Abdominal distention or cramping
481	feedoffx_6	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
482	feedsitex_6	Char	64	$64.	Insertion site of feeding tube (Not Done)
483	tubesizex_6	Char	64	$64.	Feeding tube size (Not Done)
484	distalposx_6	Char	64	$64.	Distal position of feeding tube (Not Done)
485	proneventx_6	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
486	recfeed_6	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
487	recfeedc_6	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
488	goalrate_6	Num	8		Tube feeding goal rate
489	goalchange_6	Num	8		Did the goal rate change during the 24 hour period?
490	goalchangec_6	Char	19	$19.	Did the goal rate change during the 24 hour period?
491	newgoal_6	Num	8		Yes, new goal rate
492	brand1_6	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
493	brand1vol_6	Num	8		Total volume of enteral formula 1 infused for 24 hour period
494	brand2_6	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
495	brand2vol_6	Num	8		Total volume of enteral formula 2 infused for 24 hour period
496	feedhrs_6	Num	8		Number of hours enteral tube feeds on for this 24 hour period
497	feedoff_6	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
498	feedoffc_6	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
499	planext_6	Num	8		Planned Extubation
500	planextc_6	Char	18	$18.	Planned Extubation
501	giint_6	Num	8		GI Intolerance
502	giintc_6	Char	14	$14.	GI Intolerance
503	invbside_6	Num	8		Invasive bedside procedure
504	invbsidec_6	Char	26	$26.	Invasive bedside procedure
505	leftfloor_6	Num	8		Patient left the floor
506	leftfloorc_6	Char	22	$22.	Patient left the floor
507	care_6	Num	8		Nursing Care (i.e. bathing, HOB down)
508	carec_6	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
509	medadm_6	Num	8		Medical Administration
510	medadmc_6	Char	22	$22.	Medical Administration

Num	Variable	Type	Len	Format	Label
511	feedoffoth_6	Num	8		Other reason feed turned off:
512	feedoffothc_6	Char	5	$5.	Other reason feed turned off:
513	feedoffreas_6	Char	255	$255.	Other reason feed turned off: Reason
514	giintoleden_6	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
515	giintoledenc_6	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
516	diarrhea_6	Num	8		Diarrhea
517	diarrheac_6	Char	8	$8.	Diarrhea
518	vomiting_6	Num	8		Vomiting
519	vomitingc_6	Char	8	$8.	Vomiting
520	aspiration_6	Num	8		Aspiration
521	aspirationc_6	Char	10	$10.	Aspiration
522	regurg_6	Num	8		Regurgitation
523	regurgc_6	Char	13	$13.	Regurgitation
524	feedsite_6	Num	8		Insertion site of feeding tube
525	feedsitec_6	Char	12	$12.	Insertion site of feeding tube
526	tubesize_6	Num	8		Feeding tube size
527	tubesizec_6	Char	10	$10.	Feeding tube size
528	distalpos_6	Num	8		Distal position of feeding tube
529	distalposc_6	Char	12	$12.	Distal position of feeding tube
530	distalconf_6	Num	8		Was distal position confirmed during this 24 hour period?
531	distalconfc_6	Char	19	$19.	Was distal position confirmed during this 24 hour period?
532	distalhow_6	Num	8		Yes, how confirmed:
533	distalhowc_6	Char	15	$15.	Yes, how confirmed:
534	distaloth_6	Char	40	$40.	Yes, how confirmed: Other
535	fullcal_6	Num	8		Was rate advanced to full-calorie rate during this calendar day?
536	fullcalc_6	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
537	fullcaltm_6	Num	8	TIMEAMPM.	Yes, time full calorie reached:
538	pronevent_6	Num	8		Prone ventilation this 24 hour period?
539	proneventc_6	Char	3	$3.	Prone ventilation this 24 hour period?
540	recfeedx_6	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
541	goalratex_6	Char	64	$64.	Tube feeding goal rate (Not Done)
542	goalchangex_6	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
543	brand1x_6	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
544	feedhrsx_6	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
545	giintoledenx_6	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
546	distalconfx_6	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)

Num	Variable	Type	Len	Format	Label
547	fullcalx_6	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
548	surg_7	Num	8		Surgery
549	surgc_7	Char	7	$7.	Surgery
550	residual_7	Num	8		Elevated Residuals
551	residualc_7	Char	18	$18.	Elevated Residuals
552	const_7	Num	8		Constipation
553	constc_7	Char	12	$12.	Constipation
554	cramp_7	Num	8		Abdominal distention or cramping
555	crampc_7	Char	32	$32.	Abdominal distention or cramping
556	feedoffx_7	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
557	feedsitex_7	Char	64	$64.	Insertion site of feeding tube (Not Done)
558	tubesizex_7	Char	64	$64.	Feeding tube size (Not Done)
559	distalposx_7	Char	64	$64.	Distal position of feeding tube (Not Done)
560	proneventx_7	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
561	recfeed_7	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
562	recfeedc_7	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
563	goalrate_7	Num	8		Tube feeding goal rate
564	goalchange_7	Num	8		Did the goal rate change during the 24 hour period?
565	goalchangec_7	Char	19	$19.	Did the goal rate change during the 24 hour period?
566	newgoal_7	Num	8		Yes, new goal rate
567	brand1_7	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
568	brand1vol_7	Num	8		Total volume of enteral formula 1 infused for 24 hour period
569	brand2_7	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
570	brand2vol_7	Num	8		Total volume of enteral formula 2 infused for 24 hour period
571	feedhrs_7	Num	8		Number of hours enteral tube feeds on for this 24 hour period
572	feedoff_7	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
573	feedoffc_7	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
574	planext_7	Num	8		Planned Extubation
575	planextc_7	Char	18	$18.	Planned Extubation
576	giint_7	Num	8		GI Intolerance
577	giintc_7	Char	14	$14.	GI Intolerance
578	invbside_7	Num	8		Invasive bedside procedure
579	invbsidec_7	Char	26	$26.	Invasive bedside procedure
580	leftfloor_7	Num	8		Patient left the floor
581	leftfloorc_7	Char	22	$22.	Patient left the floor
582	care_7	Num	8		Nursing Care (i.e. bathing, HOB down)
583	carec_7	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)

Num	Variable	Type	Len	Format	Label
584	medadm_7	Num	8		Medical Administration
585	medadmc_7	Char	22	$22.	Medical Administration
586	feedoffoth_7	Num	8		Other reason feed turned off:
587	feedoffothc_7	Char	5	$5.	Other reason feed turned off:
588	feedoffreas_7	Char	255	$255.	Other reason feed turned off: Reason
589	giintoleden_7	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
590	giintoledenc_7	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
591	diarrhea_7	Num	8		Diarrhea
592	diarrheac_7	Char	8	$8.	Diarrhea
593	vomiting_7	Num	8		Vomiting
594	vomitingc_7	Char	8	$8.	Vomiting
595	aspiration_7	Num	8		Aspiration
596	aspirationc_7	Char	10	$10.	Aspiration
597	regurg_7	Num	8		Regurgitation
598	regurgc_7	Char	13	$13.	Regurgitation
599	feedsite_7	Num	8		Insertion site of feeding tube
600	feedsitec_7	Char	12	$12.	Insertion site of feeding tube
601	tubesize_7	Num	8		Feeding tube size
602	tubesizec_7	Char	10	$10.	Feeding tube size
603	distalpos_7	Num	8		Distal position of feeding tube
604	distalposc_7	Char	12	$12.	Distal position of feeding tube
605	distalconf_7	Num	8		Was distal position confirmed during this 24 hour period?
606	distalconfc_7	Char	19	$19.	Was distal position confirmed during this 24 hour period?
607	distalhow_7	Num	8		Yes, how confirmed:
608	distalhowc_7	Char	15	$15.	Yes, how confirmed:
609	distaloth_7	Char	40	$40.	Yes, how confirmed: Other
610	fullcal_7	Num	8		Was rate advanced to full-calorie rate during this calendar day?
611	fullcalc_7	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
612	fullcaltm_7	Num	8	TIMEAMPM.	Yes, time full calorie reached:
613	pronevent_7	Num	8		Prone ventilation this 24 hour period?
614	proneventc_7	Char	3	$3.	Prone ventilation this 24 hour period?
615	recfeedx_7	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
616	goalratex_7	Char	64	$64.	Tube feeding goal rate (Not Done)
617	goalchangex_7	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
618	brand1x_7	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
619	feedhrsx_7	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)

Num	Variable	Type	Len	Format	Label
620	giintoledenx_7	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
621	distalconfx_7	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
622	fullcalx_7	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
623	surg_8	Num	8		Surgery
624	surgc_8	Char	7	$7.	Surgery
625	residual_8	Num	8		Elevated Residuals
626	residualc_8	Char	18	$18.	Elevated Residuals
627	const_8	Num	8		Constipation
628	constc_8	Char	12	$12.	Constipation
629	cramp_8	Num	8		Abdominal distention or cramping
630	crampc_8	Char	32	$32.	Abdominal distention or cramping
631	feedoffx_8	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
632	feedsitex_8	Char	64	$64.	Insertion site of feeding tube (Not Done)
633	tubesizex_8	Char	64	$64.	Feeding tube size (Not Done)
634	distalposx_8	Char	64	$64.	Distal position of feeding tube (Not Done)
635	proneventx_8	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
636	recfeed_8	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
637	recfeedc_8	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
638	goalrate_8	Num	8		Tube feeding goal rate
639	goalchange_8	Num	8		Did the goal rate change during the 24 hour period?
640	goalchangec_8	Char	19	$19.	Did the goal rate change during the 24 hour period?
641	newgoal_8	Num	8		Yes, new goal rate
642	brand1_8	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
643	brand1vol_8	Num	8		Total volume of enteral formula 1 infused for 24 hour period
644	brand2_8	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
645	brand2vol_8	Num	8		Total volume of enteral formula 2 infused for 24 hour period
646	feedhrs_8	Num	8		Number of hours enteral tube feeds on for this 24 hour period
647	feedoff_8	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
648	feedoffc_8	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
649	planext_8	Num	8		Planned Extubation
650	planextc_8	Char	18	$18.	Planned Extubation
651	giint_8	Num	8		GI Intolerance
652	giintc_8	Char	14	$14.	GI Intolerance
653	invbside_8	Num	8		Invasive bedside procedure
654	invbsidec_8	Char	26	$26.	Invasive bedside procedure
655	leftfloor_8	Num	8		Patient left the floor

Num	Variable	Type	Len	Format	Label
656	leftfloorc_8	Char	22	$22.	Patient left the floor
657	care_8	Num	8		Nursing Care (i.e. bathing, HOB down)
658	carec_8	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
659	medadm_8	Num	8		Medical Administration
660	medadmc_8	Char	22	$22.	Medical Administration
661	feedoffoth_8	Num	8		Other reason feed turned off:
662	feedoffothc_8	Char	5	$5.	Other reason feed turned off:
663	feedoffreas_8	Char	255	$255.	Other reason feed turned off: Reason
664	giintoleden_8	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
665	giintoledenc_8	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
666	diarrhea_8	Num	8		Diarrhea
667	diarrheac_8	Char	8	$8.	Diarrhea
668	vomiting_8	Num	8		Vomiting
669	vomitingc_8	Char	8	$8.	Vomiting
670	aspiration_8	Num	8		Aspiration
671	aspirationc_8	Char	10	$10.	Aspiration
672	regurg_8	Num	8		Regurgitation
673	regurgc_8	Char	13	$13.	Regurgitation
674	feedsite_8	Num	8		Insertion site of feeding tube
675	feedsitec_8	Char	12	$12.	Insertion site of feeding tube
676	tubesize_8	Num	8		Feeding tube size
677	tubesizec_8	Char	10	$10.	Feeding tube size
678	distalpos_8	Num	8		Distal position of feeding tube
679	distalposc_8	Char	12	$12.	Distal position of feeding tube
680	distalconf_8	Num	8		Was distal position confirmed during this 24 hour period?
681	distalconfc_8	Char	19	$19.	Was distal position confirmed during this 24 hour period?
682	distalhow_8	Num	8		Yes, how confirmed:
683	distalhowc_8	Char	15	$15.	Yes, how confirmed:
684	distaloth_8	Char	40	$40.	Yes, how confirmed: Other
685	fullcal_8	Num	8		Was rate advanced to full-calorie rate during this calendar day?
686	fullcalc_8	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
687	fullcaltm_8	Num	8	TIMEAMPM.	Yes, time full calorie reached:
688	pronevent_8	Num	8		Prone ventilation this 24 hour period?
689	proneventc_8	Char	3	$3.	Prone ventilation this 24 hour period?
690	recfeedx_8	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
691	goalratex_8	Char	64	$64.	Tube feeding goal rate (Not Done)
692	goalchangex_8	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)

Num	Variable	Type	Len	Format	Label
693	brand1x_8	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
694	feedhrsx_8	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
695	giintoledenx_8	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
696	distalconfx_8	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
697	fullcalx_8	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
698	surg_9	Num	8		Surgery
699	surgc_9	Char	7	$7.	Surgery
700	residual_9	Num	8		Elevated Residuals
701	residualc_9	Char	18	$18.	Elevated Residuals
702	const_9	Num	8		Constipation
703	constc_9	Char	12	$12.	Constipation
704	cramp_9	Num	8		Abdominal distention or cramping
705	crampc_9	Char	32	$32.	Abdominal distention or cramping
706	feedoffx_9	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
707	feedsitex_9	Char	64	$64.	Insertion site of feeding tube (Not Done)
708	tubesizex_9	Char	64	$64.	Feeding tube size (Not Done)
709	distalposx_9	Char	64	$64.	Distal position of feeding tube (Not Done)
710	proneventx_9	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
711	recfeed_9	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
712	recfeedc_9	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
713	goalrate_9	Num	8		Tube feeding goal rate
714	goalchange_9	Num	8		Did the goal rate change during the 24 hour period?
715	goalchangec_9	Char	19	$19.	Did the goal rate change during the 24 hour period?
716	newgoal_9	Num	8		Yes, new goal rate
717	brand1_9	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
718	brand1vol_9	Num	8		Total volume of enteral formula 1 infused for 24 hour period
719	brand2_9	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
720	brand2vol_9	Num	8		Total volume of enteral formula 2 infused for 24 hour period
721	feedhrs_9	Num	8		Number of hours enteral tube feeds on for this 24 hour period
722	feedoff_9	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
723	feedoffc_9	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
724	planext_9	Num	8		Planned Extubation
725	planextc_9	Char	18	$18.	Planned Extubation
726	giint_9	Num	8		GI Intolerance
727	giintc_9	Char	14	$14.	GI Intolerance
728	invbside_9	Num	8		Invasive bedside procedure

Num	Variable	Type	Len	Format	Label
729	invbsidec_9	Char	26	$26.	Invasive bedside procedure
730	leftfloor_9	Num	8		Patient left the floor
731	leftfloorc_9	Char	22	$22.	Patient left the floor
732	care_9	Num	8		Nursing Care (i.e. bathing, HOB down)
733	carec_9	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
734	medadm_9	Num	8		Medical Administration
735	medadmc_9	Char	22	$22.	Medical Administration
736	feedoffoth_9	Num	8		Other reason feed turned off:
737	feedoffothc_9	Char	5	$5.	Other reason feed turned off:
738	feedoffreas_9	Char	255	$255.	Other reason feed turned off: Reason
739	giintoleden_9	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
740	giintoledenc_9	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
741	diarrhea_9	Num	8		Diarrhea
742	diarrheac_9	Char	8	$8.	Diarrhea
743	vomiting_9	Num	8		Vomiting
744	vomitingc_9	Char	8	$8.	Vomiting
745	aspiration_9	Num	8		Aspiration
746	aspirationc_9	Char	10	$10.	Aspiration
747	regurg_9	Num	8		Regurgitation
748	regurgc_9	Char	13	$13.	Regurgitation
749	feedsite_9	Num	8		Insertion site of feeding tube
750	feedsitec_9	Char	12	$12.	Insertion site of feeding tube
751	tubesize_9	Num	8		Feeding tube size
752	tubesizec_9	Char	10	$10.	Feeding tube size
753	distalpos_9	Num	8		Distal position of feeding tube
754	distalposc_9	Char	12	$12.	Distal position of feeding tube
755	distalconf_9	Num	8		Was distal position confirmed during this 24 hour period?
756	distalconfc_9	Char	19	$19.	Was distal position confirmed during this 24 hour period?
757	distalhow_9	Num	8		Yes, how confirmed:
758	distalhowc_9	Char	15	$15.	Yes, how confirmed:
759	distaloth_9	Char	40	$40.	Yes, how confirmed: Other
760	fullcal_9	Num	8		Was rate advanced to full-calorie rate during this calendar day?
761	fullcalc_9	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
762	fullcaltm_9	Num	8	TIMEAMPM.	Yes, time full calorie reached:
763	pronevent_9	Num	8		Prone ventilation this 24 hour period?
764	proneventc_9	Char	3	$3.	Prone ventilation this 24 hour period?
765	recfeedx_9	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)

Num	Variable	Type	Len	Format	Label
766	goalratex_9	Char	64	$64.	Tube feeding goal rate (Not Done)
767	goalchangex_9	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
768	brand1x_9	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
769	feedhrsx_9	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
770	giintoledenx_9	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
771	distalconfx_9	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
772	fullcalx_9	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
773	surg_10	Num	8		Surgery
774	surgc_10	Char	7	$7.	Surgery
775	residual_10	Num	8		Elevated Residuals
776	residualc_10	Char	18	$18.	Elevated Residuals
777	const_10	Num	8		Constipation
778	constc_10	Char	12	$12.	Constipation
779	cramp_10	Num	8		Abdominal distention or cramping
780	crampc_10	Char	32	$32.	Abdominal distention or cramping
781	feedoffx_10	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
782	feedsitex_10	Char	64	$64.	Insertion site of feeding tube (Not Done)
783	tubesizex_10	Char	64	$64.	Feeding tube size (Not Done)
784	distalposx_10	Char	64	$64.	Distal position of feeding tube (Not Done)
785	proneventx_10	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
786	recfeed_10	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
787	recfeedc_10	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
788	goalrate_10	Num	8		Tube feeding goal rate
789	goalchange_10	Num	8		Did the goal rate change during the 24 hour period?
790	goalchangec_10	Char	19	$19.	Did the goal rate change during the 24 hour period?
791	newgoal_10	Num	8		Yes, new goal rate
792	brand1_10	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
793	brand1vol_10	Num	8		Total volume of enteral formula 1 infused for 24 hour period
794	brand2_10	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
795	brand2vol_10	Num	8		Total volume of enteral formula 2 infused for 24 hour period
796	feedhrs_10	Num	8		Number of hours enteral tube feeds on for this 24 hour period
797	feedoff_10	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
798	feedoffc_10	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
799	planext_10	Num	8		Planned Extubation
800	planextc_10	Char	18	$18.	Planned Extubation
801	giint_10	Num	8		GI Intolerance

Num	Variable	Type	Len	Format	Label
802	giintc_10	Char	14	$14.	GI Intolerance
803	invbside_10	Num	8		Invasive bedside procedure
804	invbsidec_10	Char	26	$26.	Invasive bedside procedure
805	leftfloor_10	Num	8		Patient left the floor
806	leftfloorc_10	Char	22	$22.	Patient left the floor
807	care_10	Num	8		Nursing Care (i.e. bathing, HOB down)
808	carec_10	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
809	medadm_10	Num	8		Medical Administration
810	medadmc_10	Char	22	$22.	Medical Administration
811	feedoffoth_10	Num	8		Other reason feed turned off:
812	feedoffothc_10	Char	5	$5.	Other reason feed turned off:
813	feedoffreas_10	Char	255	$255.	Other reason feed turned off: Reason
814	giintoleden_10	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
815	giintoledenc_10	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
816	diarrhea_10	Num	8		Diarrhea
817	diarrheac_10	Char	8	$8.	Diarrhea
818	vomiting_10	Num	8		Vomiting
819	vomitingc_10	Char	8	$8.	Vomiting
820	aspiration_10	Num	8		Aspiration
821	aspirationc_10	Char	10	$10.	Aspiration
822	regurg_10	Num	8		Regurgitation
823	regurgc_10	Char	13	$13.	Regurgitation
824	feedsite_10	Num	8		Insertion site of feeding tube
825	feedsitec_10	Char	12	$12.	Insertion site of feeding tube
826	tubesize_10	Num	8		Feeding tube size
827	tubesizec_10	Char	10	$10.	Feeding tube size
828	distalpos_10	Num	8		Distal position of feeding tube
829	distalposc_10	Char	12	$12.	Distal position of feeding tube
830	distalconf_10	Num	8		Was distal position confirmed during this 24 hour period?
831	distalconfc_10	Char	19	$19.	Was distal position confirmed during this 24 hour period?
832	distalhow_10	Num	8		Yes, how confirmed:
833	distalhowc_10	Char	15	$15.	Yes, how confirmed:
834	distaloth_10	Char	40	$40.	Yes, how confirmed: Other
835	fullcal_10	Num	8		Was rate advanced to full-calorie rate during this calendar day?
836	fullcalc_10	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
837	fullcaltm_10	Num	8	TIMEAMPM.	Yes, time full calorie reached:
838	pronevent_10	Num	8		Prone ventilation this 24 hour period?

Num	Variable	Type	Len	Format	Label
839	proneventc_10	Char	3	$3.	Prone ventilation this 24 hour period?
840	recfeedx_10	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
841	goalratex_10	Char	64	$64.	Tube feeding goal rate (Not Done)
842	goalchangex_10	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
843	brand1x_10	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
844	feedhrsx_10	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
845	giintoledenx_10	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
846	distalconfx_10	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
847	fullcalx_10	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
848	surg_11	Num	8		Surgery
849	surgc_11	Char	7	$7.	Surgery
850	residual_11	Num	8		Elevated Residuals
851	residualc_11	Char	18	$18.	Elevated Residuals
852	const_11	Num	8		Constipation
853	constc_11	Char	12	$12.	Constipation
854	cramp_11	Num	8		Abdominal distention or cramping
855	crampc_11	Char	32	$32.	Abdominal distention or cramping
856	feedoffx_11	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
857	feedsitex_11	Char	64	$64.	Insertion site of feeding tube (Not Done)
858	tubesizex_11	Char	64	$64.	Feeding tube size (Not Done)
859	distalposx_11	Char	64	$64.	Distal position of feeding tube (Not Done)
860	proneventx_11	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
861	recfeed_11	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
862	recfeedc_11	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
863	goalrate_11	Num	8		Tube feeding goal rate
864	goalchange_11	Num	8		Did the goal rate change during the 24 hour period?
865	goalchangec_11	Char	19	$19.	Did the goal rate change during the 24 hour period?
866	newgoal_11	Num	8		Yes, new goal rate
867	brand1_11	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
868	brand1vol_11	Num	8		Total volume of enteral formula 1 infused for 24 hour period
869	brand2_11	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
870	brand2vol_11	Num	8		Total volume of enteral formula 2 infused for 24 hour period
871	feedhrs_11	Num	8		Number of hours enteral tube feeds on for this 24 hour period
872	feedoff_11	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
873	feedoffc_11	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?

Num	Variable	Type	Len	Format	Label
874	planext_11	Num	8		Planned Extubation
875	planextc_11	Char	18	$18.	Planned Extubation
876	giint_11	Num	8		GI Intolerance
877	giintc_11	Char	14	$14.	GI Intolerance
878	invbside_11	Num	8		Invasive bedside procedure
879	invbsidec_11	Char	26	$26.	Invasive bedside procedure
880	leftfloor_11	Num	8		Patient left the floor
881	leftfloorc_11	Char	22	$22.	Patient left the floor
882	care_11	Num	8		Nursing Care (i.e. bathing, HOB down)
883	carec_11	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
884	medadm_11	Num	8		Medical Administration
885	medadmc_11	Char	22	$22.	Medical Administration
886	feedoffoth_11	Num	8		Other reason feed turned off:
887	feedoffothc_11	Char	5	$5.	Other reason feed turned off:
888	feedoffreas_11	Char	255	$255.	Other reason feed turned off: Reason
889	giintoleden_11	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
890	giintoledenc_11	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
891	diarrhea_11	Num	8		Diarrhea
892	diarrheac_11	Char	8	$8.	Diarrhea
893	vomiting_11	Num	8		Vomiting
894	vomitingc_11	Char	8	$8.	Vomiting
895	aspiration_11	Num	8		Aspiration
896	aspirationc_11	Char	10	$10.	Aspiration
897	regurg_11	Num	8		Regurgitation
898	regurgc_11	Char	13	$13.	Regurgitation
899	feedsite_11	Num	8		Insertion site of feeding tube
900	feedsitec_11	Char	12	$12.	Insertion site of feeding tube
901	tubesize_11	Num	8		Feeding tube size
902	tubesizec_11	Char	10	$10.	Feeding tube size
903	distalpos_11	Num	8		Distal position of feeding tube
904	distalposc_11	Char	12	$12.	Distal position of feeding tube
905	distalconf_11	Num	8		Was distal position confirmed during this 24 hour period?
906	distalconfc_11	Char	19	$19.	Was distal position confirmed during this 24 hour period?
907	distalhow_11	Num	8		Yes, how confirmed:
908	distalhowc_11	Char	15	$15.	Yes, how confirmed:
909	distaloth_11	Char	40	$40.	Yes, how confirmed: Other
910	fullcal_11	Num	8		Was rate advanced to full-calorie rate during this calendar day?

Num	Variable	Type	Len	Format	Label
911	fullcalc_11	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
912	fullcaltm_11	Num	8	TIMEAMPM.	Yes, time full calorie reached:
913	pronevent_11	Num	8		Prone ventilation this 24 hour period?
914	proneventc_11	Char	3	$3.	Prone ventilation this 24 hour period?
915	recfeedx_11	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
916	goalratex_11	Char	64	$64.	Tube feeding goal rate (Not Done)
917	goalchangex_11	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
918	brand1x_11	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
919	feedhrsx_11	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
920	giintoledenx_11	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
921	distalconfx_11	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
922	fullcalx_11	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
923	surg_12	Num	8		Surgery
924	surgc_12	Char	7	$7.	Surgery
925	residual_12	Num	8		Elevated Residuals
926	residualc_12	Char	18	$18.	Elevated Residuals
927	const_12	Num	8		Constipation
928	constc_12	Char	12	$12.	Constipation
929	cramp_12	Num	8		Abdominal distention or cramping
930	crampc_12	Char	32	$32.	Abdominal distention or cramping
931	feedoffx_12	Char	64	$64.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day? (Not Done)
932	feedsitex_12	Char	64	$64.	Insertion site of feeding tube (Not Done)
933	tubesizex_12	Char	64	$64.	Feeding tube size (Not Done)
934	distalposx_12	Char	64	$64.	Distal position of feeding tube (Not Done)
935	proneventx_12	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
936	recfeed_12	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
937	recfeedc_12	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
938	goalrate_12	Num	8		Tube feeding goal rate
939	goalchange_12	Num	8		Did the goal rate change during the 24 hour period?
940	goalchangec_12	Char	19	$19.	Did the goal rate change during the 24 hour period?
941	newgoal_12	Num	8		Yes, new goal rate
942	brand1_12	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
943	brand1vol_12	Num	8		Total volume of enteral formula 1 infused for 24 hour period
944	brand2_12	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
945	brand2vol_12	Num	8		Total volume of enteral formula 2 infused for 24 hour period
946	feedhrs_12	Num	8		Number of hours enteral tube feeds on for this 24 hour period

Num	Variable	Type	Len	Format	Label
947	feedoff_12	Num	8		Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
948	feedoffc_12	Char	61	$61.	Were tube feeds turned off for greater than 30 minutes for any part of this 24 hour period or held for the day?
949	planext_12	Num	8		Planned Extubation
950	planextc_12	Char	18	$18.	Planned Extubation
951	giint_12	Num	8		GI Intolerance
952	giintc_12	Char	14	$14.	GI Intolerance
953	invbside_12	Num	8		Invasive bedside procedure
954	invbsidec_12	Char	26	$26.	Invasive bedside procedure
955	leftfloor_12	Num	8		Patient left the floor
956	leftfloorc_12	Char	22	$22.	Patient left the floor
957	care_12	Num	8		Nursing Care (i.e. bathing, HOB down)
958	carec_12	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
959	medadm_12	Num	8		Medical Administration
960	medadmc_12	Char	22	$22.	Medical Administration
961	feedoffoth_12	Num	8		Other reason feed turned off:
962	feedoffothc_12	Char	5	$5.	Other reason feed turned off:
963	feedoffreas_12	Char	255	$255.	Other reason feed turned off: Reason
964	giintoleden_12	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
965	giintoledenc_12	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
966	diarrhea_12	Num	8		Diarrhea
967	diarrheac_12	Char	8	$8.	Diarrhea
968	vomiting_12	Num	8		Vomiting
969	vomitingc_12	Char	8	$8.	Vomiting
970	aspiration_12	Num	8		Aspiration
971	aspirationc_12	Char	10	$10.	Aspiration
972	regurg_12	Num	8		Regurgitation
973	regurgc_12	Char	13	$13.	Regurgitation
974	feedsite_12	Num	8		Insertion site of feeding tube
975	feedsitec_12	Char	12	$12.	Insertion site of feeding tube
976	tubesize_12	Num	8		Feeding tube size
977	tubesizec_12	Char	10	$10.	Feeding tube size
978	distalpos_12	Num	8		Distal position of feeding tube
979	distalposc_12	Char	12	$12.	Distal position of feeding tube
980	distalconf_12	Num	8		Was distal position confirmed during this 24 hour period?
981	distalconfc_12	Char	19	$19.	Was distal position confirmed during this 24 hour period?
982	distalhow_12	Num	8		Yes, how confirmed:

Num	Variable	Type	Len	Format	Label
983	distalhowc_12	Char	15	$15.	Yes, how confirmed:
984	distaloth_12	Char	40	$40.	Yes, how confirmed: Other
985	fullcal_12	Num	8		Was rate advanced to full-calorie rate during this calendar day?
986	fullcalc_12	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
987	fullcaltm_12	Num	8	TIMEAMPM.	Yes, time full calorie reached:
988	pronevent_12	Num	8		Prone ventilation this 24 hour period?
989	proneventc_12	Char	3	$3.	Prone ventilation this 24 hour period?
990	recfeedx_12	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
991	goalratex_12	Char	64	$64.	Tube feeding goal rate (Not Done)
992	goalchangex_12	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
993	brand1x_12	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
994	feedhrsx_12	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
995	giintoledenx_12	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
996	distalconfx_12	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
997	fullcalx_12	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
998	surg_0	Num	8		
999	n_days	Num	8		N days with feeding data
1000	n_off	Num	8		N times tube feeds turned off
1001	n_off1	Num	8		Planned Extubation
1002	n_off2	Num	8		GI Intolerance
1003	n_off3	Num	8		Invasive bedside procedure
1004	n_off4	Num	8		Surgery
1005	n_off5	Num	8		Patient left the floor
1006	n_off6	Num	8		Nursing Care
1007	n_off7	Num	8		Medical Administration
1008	n_off8	Num	8		Other
1009	nostratvar	Num	8		