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

Num	Variable	Type	Len	Format	Label
38	wdrawomega	Num	8		Was the Omega study drug permanently discontinued?
39	wdrawomegac	Char	26	$26.	Was the Omega study drug permanently discontinued?
40	wdrawomegadt	Num	8	BEST12.	Date of Omega study drug withdrawal: (Day)
41	wdraweden	Num	8		Were the EDEN study procedures permanently discontinued?
42	wdrawedenc	Char	26	$26.	Were the EDEN study procedures permanently discontinued?
43	wdrawedendt	Num	8	BEST12.	Date of EDEN study procedures discontinued: (Day)
44	aestatus	Num	8		Status of this adverse event at the time of initial AE report:
45	aestatusc	Char	31	$31.	Status of this adverse event at the time of initial AE report:
46	aerecdt	Num	8	BEST12.	If recovered, date: (Day)
47	aeoutcome	Num	8		Final outcome of this AE?
48	aeoutcomec	Char	31	$31.	Final outcome of this AE?
49	aefinrecdt	Num	8	BEST12.	If recovered: date (Day)
50	causestudy	Num	8		Causal relationship to study procedures?
51	causestudyc	Char	26	$26.	Causal relationship to study procedures?
52	causepicco	Num	8		Causal relationship to PICCO procedures?
53	causepiccoc	Char	26	$26.	Causal relationship to PICCO procedures?
54	aereviewed	Num	8		Has a site investigator reviewed this adverse event?
55	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	alta	Char	20		
6	omega	Char	20		
7	omegachar	Char	12		
8	eden	Char	20		
9	altapatient	Num	8		
10	omegapatient	Num	8		
11	edenpatient	Num	8		
12	visit	Num	8		
13	aeformidx	Num	8		Form Index
14	visitname	Char	1024	$1024.	Visit Name
15	aedt	Num	8	BEST12.	Date of the event (Day)
16	aetm	Num	8	TIMEAMPM.	Time of the event
17	protalta	Num	8		Protocol Specified ALTA AE
18	protaltac	Char	20	$20.	Protocol Specified ALTA AE
19	prottypealta	Num	8		Protocol Specified ALTA AE type
20	prottypealtac	Char	109	$109.	Protocol Specified ALTA AE type
21	protedom	Num	8		Protocol Specified EDEN/Omega AE
22	protedomc	Char	26	$26.	Protocol Specified EDEN/Omega AE
23	prottypeedom	Num	8		EDEN/Omega Contraindication
24	prottypeedomc	Char	39	$39.	EDEN/Omega Contraindication
25	costart	Char	255	$255.	Name of event if not a protocol specified event
26	aesever	Num	8		Severity of Event
27	aeseverc	Char	8	$8.	Severity of Event
28	expectalta	Num	8		Was event or severity unexpected ALTA
29	expectaltac	Char	20	$20.	Was event or severity unexpected ALTA
30	expectedom	Num	8		Was event or severity unexpected ED/OM
31	expectedomc	Char	26	$26.	Was event or severity unexpected ED/OM
32	causealta	Num	8		Causal relationship to ALTA study drug?
33	causealtac	Char	25	$25.	Causal relationship to ALTA study drug?
34	causeedom	Num	8		Causal relationship to EDEN/Omega procedures?
35	causeedomc	Char	26	$26.	Causal relationship to EDEN/Omega procedures?
36	wdrawalta	Num	8		Was the ALTA study drug permanently discontinued?

Num	Variable	Type	Len	Format	Label
37	wdrawaltac	Char	20	$20.	Was the ALTA study drug permanently discontinued?
38	wdrawaltadt	Num	8	BEST12.	Date of ALTA study drug withdrawal: (Day)
39	wdrawomega	Num	8		Was the Omega study drug permanently discontinued?
40	wdrawomegac	Char	26	$26.	Was the Omega study drug permanently discontinued?
41	wdrawomegadt	Num	8	BEST12.	Date of Omega study drug withdrawal: (Day)
42	wdraweden	Num	8		Were the EDEN study procedures permanently discontinued?
43	wdrawedenc	Char	26	$26.	Were the EDEN study procedures permanently discontinued?
44	wdrawedendt	Num	8	BEST12.	Date of EDEN study procedures discontinued: (Day)
45	aestatus	Num	8		Status of this adverse event at the time of initial AE report:
46	aestatusc	Char	31	$31.	Status of this adverse event at the time of initial AE report:
47	aerecdt	Num	8	BEST12.	If recovered, date: (Day)
48	aeoutcome	Num	8		Final outcome of this AE?
49	aeoutcomec	Char	31	$31.	Final outcome of this AE?
50	aefinrecdt	Num	8	BEST12.	If recovered: date (Day)
51	causestudy	Num	8		Causal relationship to study procedures?
52	causestudyc	Char	26	$26.	Causal relationship to study procedures?
53	causepicco	Num	8		Causal relationship to PICCO procedures?
54	causepiccoc	Char	26	$26.	Causal relationship to PICCO procedures?
55	aereviewed	Num	8		Has a site investigator reviewed this adverse event?
56	aereviewedc	Char	3	$3.	Has a site investigator reviewed this adverse event?
57	shock	Num	8		
58	body_system	Char	20		
59	aeterm	Char	255		AE Term
60	eden_numeric	Num	8		
61	omega_numeric	Num	8		
62	dummy_subject	Num	8		
63	severity	Num	8	SEVERITY.	Severity
64	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	alta	Char	20		
6	omega	Char	20		
7	omegachar	Char	12		
8	eden	Char	20		
9	altapatient	Num	8		
10	omegapatient	Num	8		
11	edenpatient	Num	8		
12	visit	Num	8		
13	aeformidx	Num	8		Form Index
14	visitname	Char	1024	$1024.	Visit Name
15	aedt	Num	8	BEST12.	Date of the event (Day)
16	aetm	Num	8	TIMEAMPM.	Time of the event
17	protalta	Num	8		Protocol Specified ALTA AE
18	protaltac	Char	20	$20.	Protocol Specified ALTA AE
19	prottypealta	Num	8		Protocol Specified ALTA AE type
20	prottypealtac	Char	109	$109.	Protocol Specified ALTA AE type
21	protedom	Num	8		Protocol Specified EDEN/Omega AE
22	protedomc	Char	26	$26.	Protocol Specified EDEN/Omega AE
23	prottypeedom	Num	8		EDEN/Omega Contraindication
24	prottypeedomc	Char	39	$39.	EDEN/Omega Contraindication
25	costart	Char	255	$255.	Name of event if not a protocol specified event
26	aesever	Num	8		Severity of Event
27	aeseverc	Char	8	$8.	Severity of Event
28	expectalta	Num	8		Was event or severity unexpected ALTA
29	expectaltac	Char	20	$20.	Was event or severity unexpected ALTA
30	expectedom	Num	8		Was event or severity unexpected ED/OM
31	expectedomc	Char	26	$26.	Was event or severity unexpected ED/OM
32	causealta	Num	8		Causal relationship to ALTA study drug?
33	causealtac	Char	25	$25.	Causal relationship to ALTA study drug?
34	causeedom	Num	8		Causal relationship to EDEN/Omega procedures?
35	causeedomc	Char	26	$26.	Causal relationship to EDEN/Omega procedures?
36	wdrawalta	Num	8		Was the ALTA study drug permanently discontinued?

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

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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	alchfreq	Num	8		How often do you have a drink containing alcohol?
14	alchfreqc	Char	27	$27.	How often do you have a drink containing alcohol?
15	alchnum	Num	8		How many drinks containing alcohol do you have on a typical day when you are drinking?
16	alchnumc	Char	10	$10.	How many drinks containing alcohol do you have on a typical day when you are drinking?
17	alch6freq	Num	8		How often do you have six or more drinks on one occasion?
18	alch6freqc	Char	21	$21.	How often do you have six or more drinks on one occasion?
19	alchstop	Num	8		How often during the last year have you found you were not able to stop drinking once you had started?
20	alchstopc	Char	21	$21.	How often during the last year have you found you were not able to stop drinking once you had started?
21	alchfail	Num	8		How often during the last year have you failed to do what was normally expected from you because of drinking?
22	alchfailc	Char	21	$21.	How often during the last year have you failed to do what was normally expected from you because of drinking?
23	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?
24	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?
25	alchguilt	Num	8		How often during the last year have you had a feeling of guilt or remorse after drinking?
26	alchguiltc	Char	21	$21.	How often during the last year have you had a feeling of guilt or remorse after drinking?
27	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?
28	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?
29	alchinjury	Num	8		Have you or someone else been injured as a result of your drinking?
30	alchinjuryc	Char	29	$29.	Have you or someone else been injured as a result of your drinking?
31	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?

Num	Variable	Type	Len	Format	Label
32	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?
33	smoker	Num	8		Ever smoker (> 100 cigarettes in lifetime)?
34	smokerc	Char	3	$3.	Ever smoker (> 100 cigarettes in lifetime)?
35	packyr	Num	8		If ever smoker, estimate pack years: (Pack years = [# packs per day] x [# years smoked])
36	cursmoker	Num	8		Current Smoker?
37	cursmokerc	Char	14	$14.	Current Smoker?
38	smokequitdt	Num	8	BEST12.	When Quit Smoking (Day)
39	alchfreqX	Char	64	$64.	How often do you have a drink containing alcohol? (Not Done)
40	alchnumX	Char	64	$64.	How many drinks containing alcohol do you have on a typical day when you are drinking? (Not Done)
41	alch6freqX	Char	64	$64.	How often do you have six or more drinks on one occasion? (Not Done)
42	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)
43	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)
44	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)
45	alchguiltX	Char	64	$64.	How often during the last year have you had a feeling of guilt or remorse after drinking? (Not Done)
46	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)
47	alchinjuryX	Char	64	$64.	Have you or someone else been injured as a result of your drinking? (Not Done)
48	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)
49	smokerX	Char	64	$64.	Ever smoker (> 100 cigarettes in lifetime) (Not Done)?
50	packyrX	Char	64	$64.	If ever smoker, estimate pack years: (Not Done)
51	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	doseindex	Num	8		Dose index
13	visitname	Char	1024	$1024.	Visit Name
14	altadose	Num	8		ALTA Dose:
15	altadosec	Char	20	$20.	ALTA Dose:
16	altanodose	Num	8		Dose None, select reason
17	altanodosec	Char	61	$61.	Dose None, select reason
18	altanodoseoth	Char	255	$255.	If dose "other", indicate reason
19	altadosetm	Num	8	TIMEAMPM.	Time dose initiated:
20	altadosecomp	Num	8		Was dose completed?
21	altadosecompc	Char	18	$18.	Was dose completed?
22	altastopreas	Num	8		Dose not completed, select reason
23	altastopreasc	Char	61	$61.	Dose not completed, select reason
24	altastopoth	Char	255	$255.	If "other", indicate reason
25	hrpre	Num	8		HR-pre:
26	hrpost	Num	8		HR-post:
27	hrmax	Num	8		Max HR from time of aerosolization to 15 min
28	sbppre	Num	8		SBP-pre:
29	sbppost	Num	8		SBP-post:
30	altadosex	Char	64	$64.	ALTA Dose: (Not Done)
31	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	abg24	Num	8		Were any ABGs completed in the 24 hours preceding randomization?
14	abg24c	Char	3	$3.	Were any ABGs completed in the 24 hours preceding randomization?
15	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	abgidx	Num	8		Form index
13	visitname	Char	1024	$1024.	Visit Name
14	fio2abg	Num	8		FiO2:
15	pao2abg	Num	8		PaO2 (mmHg):
16	paco2abg	Num	8		PaCO2 (mmHg):
17	phabg	Num	8		pH:
18	intubat	Num	8		Intubated when ABG obtained:
19	intubatc	Char	3	$3.	Intubated when ABG obtained:
20	fio2abgx	Char	64	$64.	FiO2: (Not Done)
21	pao2abgX	Char	64	$64.	PaO2 (mmHg): (Not Done)
22	paco2abgX	Char	64	$64.	PaCO2 (mmHg): (Not Done)
23	phabgX	Char	64	$64.	pH: (Not Done)
24	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	hasddt	Num	8	BEST12.	Hospital Admission Date (Day)
14	admtype	Num	8		Hospital Admission Type
15	admtypec	Char	20	$20.	Hospital Admission Type
16	admother	Char	50	$50.	Hospital Admission Type: Other
17	icudt	Num	8	BEST12.	ICU Admission Date (Day)
18	icutm	Num	8	TIMEAMPM.	Time of ICU Admission
19	admitfrom	Num	8		Patient Admitted Directly From
20	admitfromc	Char	25	$25.	Patient Admitted Directly From
21	reside	Num	8		Place of residence prior to hospitalization
22	residec	Char	63	$63.	Place of residence prior to hospitalization
23	surgel	Num	8		Patient post-operative elective surgery?
24	surgelc	Char	3	$3.	Patient post-operative elective surgery?
25	icureadmit	Num	8		ICU Readmit
26	icureadmitc	Char	3	$3.	ICU Readmit
27	readmit24	Num	8		ICU Readmit within 24 hours
28	readmit24c	Char	3	$3.	ICU Readmit within 24 hours
29	healthinfo	Num	8		Chronic health information available
30	healthinfoc	Char	3	$3.	Chronic health information available
31	chrondial	Num	8		Patient on chronic or peritoneal dialysis
32	chrondialc	Char	3	$3.	Patient on chronic or peritoneal dialysis
33	aids	Num	8		AIDS (does not include only HIV +)
34	aidsc	Char	3	$3.	AIDS (does not include only HIV +)
35	leuk	Num	8		Leukemia (AML, CML, ALL, multiple myeloma)
36	leukc	Char	3	$3.	Leukemia (AML, CML, ALL, multiple myeloma)

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

Num	Variable	Type	Len	Format	Label
76	icureadmitX	Char	64	$64.	ICU Readmit (Not Done)
77	readmit24X	Char	64	$64.	ICU Readmit within 24 hours (Not Done)
78	healthinfoX	Char	64	$64.	Chronic health information available (Not Done)
79	chrondialX	Char	64	$64.	Patient on chronic or peritoneal dialysis (Not Done)
80	aidsX	Char	64	$64.	AIDS (does not include only HIV +) (Not Done)
81	leukX	Char	64	$64.	Leukemia (AML, CML, ALL, multiple myeloma) (Not Done)
82	lymphX	Char	64	$64.	Non-Hodgekins Lymphoma (Not Done)
83	tumorX	Char	64	$64.	Solid tumor with metastasis (Not Done)
84	immuneX	Char	64	$64.	Immune Suppression w/in past 6 mths (Not Done)
85	hepaX	Char	64	$64.	Hepatic Failure with coma or encephalo. (Not Done)
86	cirrX	Char	64	$64.	Cirrhosis (Not Done)
87	diabX	Char	64	$64.	Diabetes Mellitus (Not Done)
88	hyperX	Char	64	$64.	History of hypertension (Not Done)
89	myocardX	Char	64	$64.	Prior myocardial infarction (Not Done)
90	heartX	Char	64	$64.	Congestive heart failure (Not Done)
91	vascularX	Char	64	$64.	Peripheral Vascular Disease (Not Done)
92	aestrokeX	Char	64	$64.	Prior stroke with Sequel AE (Not Done)
93	dementiaX	Char	64	$64.	Dementia (Not Done)
94	chrpulmX	Char	64	$64.	Chronic pulmonary disease (Not Done)
95	arthritisX	Char	64	$64.	Arthritis (Not Done)
96	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
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	Num	8		Urine output for 24 hours preceding randomization
28	fluidout	Num	8		Total fluid output last 24 hours
29	fluidin	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)

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

Num	Variable	Type	Len	Format	Label
37	sodiumh	Num	8		Serum Sodium: Highest (mEq/L)
38	potaso	Num	8		Serum Potassium: Only (mEq/L)
39	potasl	Num	8		Serum Potassium: Lowest (mEq/L)
40	potash	Num	8		Serum Potassium: Highest (mEq/L)
41	bun	Num	8		Serum BUN (highest): (mg/dL)
42	creato	Num	8		Serum Creatinine Only: (mg/dL)
43	creatl	Num	8		Serum Creatinine Lowest: (mg/dL)
44	creath	Num	8		Serum Creatinine Highest: (mg/dL)
45	gluco	Num	8		Serum Glucose Only: (mg/dL)
46	glucl	Num	8		Serum Glucose Lowest: (mg/dL)
47	gluch	Num	8		Serum Glucose Highest: (mg/dL)
48	albumo	Num	8		Serum Albumin Only: (g/dL)
49	albuml	Num	8		Serum Albumin Lowest: (g/dL)
50	albumh	Num	8		Serum Albumin Highest: (g/dL)
51	bilih	Num	8		Serum Bilirubin Highest: (mg/dL)
52	bicarbl	Num	8		Serum Bicarbonate Lowest: (mEq/L)
53	tempX	Char	64	$64.	Highest Temperature in Clecius (Not Done)
54	sysbpX	Char	64	$64.	Highest Systolic BP (Not Done)
55	mapX	Char	64	$64.	Highest Mean Arterial Pressure (Not Done)
56	hrateX	Char	64	$64.	Highest Heart Rate (beats/min) (Not Done)
57	resphlX	Char	64	$64.	Highest Respiratory Rate (breaths/min) (Not Done)
58	ventlX	Char	64	$64.	Patient ventilated at lowest resp. rate (Not Done)
59	venthX	Char	64	$64.	Patient ventilated at highest resp. rate (Not Done)
60	urineoutX	Char	64	$64.	Urine output for 24 hours preceding randomization (Not Done)
61	fluidoutX	Char	64	$64.	Total fluid output last 24 hours (Not Done)
62	fluidinX	Char	64	$64.	Total fluid intake for the 24 hours preceding randomization (Not Done)
63	hctX	Char	64	$64.	Hct: (Not Done)
64	wbcX	Char	64	$64.	WBC: (Not Done)
65	plateX	Char	64	$64.	Platelets (lowest): x 1000 / mm^3 (Not Done)
66	sodiumX	Char	64	$64.	Serum Sodium (mEq/L) (Not Done)
67	potasX	Char	64	$64.	Serum Potassium (mEq/L) (Not Done)
68	bunX	Char	64	$64.	Serum BUN (highest): (mg/dL) (Not Done)
69	creatX	Char	64	$64.	Serum Creatinine: (mg/dL) (Not Done)
70	glucX	Char	64	$64.	Serum Glucose: (mg/dL) (Not Done)
71	albumX	Char	64	$64.	Serum Albumin: (g/dL) (Not Done)
72	bilihX	Char	64	$64.	Serum Bilirubin Highest: (mg/dL) (Not Done)
73	bicarblx	Char	64	$64.	Serum Bicarbonate Lowest: (mEq/L) (Not Done)
74	prbc24_1	Num	8		PRBC given in last 24 hours
75	ffp24_1	Num	8		FFP given in last 24 hours

Num	Variable	Type	Len	Format	Label
76	notedenpt_1	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
77	notedenptc_1	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
78	entfeedvol_1	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
79	fluidinx_1	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
80	fluidoutx_1	Char	64	$64.	Total fluid out last 24 hours (Not Done)
81	urineoutx_1	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
82	fluidin_1	Num	8		Total Fluid Intake in last 24h
83	fluidout_1	Num	8		Total fluid out last 24 hours
84	urineout_1	Num	8		Total urine output in the last 24 hours
85	prbc24_2	Num	8		PRBC given in last 24 hours
86	ffp24_2	Num	8		FFP given in last 24 hours
87	notedenpt_2	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
88	notedenptc_2	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
89	entfeedvol_2	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
90	fluidinx_2	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
91	fluidoutx_2	Char	64	$64.	Total fluid out last 24 hours (Not Done)
92	urineoutx_2	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
93	fluidin_2	Num	8		Total Fluid Intake in last 24h
94	fluidout_2	Num	8		Total fluid out last 24 hours
95	urineout_2	Num	8		Total urine output in the last 24 hours
96	prbc24_3	Num	8		PRBC given in last 24 hours
97	ffp24_3	Num	8		FFP given in last 24 hours
98	notedenpt_3	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
99	notedenptc_3	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
100	entfeedvol_3	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
101	fluidinx_3	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
102	fluidoutx_3	Char	64	$64.	Total fluid out last 24 hours (Not Done)
103	urineoutx_3	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
104	fluidin_3	Num	8		Total Fluid Intake in last 24h
105	fluidout_3	Num	8		Total fluid out last 24 hours
106	urineout_3	Num	8		Total urine output in the last 24 hours
107	prbc24_4	Num	8		PRBC given in last 24 hours
108	ffp24_4	Num	8		FFP given in last 24 hours
109	notedenpt_4	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
110	notedenptc_4	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
111	entfeedvol_4	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
112	fluidinx_4	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
113	fluidoutx_4	Char	64	$64.	Total fluid out last 24 hours (Not Done)
114	urineoutx_4	Char	64	$64.	Total urine output in the last 24 hours (Not Done)

Num	Variable	Type	Len	Format	Label
115	fluidin_4	Num	8		Total Fluid Intake in last 24h
116	fluidout_4	Num	8		Total fluid out last 24 hours
117	urineout_4	Num	8		Total urine output in the last 24 hours
118	prbc24_5	Num	8		PRBC given in last 24 hours
119	ffp24_5	Num	8		FFP given in last 24 hours
120	notedenpt_5	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
121	notedenptc_5	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
122	entfeedvol_5	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
123	fluidinx_5	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
124	fluidoutx_5	Char	64	$64.	Total fluid out last 24 hours (Not Done)
125	urineoutx_5	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
126	fluidin_5	Num	8		Total Fluid Intake in last 24h
127	fluidout_5	Num	8		Total fluid out last 24 hours
128	urineout_5	Num	8		Total urine output in the last 24 hours
129	prbc24_6	Num	8		PRBC given in last 24 hours
130	ffp24_6	Num	8		FFP given in last 24 hours
131	notedenpt_6	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
132	notedenptc_6	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
133	entfeedvol_6	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
134	fluidinx_6	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
135	fluidoutx_6	Char	64	$64.	Total fluid out last 24 hours (Not Done)
136	urineoutx_6	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
137	fluidin_6	Num	8		Total Fluid Intake in last 24h
138	fluidout_6	Num	8		Total fluid out last 24 hours
139	urineout_6	Num	8		Total urine output in the last 24 hours
140	prbc24_7	Num	8		PRBC given in last 24 hours
141	ffp24_7	Num	8		FFP given in last 24 hours
142	notedenpt_7	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
143	notedenptc_7	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
144	entfeedvol_7	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
145	fluidinx_7	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
146	fluidoutx_7	Char	64	$64.	Total fluid out last 24 hours (Not Done)
147	urineoutx_7	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
148	fluidin_7	Num	8		Total Fluid Intake in last 24h
149	fluidout_7	Num	8		Total fluid out last 24 hours
150	urineout_7	Num	8		Total urine output in the last 24 hours
151	prbc24_8	Num	8		PRBC given in last 24 hours
152	ffp24_8	Num	8		FFP given in last 24 hours
153	notedenpt_8	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?

Num	Variable	Type	Len	Format	Label
154	notedenptc_8	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
155	entfeedvol_8	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
156	fluidinx_8	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
157	fluidoutx_8	Char	64	$64.	Total fluid out last 24 hours (Not Done)
158	urineoutx_8	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
159	fluidin_8	Num	8		Total Fluid Intake in last 24h
160	fluidout_8	Num	8		Total fluid out last 24 hours
161	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	afibhist	Num	8		Does the patient have a history of chronic or recurrent atrial fibrulation?
14	afibhistc	Char	3	$3.	Does the patient have a history of chronic or recurrent atrial fibrulation?
15	afibadmit	Num	8		Was the cardiac rhythm at the time of study hospital admission atrial fibrillation?
16	afibadmitc	Char	3	$3.	Was the cardiac rhythm at the time of study hospital admission atrial fibrillation?
17	atfibnew	Num	8		Did the patient develop new atrial fibrillation during the study hospitalization and prior to ICU discharge?
18	afibnewc	Char	4	$4.	Did the patient develop new atrial fibrillation during the study hospitalization and prior to ICU discharge?
19	afibdays	Num	8		Number of days on which new atrial fibrillation occurred
20	afibpre	Num	8		Before first dose of study drug was administered
21	afibprec	Char	49	$49.	Before first dose of study drug was administered
22	afibduring	Num	8		During the days on which study drug was administered
23	afibduringc	Char	53	$53.	During the days on which study drug was administered
24	tfibpost	Num	8		More than 4 hours after the last dose of study drug was administered
25	afibpostc	Char	69	$69.	More than 4 hours after the last dose of study drug was administered
26	afibdccard	Num	8		DC cardioversion
27	afibdccardc	Char	16	$16.	DC cardioversion
28	afibvaso	Num	8		Vasopressor for hypotension that occurred after onset of atrial fibrillation
29	afibvasoc	Char	75	$75.	Vasopressor for hypotension that occurred after onset of atrial fibrillation
30	afibbeta	Num	8		Beta Blocker
31	afibbetac	Char	12	$12.	Beta Blocker
32	afibamid	Num	8		Amiodarone
33	afibamidc	Char	10	$10.	Amiodarone
34	afibantic	Num	8		Anticoagulation
35	afibanticc	Char	15	$15.	Anticoagulation

Num	Variable	Type	Len	Format	Label
36	afibdig	Num	8		Digoxin
37	afibdigc	Char	7	$7.	Digoxin
38	afibdilt	Num	8		Diltiazem
39	afibdiltc	Char	9	$9.	Diltiazem
40	afibtreat	Num	8		Was chronic or new onset atrial fibrillation treated prior to ICU discharge?
41	afibtreatc	Char	4	$4.	Was chronic or new onset atrial fibrillation treated prior to ICU discharge?
42	afibadmitx	Char	64	$64.	Was the cardiac rhythm at the time of study hospital admission atrial fibrillation? (Not Done)
43	afibnewx	Char	64	$64.	Did the patient develop new atrial fibrillation during the study hospitalization and prior to ICU discharge? (Not Done)
44	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	bal0	Num	8		Mini-BAL completed?
14	bal0c	Char	20	$20.	Mini-BAL completed?
15	baldt0	Num	8	BEST12.	Date Mini-BAL completed (Day)
16	balnotreas0	Char	255	$255.	Reason Mini-BAL not completed
17	balvolin0	Num	8		Volume instilled
18	balvolout0	Num	8		Volume returned
19	balinr0	Num	8		INR value obtained within the 36 hours prior to BAL?
20	balinr0c	Char	24	$24.	INR value obtained within the 36 hours prior to BAL?
21	balinrle2_0	Num	8		Was INR value <= 2.0?
22	balinrle2_0c	Char	23	$23.	Was INR value <= 2.0?
23	balplate0	Num	8		Platelet value obtained in the 36 hours prior to BAL?
24	balplate0c	Char	53	$53.	Platelet value obtained in the 36 hours prior to BAL?
25	balplatege5_0	Num	8		Was platelet value >= 50*10^3/mm^3?
26	balplatege5_0c	Char	23	$23.	Was platelet value >= 50*10^3/mm^3?
27	bal3	Num	8		Mini-BAL completed?
28	bal3c	Char	20	$20.	Mini-BAL completed?
29	baldt3	Num	8	BEST12.	Date Mini-BAL completed (Day)
30	balnotreas3	Char	255	$255.	Reason Mini-BAL not completed
31	balvolin3	Num	8		Volume instilled
32	balvolout3	Num	8		Volume returned
33	balinr3	Num	8		INR value obtained within the 36 hours prior to BAL?
34	balinr3c	Char	24	$24.	INR value obtained within the 36 hours prior to BAL?
35	balinrle2_3	Num	8		Was INR value <= 2.0?
36	balinrle2_3c	Char	23	$23.	Was INR value <= 2.0?

Num	Variable	Type	Len	Format	Label
37	balplate3	Num	8		Platelet value obtained in the 36 hours prior to BAL?
38	balplate3c	Char	53	$53.	Platelet value obtained in the 36 hours prior to BAL?
39	balplatege5_3	Num	8		Was platelet value >= 50*10^3/mm^3?
40	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	hgb	Num	8		Hgb (g/dL)
14	sodium	Num	8		Sodium (mEq/L):
15	potas	Num	8		Postassium (mEq/L)
16	gluc	Num	8		Glucose (mg/dL):
17	bicarb	Num	8		Serum Bicarb (mEq/L):
18	phos	Num	8		Serum Phosphorous (mg/dL)
19	mg	Num	8		Serum Magnesium (mEq/L)
20	protein	Num	8		Total Protein (g/dL)
21	album	Num	8		Albumin (g/dL):
22	glucmin	Num	8		Lowest glucose this day:
23	prothrombin	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	Char	64	$64.	Serum Phosphorous (mg/dL) (Not Done)
30	mgx	Char	64	$64.	Serum Magnesium (mEq/L) (Not Done)
31	proteinx	Char	64	$64.	Total Protein (g/dL) (Not Done)
32	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	hgb	Num	8		Hgb (g/dL)
14	sodium	Num	8		Sodium (mEq/L):
15	potas	Num	8		Postassium (mEq/L)
16	gluc	Num	8		Glucose (mg/dL):
17	bicarb	Num	8		Serum Bicarb (mEq/L):
18	phos	Num	8		Serum Phosphorous (mg/dL)
19	mg	Num	8		Serum Magnesium (mEq/L)
20	protein	Num	8		Total Protein (g/dL)
21	album	Num	8		Albumin (g/dL):
22	glucmin	Num	8		Lowest glucose this day:
23	prothrombin	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	Char	64	$64.	Serum Phosphorous (mg/dL) (Not Done)
30	mgx	Char	64	$64.	Serum Magnesium (mEq/L) (Not Done)
31	proteinx	Char	64	$64.	Total Protein (g/dL) (Not Done)
32	albumx	Char	64	$64.	Albumin (g/dL): (Not Done)
33	alt	Num	8		ALT
34	ast	Num	8		AST
35	ck	Num	8		CK
36	crp	Num	8		CRP

Num	Variable	Type	Len	Format	Label
37	crphl	Num	8		High sensitivity or regular CRP
38	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	simv	Num	8		SIMV
14	simvc	Char	4	$4.	SIMV
15	prvc	Num	8		PRVC (pressure regulated volume control) or equivalent
16	prvc2	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
17	pressup	Num	8		Pressure Support (y/n)
18	pressupc	Char	16	$16.	Pressure Support (y/n)
19	pressupcmH2O	Num	8		Pressure Support cmH2O
20	volassist	Num	8		Volume Assist/Control
21	volassistc	Char	21	$21.	Volume Assist/Control
22	presassist	Num	8		Pressure Assist (y/n)
23	presassistc	Char	15	$15.	Pressure Assist (y/n)
24	presascmH2O	Num	8		Pressure Assist cmH2O
25	pcirv	Num	8		PC IRV
26	pcirvc	Char	6	$6.	PC IRV
27	aprv	Num	8		Airway Pressure Release Ventilation (APRV)
28	aprvc	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
29	ventoth	Num	8		Other vent mode
30	ventothc	Char	5	$5.	Other vent mode
31	hfov	Num	8		HFOV
32	hfovc	Char	4	$4.	HFOV
33	othvent	Char	255	$255.	Enter other vent mode:
34	tidal	Num	8		Calculated Delivered Tidal Volume
35	setrate	Num	8		Set Rate
36	resp	Num	8		Total Respiratory Rate

Num	Variable	Type	Len	Format	Label
37	minvent	Num	8		Total Minute Ventilation (L/min)
38	peep	Num	8		PEEP (cm H2O):
39	fio2	Num	8		FiO2 prior to randomization
40	SpO2	Num	8		SpO2 prior to randomization
41	pplat	Num	8		Plateau Pressure (cm H2O):
42	pip	Num	8		Peak Inspiratory Pressure
43	meanair	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	Num	8		FiO2 at time of ABG:
48	pao2abg	Num	8		PaO2 (cm H20):
49	paco2abg	Num	8		PaCO2 (cm H20):
50	phabg	Num	8		Arterial pH:
51	spo2abg	Num	8		SpO2 at time of ABG
52	ventX	Char	64	$64.	Vent Mode (Not Done)
53	tidalx	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	Char	64	$64.	PEEP (cm H2O): (Not Done)
57	fio2x	Char	64	$64.	FiO2 prior to randomization (Not Done)
58	SpO2x	Char	64	$64.	SpO2 prior to randomization (Not Done)
59	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	hrate	Num	8		Heart Rate (beats/min):
14	sysbp	Num	8		Systolic BP (mmHg):
15	diabp	Num	8		Diastolic BP (mmHg)
16	cvp	Num	8		Central Venous Pressure (mmHg):
17	map	Num	8		Mean Arterial Pressure (mmHg):
18	temp	Num	8		Temperature (C)
19	height	Num	8		Measured Height (cm)
20	weight	Num	8		Measured Weight (Kg)
21	pbw	Char	255	$255.	Predicted Body Weight
22	vaso	Num	8		IV Vasopressors or inotropes in 24 hrs preceding randomization
23	vasoc	Char	3	$3.	IV Vasopressors or inotropes in 24 hrs preceding randomization
24	dobut	Num	8		Dobutamine Infusion Rate
25	dobutu	Char	9	$9.	Dobutamine Units
26	dopa	Num	8		Dopamine Infusion Rate:
27	dopau	Char	9	$9.	Dopamine Units
28	norepi	Num	8		Norepinephrine Infusion Rate
29	norepiu	Char	9	$9.	Norepinephrine Units
30	epi	Num	8		Epinephrine Infusion Rate
31	epiu	Char	9	$9.	Epinephrine Units
32	vasorate	Num	8		Vasopressin Infusion Rate
33	neosyn	Num	8		Neosynephrine (phenylephrine) Infusion Rate
34	neosynu	Char	9	$9.	Neosynephrine (phenylephrine) Units
35	vasooth	Char	50	$50.	Other Vasopressor
36	betablock	Num	8		Beta blockers (IV, PO, PGT) in 24 hours preceding randomization?

Num	Variable	Type	Len	Format	Label
37	betablockc	Char	3	$3.	Beta blockers (IV, PO, PGT) in 24 hours preceding randomization?
38	hratex	Char	64	$64.	Heart Rate (beats/min): (Not done)
39	sysbpx	Char	64	$64.	Systolic BP (mmHg): (Not Done)
40	diabpx	Char	64	$64.	Diastolic BP (mmHg) (Not Done)
41	tempx	Char	64	$64.	Temperature (C) (Not Done)
42	heightx	Char	64	$64.	Measured Height (cm) (Not Done)
43	vasox	Char	64	$64.	IV Vasopressors or inotropes in 24 hrs preceding randomization (Not Done)
44	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	index	Num	8		Form index
13	visitname	Char	1024	$1024.	Visit Name
14	bcdt	Num	8	BEST12.	Date and time of new positive blood culture: (Day)
15	bctm	Num	8	TIME5.	Date and time of new positive blood culture: (Time)
16	bcorg	Num	8		Organism
17	bcorgc	Char	29	$29.	Organism
18	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	brussdt0	Num	8	BEST12.	Day 0 Date (Day)
14	systbp0	Num	8		Day 0 Systolic BP
15	pf0	Num	8		Day 0 PaO2/FiO2
16	plate0	Num	8		Day 0 Platelets x1000
17	creat0	Num	8		Day 0 Creatinine
18	bili0	Num	8		Day 0 Bilirubin
19	vaso0	Num	8		Day 0 Vasopressor
20	vaso0c	Char	3	$3.	Day 0 Vasopressor
21	brussdtX0	Char	64	$64.	Day 0 Date (Not Done)
22	brussX0	Char	64	$64.	Day 0 Brussels (Not Done)
23	brussdt1	Num	8	BEST12.	Day 1 Date (Day)
24	systbp1	Num	8		Day 1 Systolic BP
25	pf1	Num	8		Day 1 PaO2/FiO2
26	plate1	Num	8		Day 1 Platelets x1000
27	creat1	Num	8		Day 1 Creatinine
28	bili1	Num	8		Day 1 Bilirubin
29	vaso1	Num	8		Day 1 Vasopressor
30	vaso1c	Char	3	$3.	Day 1 Vasopressor
31	brussdtX1	Char	64	$64.	Day 1 Date (Not Done)
32	brussX1	Char	64	$64.	Day 1 Brussels (Not Done)
33	brussdt2	Num	8	BEST12.	Day 2 Date (Day)
34	systbp2	Num	8		Day 2 Systolic BP
35	pf2	Num	8		Day 2 PaO2/FiO2
36	plate2	Num	8		Day 2 Platelets x1000

Num	Variable	Type	Len	Format	Label
37	creat2	Num	8		Day 2 Creatinine
38	bili2	Num	8		Day 2 Bilirubin
39	vaso2	Num	8		Day 2 Vasopressor
40	vaso2c	Char	3	$3.	Day 2 Vasopressor
41	brussdtX2	Char	64	$64.	Day 2 Date (Not Done)
42	brussX2	Char	64	$64.	Day 2 Brussels (Not Done)
43	brussdt3	Num	8	BEST12.	Day 3 Date (Day)
44	systbp3	Num	8		Day 3 Systolic BP
45	pf3	Num	8		Day 3 PaO2/FiO2
46	plate3	Num	8		Day 3 Platelets x1000
47	creat3	Num	8		Day 3 Creatinine
48	bili3	Num	8		Day 3 Bilirubin
49	vaso3	Num	8		Day 3 Vasopressor
50	vaso3c	Char	3	$3.	Day 3 Vasopressor
51	brussdtX3	Char	64	$64.	Day 3 Date (Not Done)
52	brussX3	Char	64	$64.	Day 3 Brussels (Not Done)
53	brussdt4	Num	8	BEST12.	Day 4 Date (Day)
54	systbp4	Num	8		Day 4 Systolic BP
55	pf4	Num	8		Day 4 PaO2/FiO2
56	plate4	Num	8		Day 4 Platelets x1000
57	creat4	Num	8		Day 4 Creatinine
58	bili4	Num	8		Day 4 Bilirubin
59	vaso4	Num	8		Day 4 Vasopressor
60	vaso4c	Char	3	$3.	Day 4 Vasopressor
61	brussdtX4	Char	64	$64.	Day 4 Date (Not Done)
62	brussX4	Char	64	$64.	Day 4 Brussels (Not Done)
63	brussdt5	Num	8	BEST12.	Day 5 Date (Day)
64	systbp5	Num	8		Day 5 Systolic BP
65	pf5	Num	8		Day 5 PaO2/FiO2
66	plate5	Num	8		Day 5 Platelets x1000
67	creat5	Num	8		Day 5 Creatinine
68	bili5	Num	8		Day 5 Bilirubin
69	vaso5	Num	8		Day 5 Vasopressor
70	vaso5c	Char	3	$3.	Day 5 Vasopressor
71	brussdtX5	Char	64	$64.	Day 5 Date (Not Done)
72	brussX5	Char	64	$64.	Day 5 Brussels (Not Done)
73	brussdt6	Num	8	BEST12.	Day 6 Date (Day)
74	systbp6	Num	8		Day 6 Systolic BP
75	pf6	Num	8		Day 6 PaO2/FiO2

Num	Variable	Type	Len	Format	Label
76	plate6	Num	8		Day 6 Platelets x1000
77	creat6	Num	8		Day 6 Creatinine
78	bili6	Num	8		Day 6 Bilirubin
79	vaso6	Num	8		Day 6 Vasopressor
80	vaso6c	Char	3	$3.	Day 6 Vasopressor
81	brussdtX6	Char	64	$64.	Day 6 Date (Not Done)
82	brussX6	Char	64	$64.	Day 6 Brussels (Not Done)
83	brussdt7	Num	8	BEST12.	Day 7 Date (Day)
84	systbp7	Num	8		Day 7 Systolic BP
85	pf7	Num	8		Day 7 PaO2/FiO2
86	plate7	Num	8		Day 7 Platelets x1000
87	creat7	Num	8		Day 7 Creatinine
88	bili7	Num	8		Day 7 Bilirubin
89	vaso7	Num	8		Day 7 Vasopressor
90	vaso7c	Char	3	$3.	Day 7 Vasopressor
91	brussdtX7	Char	64	$64.	Day 7 Date (Not Done)
92	brussX7	Char	64	$64.	Day 7 Brussels (Not Done)
93	brussdt8	Num	8	BEST12.	Day 8 Date (Day)
94	systbp8	Num	8		Day 8 Systolic BP
95	pf8	Num	8		Day 8 PaO2/FiO2
96	plate8	Num	8		Day 8 Platelets x1000
97	creat8	Num	8		Day 8 Creatinine
98	bili8	Num	8		Day 8 Bilirubin
99	vaso8	Num	8		Day 8 Vasopressor
100	vaso8c	Char	3	$3.	Day 8 Vasopressor
101	brussdtX8	Char	64	$64.	Day 8 Date (Not Done)
102	brussX8	Char	64	$64.	Day 8 Brussels (Not Done)
103	brussdt9	Num	8	BEST12.	Day 9 Date (Day)
104	systbp9	Num	8		Day 9 Systolic BP
105	pf9	Num	8		Day 9 PaO2/FiO2
106	plate9	Num	8		Day 9 Platelets x1000
107	creat9	Num	8		Day 9 Creatinine
108	bili9	Num	8		Day 9 Bilirubin
109	vaso9	Num	8		Day 9 Vasopressor
110	vaso9c	Char	3	$3.	Day 9 Vasopressor
111	brussdtX9	Char	64	$64.	Day 9 Date (Not Done)
112	brussX9	Char	64	$64.	Day 9 Brussels (Not Done)
113	brussdt10	Num	8	BEST12.	Day 10 Date (Day)
114	systbp10	Num	8		Day 10 Systolic BP

Num	Variable	Type	Len	Format	Label
115	pf10	Num	8		Day 10 PaO2/FiO2
116	plate10	Num	8		Day 10 Platelets x1000
117	creat10	Num	8		Day 10 Creatinine
118	bili10	Num	8		Day 10 Bilirubin
119	vaso10	Num	8		Day 10 Vasopressor
120	vaso10c	Char	3	$3.	Day 10 Vasopressor
121	brussdtX10	Char	64	$64.	Day 10 Date (Not Done)
122	brussX10	Char	64	$64.	Day 10 Brussels (Not Done)
123	brussdt11	Num	8	BEST12.	Day 11 Date (Day)
124	systbp11	Num	8		Day 11 Systolic BP
125	pf11	Num	8		Day 11 PaO2/FiO2
126	plate11	Num	8		Day 11 Platelets x1000
127	creat11	Num	8		Day 11 Creatinine
128	bili11	Num	8		Day 11 Bilirubin
129	vaso11	Num	8		Day 11 Vasopressor
130	brussdtX11	Char	64	$64.	Day 11 Date (Not Done)
131	brussX11	Char	64	$64.	Day 11 Brussels (Not Done)
132	vaso11c	Char	3	$3.	Day 11 Vasopressor
133	brussdt12	Num	8	BEST12.	Day 12 Date (Day)
134	systbp12	Num	8		Day 12 Systolic BP
135	pf12	Num	8		Day 12 PaO2/FiO2
136	plate12	Num	8		Day 12 Platelets x1000
137	creat12	Num	8		Day 12 Creatinine
138	bili12	Num	8		Day 12 Bilirubin
139	vaso12	Num	8		Day 12 Vasopressor
140	vaso12c	Char	3	$3.	Day 12 Vasopressor
141	brussdtX12	Char	64	$64.	Day 12 Date (Not Done)
142	brussX12	Char	64	$64.	Day 12 Brussels (Not Done)
143	brussdt13	Num	8	BEST12.	Day 13 Date (Day)
144	systbp13	Num	8		Day 13 Systolic BP
145	pf13	Num	8		Day 13 PaO2/FiO2
146	plate13	Num	8		Day 13 Platelets x1000
147	creat13	Num	8		Day 13 Creatinine
148	bili13	Num	8		Day 13 Bilirubin
149	vaso13	Num	8		Day 13 Vasopressor
150	vaso13c	Char	3	$3.	Day 13 Vasopressor
151	brussdtX13	Char	64	$64.	Day 13 Date (Not Done)
152	brussX13	Char	64	$64.	Day 13 Brussels (Not Done)
153	brussdt14	Num	8	BEST12.	Day 14 Date (Day)

Num	Variable	Type	Len	Format	Label
154	systbp14	Num	8		Day 14 Systolic BP
155	pf14	Num	8		Day 14 PaO2/FiO2
156	plate14	Num	8		Day 14 Platelets x1000
157	creat14	Num	8		Day 14 Creatinine
158	bili14	Num	8		Day 14 Bilirubin
159	vaso14	Num	8		Day 14 Vasopressor
160	vaso14c	Char	3	$3.	Day 14 Vasopressor
161	brussdtX14	Char	64	$64.	Day 14 Date (Not Done)
162	brussX14	Char	64	$64.	Day 14 Brussels (Not Done)
163	brussdt15	Num	8	BEST12.	Day 15 Date (Day)
164	systbp15	Num	8		Day 15 Systolic BP
165	pf15	Num	8		Day 15 PaO2/FiO2
166	plate15	Num	8		Day 15 Platelets x1000
167	creat15	Num	8		Day 15 Creatinine
168	bili15	Num	8		Day 15 Bilirubin
169	vaso15	Num	8		Day 15 Vasopressor
170	vaso15c	Char	3	$3.	Day 15 Vasopressor
171	brussdtX15	Char	64	$64.	Day 15 Date (Not Done)
172	brussX15	Char	64	$64.	Day 15 Brussels (Not Done)
173	brussdt16	Num	8	BEST12.	Day 16 Date (Day)
174	systbp16	Num	8		Day 16 Systolic BP
175	pf16	Num	8		Day 16 PaO2/FiO2
176	plate16	Num	8		Day 16 Platelets x1000
177	creat16	Num	8		Day 16 Creatinine
178	bili16	Num	8		Day 16 Bilirubin
179	vaso16	Num	8		Day 16 Vasopressor
180	vaso16c	Char	3	$3.	Day 16 Vasopressor
181	brussdtX16	Char	64	$64.	Day 16 Date (Not Done)
182	brussX16	Char	64	$64.	Day 16 Brussels (Not Done)
183	brussdt17	Num	8	BEST12.	Day 17 Date (Day)
184	systbp17	Num	8		Day 17 Systolic BP
185	pf17	Num	8		Day 17 PaO2/FiO2
186	plate17	Num	8		Day 17 Platelets x1000
187	creat17	Num	8		Day 17 Creatinine
188	bili17	Num	8		Day 17 Bilirubin
189	vaso17	Num	8		Day 17 Vasopressor
190	vaso17c	Char	3	$3.	Day 17 Vasopressor
191	brussdtX17	Char	64	$64.	Day 17 Date (Not Done)
192	brussX17	Char	64	$64.	Day 17 Brussels (Not Done)

Num	Variable	Type	Len	Format	Label
193	brussdt18	Num	8	BEST12.	Day 18 Date (Day)
194	systbp18	Num	8		Day 18 Systolic BP
195	pf18	Num	8		Day 18 PaO2/FiO2
196	plate18	Num	8		Day 18 Platelets x1000
197	creat18	Num	8		Day 18 Creatinine
198	bili18	Num	8		Day 18 Bilirubin
199	vaso18	Num	8		Day 18 Vasopressor
200	vaso18c	Char	3	$3.	Day 18 Vasopressor
201	brussdtX18	Char	64	$64.	Day 18 Date (Not Done)
202	brussX18	Char	64	$64.	Day 18 Brussels (Not Done)
203	brussdt19	Num	8	BEST12.	Day 19 Date (Day)
204	systbp19	Num	8		Day 19 Systolic BP
205	pf19	Num	8		Day 19 PaO2/FiO2
206	plate19	Num	8		Day 19 Platelets x1000
207	creat19	Num	8		Day 19 Creatinine
208	bili19	Num	8		Day 19 Bilirubin
209	vaso19	Num	8		Day 19 Vasopressor
210	vaso19c	Char	3	$3.	Day 19 Vasopressor
211	brussdtX19	Char	64	$64.	Day 19 Date (Not Done)
212	brussX19	Char	64	$64.	Day 19 Brussels (Not Done)
213	brussdt20	Num	8	BEST12.	Day 20 Date (Day)
214	systbp20	Num	8		Day 20 Systolic BP
215	pf20	Num	8		Day 20 PaO2/FiO2
216	plate20	Num	8		Day 20 Platelets x1000
217	creat20	Num	8		Day 20 Creatinine
218	bili20	Num	8		Day 20 Bilirubin
219	vaso20	Num	8		Day 20 Vasopressor
220	vaso20c	Char	3	$3.	Day 20 Vasopressor
221	brussdtX20	Char	64	$64.	Day 20 Date (Not Done)
222	brussX20	Char	64	$64.	Day 20 Brussels (Not Done)
223	brussdt21	Num	8	BEST12.	Day 21 Date (Day)
224	systbp21	Num	8		Day 21 Systolic BP
225	pf21	Num	8		Day 21 PaO2/FiO2
226	plate21	Num	8		Day 21 Platelets x1000
227	creat21	Num	8		Day 21 Creatinine
228	bili21	Num	8		Day 21 Bilirubin
229	vaso21	Num	8		Day 21 Vasopressor
230	vaso21c	Char	3	$3.	Day 21 Vasopressor
231	brussdtX21	Char	64	$64.	Day 21 Date (Not Done)

Num	Variable	Type	Len	Format	Label
232	brussX21	Char	64	$64.	Day 21 Brussels (Not Done)
233	brussdt22	Num	8	BEST12.	Day 22 Date (Day)
234	systbp22	Num	8		Day 22 Systolic BP
235	pf22	Num	8		Day 22 PaO2/FiO2
236	plate22	Num	8		Day 22 Platelets x1000
237	creat22	Num	8		Day 22 Creatinine
238	bili22	Num	8		Day 22 Bilirubin
239	vaso22	Num	8		Day 22 Vasopressor
240	vaso22c	Char	3	$3.	Day 22 Vasopressor
241	brussdtX22	Char	64	$64.	Day 22 Date (Not Done)
242	brussX22	Char	64	$64.	Day 22 Brussels (Not Done)
243	brussdt23	Num	8	BEST12.	Day 23 Date (Day)
244	systbp23	Num	8		Day 23 Systolic BP
245	pf23	Num	8		Day 23 PaO2/FiO2
246	plate23	Num	8		Day 23 Platelets x1000
247	creat23	Num	8		Day 23 Creatinine
248	bili23	Num	8		Day 23 Bilirubin
249	vaso23	Num	8		Day 23 Vasopressor
250	vaso23c	Char	3	$3.	Day 23 Vasopressor
251	brussdtX23	Char	64	$64.	Day 23 Date (Not Done)
252	brussX23	Char	64	$64.	Day 23 Brussels (Not Done)
253	brussdt24	Num	8	BEST12.	Day 24 Date (Day)
254	systbp24	Num	8		Day 24 Systolic BP
255	pf24	Num	8		Day 24 PaO2/FiO2
256	plate24	Num	8		Day 24 Platelets x1000
257	creat24	Num	8		Day 24 Creatinine
258	bili24	Num	8		Day 24 Bilirubin
259	vaso24	Num	8		Day 24 Vasopressor
260	vaso24c	Char	3	$3.	Day 24 Vasopressor
261	brussdtX24	Char	64	$64.	Day 24 Date (Not Done)
262	brussX24	Char	64	$64.	Day 24 Brussels (Not Done)
263	brussdt25	Num	8	BEST12.	Day 25 Date (Day)
264	systbp25	Num	8		Day 25 Systolic BP
265	pf25	Num	8		Day 25 PaO2/FiO2
266	plate25	Num	8		Day 25 Platelets x1000
267	creat25	Num	8		Day 25 Creatinine
268	bili25	Num	8		Day 25 Bilirubin
269	vaso25	Num	8		Day 25 Vasopressor
270	vaso25c	Char	3	$3.	Day 25 Vasopressor

Num	Variable	Type	Len	Format	Label
271	brussdtX25	Char	64	$64.	Day 25 Date (Not Done)
272	brussX25	Char	64	$64.	Day 25 Brussels (Not Done)
273	brussdt26	Num	8	BEST12.	Day 26 Date (Day)
274	systbp26	Num	8		Day 26 Systolic BP
275	pf26	Num	8		Day 26 PaO2/FiO2
276	plate26	Num	8		Day 26 Platelets x1000
277	creat26	Num	8		Day 26 Creatinine
278	bili26	Num	8		Day 26 Bilirubin
279	vaso26	Num	8		Day 26 Vasopressor
280	vaso26c	Char	3	$3.	Day 26 Vasopressor
281	brussdtX26	Char	64	$64.	Day 26 Date (Not Done)
282	brussX26	Char	64	$64.	Day 26 Brussels (Not Done)
283	brussdt27	Num	8	BEST12.	Day 27 Date (Day)
284	systbp27	Num	8		Day 27 Systolic BP
285	pf27	Num	8		Day 27 PaO2/FiO2
286	plate27	Num	8		Day 27 Platelets x1000
287	creat27	Num	8		Day 27 Creatinine
288	bili27	Num	8		Day 27 Bilirubin
289	vaso27	Num	8		Day 27 Vasopressor
290	vaso27c	Char	3	$3.	Day 27 Vasopressor
291	brussdtX27	Char	64	$64.	Day 27 Date (Not Done)
292	brussX27	Char	64	$64.	Day 27 Brussels (Not Done)
293	brussdt28	Num	8	BEST12.	Day 28 Date (Day)
294	systbp28	Num	8		Day 28 Systolic BP
295	pf28	Num	8		Day 28 PaO2/FiO2
296	plate28	Num	8		Day 28 Platelets x1000
297	creat28	Num	8		Day 28 Creatinine
298	bili28	Num	8		Day 28 Bilirubin
299	vaso28	Num	8		Day 28 Vasopressor
300	vaso28c	Char	3	$3.	Day 28 Vasopressor
301	brussdtX28	Char	64	$64.	Day 28 Date (Not Done)
302	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	brussdt0	Num	8	BEST12.	Day 0 Date (Day)
14	systbp0	Num	8		Day 0 Systolic BP
15	pf0	Num	8		Day 0 PaO2/FiO2
16	plate0	Num	8		Day 0 Platelets x1000
17	creat0	Num	8		Day 0 Creatinine
18	bili0	Num	8		Day 0 Bilirubin
19	vaso0	Num	8		Day 0 Vasopressor
20	vaso0c	Char	3	$3.	Day 0 Vasopressor
21	brussdtX0	Char	64	$64.	Day 0 Date (Not Done)
22	brussX0	Char	64	$64.	Day 0 Brussels (Not Done)
23	brussdt1	Num	8	BEST12.	Day 1 Date (Day)
24	systbp1	Num	8		Day 1 Systolic BP
25	pf1	Num	8		Day 1 PaO2/FiO2
26	plate1	Num	8		Day 1 Platelets x1000
27	creat1	Num	8		Day 1 Creatinine
28	bili1	Num	8		Day 1 Bilirubin
29	vaso1	Num	8		Day 1 Vasopressor
30	vaso1c	Char	3	$3.	Day 1 Vasopressor
31	brussdtX1	Char	64	$64.	Day 1 Date (Not Done)
32	brussX1	Char	64	$64.	Day 1 Brussels (Not Done)
33	brussdt2	Num	8	BEST12.	Day 2 Date (Day)
34	systbp2	Num	8		Day 2 Systolic BP
35	pf2	Num	8		Day 2 PaO2/FiO2
36	plate2	Num	8		Day 2 Platelets x1000

Num	Variable	Type	Len	Format	Label
37	creat2	Num	8		Day 2 Creatinine
38	bili2	Num	8		Day 2 Bilirubin
39	vaso2	Num	8		Day 2 Vasopressor
40	vaso2c	Char	3	$3.	Day 2 Vasopressor
41	brussdtX2	Char	64	$64.	Day 2 Date (Not Done)
42	brussX2	Char	64	$64.	Day 2 Brussels (Not Done)
43	brussdt3	Num	8	BEST12.	Day 3 Date (Day)
44	systbp3	Num	8		Day 3 Systolic BP
45	pf3	Num	8		Day 3 PaO2/FiO2
46	plate3	Num	8		Day 3 Platelets x1000
47	creat3	Num	8		Day 3 Creatinine
48	bili3	Num	8		Day 3 Bilirubin
49	vaso3	Num	8		Day 3 Vasopressor
50	vaso3c	Char	3	$3.	Day 3 Vasopressor
51	brussdtX3	Char	64	$64.	Day 3 Date (Not Done)
52	brussX3	Char	64	$64.	Day 3 Brussels (Not Done)
53	brussdt4	Num	8	BEST12.	Day 4 Date (Day)
54	systbp4	Num	8		Day 4 Systolic BP
55	pf4	Num	8		Day 4 PaO2/FiO2
56	plate4	Num	8		Day 4 Platelets x1000
57	creat4	Num	8		Day 4 Creatinine
58	bili4	Num	8		Day 4 Bilirubin
59	vaso4	Num	8		Day 4 Vasopressor
60	vaso4c	Char	3	$3.	Day 4 Vasopressor
61	brussdtX4	Char	64	$64.	Day 4 Date (Not Done)
62	brussX4	Char	64	$64.	Day 4 Brussels (Not Done)
63	brussdt5	Num	8	BEST12.	Day 5 Date (Day)
64	systbp5	Num	8		Day 5 Systolic BP
65	pf5	Num	8		Day 5 PaO2/FiO2
66	plate5	Num	8		Day 5 Platelets x1000
67	creat5	Num	8		Day 5 Creatinine
68	bili5	Num	8		Day 5 Bilirubin
69	vaso5	Num	8		Day 5 Vasopressor
70	vaso5c	Char	3	$3.	Day 5 Vasopressor
71	brussdtX5	Char	64	$64.	Day 5 Date (Not Done)
72	brussX5	Char	64	$64.	Day 5 Brussels (Not Done)
73	brussdt6	Num	8	BEST12.	Day 6 Date (Day)
74	systbp6	Num	8		Day 6 Systolic BP
75	pf6	Num	8		Day 6 PaO2/FiO2

Num	Variable	Type	Len	Format	Label
76	plate6	Num	8		Day 6 Platelets x1000
77	creat6	Num	8		Day 6 Creatinine
78	bili6	Num	8		Day 6 Bilirubin
79	vaso6	Num	8		Day 6 Vasopressor
80	vaso6c	Char	3	$3.	Day 6 Vasopressor
81	brussdtX6	Char	64	$64.	Day 6 Date (Not Done)
82	brussX6	Char	64	$64.	Day 6 Brussels (Not Done)
83	brussdt7	Num	8	BEST12.	Day 7 Date (Day)
84	systbp7	Num	8		Day 7 Systolic BP
85	pf7	Num	8		Day 7 PaO2/FiO2
86	plate7	Num	8		Day 7 Platelets x1000
87	creat7	Num	8		Day 7 Creatinine
88	bili7	Num	8		Day 7 Bilirubin
89	vaso7	Num	8		Day 7 Vasopressor
90	vaso7c	Char	3	$3.	Day 7 Vasopressor
91	brussdtX7	Char	64	$64.	Day 7 Date (Not Done)
92	brussX7	Char	64	$64.	Day 7 Brussels (Not Done)
93	brussdt8	Num	8	BEST12.	Day 8 Date (Day)
94	systbp8	Num	8		Day 8 Systolic BP
95	pf8	Num	8		Day 8 PaO2/FiO2
96	plate8	Num	8		Day 8 Platelets x1000
97	creat8	Num	8		Day 8 Creatinine
98	bili8	Num	8		Day 8 Bilirubin
99	vaso8	Num	8		Day 8 Vasopressor
100	vaso8c	Char	3	$3.	Day 8 Vasopressor
101	brussdtX8	Char	64	$64.	Day 8 Date (Not Done)
102	brussX8	Char	64	$64.	Day 8 Brussels (Not Done)
103	brussdt9	Num	8	BEST12.	Day 9 Date (Day)
104	systbp9	Num	8		Day 9 Systolic BP
105	pf9	Num	8		Day 9 PaO2/FiO2
106	plate9	Num	8		Day 9 Platelets x1000
107	creat9	Num	8		Day 9 Creatinine
108	bili9	Num	8		Day 9 Bilirubin
109	vaso9	Num	8		Day 9 Vasopressor
110	vaso9c	Char	3	$3.	Day 9 Vasopressor
111	brussdtX9	Char	64	$64.	Day 9 Date (Not Done)
112	brussX9	Char	64	$64.	Day 9 Brussels (Not Done)
113	brussdt10	Num	8	BEST12.	Day 10 Date (Day)
114	systbp10	Num	8		Day 10 Systolic BP

Num	Variable	Type	Len	Format	Label
115	pf10	Num	8		Day 10 PaO2/FiO2
116	plate10	Num	8		Day 10 Platelets x1000
117	creat10	Num	8		Day 10 Creatinine
118	bili10	Num	8		Day 10 Bilirubin
119	vaso10	Num	8		Day 10 Vasopressor
120	vaso10c	Char	3	$3.	Day 10 Vasopressor
121	brussdtX10	Char	64	$64.	Day 10 Date (Not Done)
122	brussX10	Char	64	$64.	Day 10 Brussels (Not Done)
123	brussdt11	Num	8	BEST12.	Day 11 Date (Day)
124	systbp11	Num	8		Day 11 Systolic BP
125	pf11	Num	8		Day 11 PaO2/FiO2
126	plate11	Num	8		Day 11 Platelets x1000
127	creat11	Num	8		Day 11 Creatinine
128	bili11	Num	8		Day 11 Bilirubin
129	vaso11	Num	8		Day 11 Vasopressor
130	brussdtX11	Char	64	$64.	Day 11 Date (Not Done)
131	brussX11	Char	64	$64.	Day 11 Brussels (Not Done)
132	vaso11c	Char	3	$3.	Day 11 Vasopressor
133	brussdt12	Num	8	BEST12.	Day 12 Date (Day)
134	systbp12	Num	8		Day 12 Systolic BP
135	pf12	Num	8		Day 12 PaO2/FiO2
136	plate12	Num	8		Day 12 Platelets x1000
137	creat12	Num	8		Day 12 Creatinine
138	bili12	Num	8		Day 12 Bilirubin
139	vaso12	Num	8		Day 12 Vasopressor
140	vaso12c	Char	3	$3.	Day 12 Vasopressor
141	brussdtX12	Char	64	$64.	Day 12 Date (Not Done)
142	brussX12	Char	64	$64.	Day 12 Brussels (Not Done)
143	brussdt13	Num	8	BEST12.	Day 13 Date (Day)
144	systbp13	Num	8		Day 13 Systolic BP
145	pf13	Num	8		Day 13 PaO2/FiO2
146	plate13	Num	8		Day 13 Platelets x1000
147	creat13	Num	8		Day 13 Creatinine
148	bili13	Num	8		Day 13 Bilirubin
149	vaso13	Num	8		Day 13 Vasopressor
150	vaso13c	Char	3	$3.	Day 13 Vasopressor
151	brussdtX13	Char	64	$64.	Day 13 Date (Not Done)
152	brussX13	Char	64	$64.	Day 13 Brussels (Not Done)
153	brussdt14	Num	8	BEST12.	Day 14 Date (Day)

Num	Variable	Type	Len	Format	Label
154	systbp14	Num	8		Day 14 Systolic BP
155	pf14	Num	8		Day 14 PaO2/FiO2
156	plate14	Num	8		Day 14 Platelets x1000
157	creat14	Num	8		Day 14 Creatinine
158	bili14	Num	8		Day 14 Bilirubin
159	vaso14	Num	8		Day 14 Vasopressor
160	vaso14c	Char	3	$3.	Day 14 Vasopressor
161	brussdtX14	Char	64	$64.	Day 14 Date (Not Done)
162	brussX14	Char	64	$64.	Day 14 Brussels (Not Done)
163	brussdt15	Num	8	BEST12.	Day 15 Date (Day)
164	systbp15	Num	8		Day 15 Systolic BP
165	pf15	Num	8		Day 15 PaO2/FiO2
166	plate15	Num	8		Day 15 Platelets x1000
167	creat15	Num	8		Day 15 Creatinine
168	bili15	Num	8		Day 15 Bilirubin
169	vaso15	Num	8		Day 15 Vasopressor
170	vaso15c	Char	3	$3.	Day 15 Vasopressor
171	brussdtX15	Char	64	$64.	Day 15 Date (Not Done)
172	brussX15	Char	64	$64.	Day 15 Brussels (Not Done)
173	brussdt16	Num	8	BEST12.	Day 16 Date (Day)
174	systbp16	Num	8		Day 16 Systolic BP
175	pf16	Num	8		Day 16 PaO2/FiO2
176	plate16	Num	8		Day 16 Platelets x1000
177	creat16	Num	8		Day 16 Creatinine
178	bili16	Num	8		Day 16 Bilirubin
179	vaso16	Num	8		Day 16 Vasopressor
180	vaso16c	Char	3	$3.	Day 16 Vasopressor
181	brussdtX16	Char	64	$64.	Day 16 Date (Not Done)
182	brussX16	Char	64	$64.	Day 16 Brussels (Not Done)
183	brussdt17	Num	8	BEST12.	Day 17 Date (Day)
184	systbp17	Num	8		Day 17 Systolic BP
185	pf17	Num	8		Day 17 PaO2/FiO2
186	plate17	Num	8		Day 17 Platelets x1000
187	creat17	Num	8		Day 17 Creatinine
188	bili17	Num	8		Day 17 Bilirubin
189	vaso17	Num	8		Day 17 Vasopressor
190	vaso17c	Char	3	$3.	Day 17 Vasopressor
191	brussdtX17	Char	64	$64.	Day 17 Date (Not Done)
192	brussX17	Char	64	$64.	Day 17 Brussels (Not Done)

Num	Variable	Type	Len	Format	Label
193	brussdt18	Num	8	BEST12.	Day 18 Date (Day)
194	systbp18	Num	8		Day 18 Systolic BP
195	pf18	Num	8		Day 18 PaO2/FiO2
196	plate18	Num	8		Day 18 Platelets x1000
197	creat18	Num	8		Day 18 Creatinine
198	bili18	Num	8		Day 18 Bilirubin
199	vaso18	Num	8		Day 18 Vasopressor
200	vaso18c	Char	3	$3.	Day 18 Vasopressor
201	brussdtX18	Char	64	$64.	Day 18 Date (Not Done)
202	brussX18	Char	64	$64.	Day 18 Brussels (Not Done)
203	brussdt19	Num	8	BEST12.	Day 19 Date (Day)
204	systbp19	Num	8		Day 19 Systolic BP
205	pf19	Num	8		Day 19 PaO2/FiO2
206	plate19	Num	8		Day 19 Platelets x1000
207	creat19	Num	8		Day 19 Creatinine
208	bili19	Num	8		Day 19 Bilirubin
209	vaso19	Num	8		Day 19 Vasopressor
210	vaso19c	Char	3	$3.	Day 19 Vasopressor
211	brussdtX19	Char	64	$64.	Day 19 Date (Not Done)
212	brussX19	Char	64	$64.	Day 19 Brussels (Not Done)
213	brussdt20	Num	8	BEST12.	Day 20 Date (Day)
214	systbp20	Num	8		Day 20 Systolic BP
215	pf20	Num	8		Day 20 PaO2/FiO2
216	plate20	Num	8		Day 20 Platelets x1000
217	creat20	Num	8		Day 20 Creatinine
218	bili20	Num	8		Day 20 Bilirubin
219	vaso20	Num	8		Day 20 Vasopressor
220	vaso20c	Char	3	$3.	Day 20 Vasopressor
221	brussdtX20	Char	64	$64.	Day 20 Date (Not Done)
222	brussX20	Char	64	$64.	Day 20 Brussels (Not Done)
223	brussdt21	Num	8	BEST12.	Day 21 Date (Day)
224	systbp21	Num	8		Day 21 Systolic BP
225	pf21	Num	8		Day 21 PaO2/FiO2
226	plate21	Num	8		Day 21 Platelets x1000
227	creat21	Num	8		Day 21 Creatinine
228	bili21	Num	8		Day 21 Bilirubin
229	vaso21	Num	8		Day 21 Vasopressor
230	vaso21c	Char	3	$3.	Day 21 Vasopressor
231	brussdtX21	Char	64	$64.	Day 21 Date (Not Done)

Num	Variable	Type	Len	Format	Label
232	brussX21	Char	64	$64.	Day 21 Brussels (Not Done)
233	brussdt22	Num	8	BEST12.	Day 22 Date (Day)
234	systbp22	Num	8		Day 22 Systolic BP
235	pf22	Num	8		Day 22 PaO2/FiO2
236	plate22	Num	8		Day 22 Platelets x1000
237	creat22	Num	8		Day 22 Creatinine
238	bili22	Num	8		Day 22 Bilirubin
239	vaso22	Num	8		Day 22 Vasopressor
240	vaso22c	Char	3	$3.	Day 22 Vasopressor
241	brussdtX22	Char	64	$64.	Day 22 Date (Not Done)
242	brussX22	Char	64	$64.	Day 22 Brussels (Not Done)
243	brussdt23	Num	8	BEST12.	Day 23 Date (Day)
244	systbp23	Num	8		Day 23 Systolic BP
245	pf23	Num	8		Day 23 PaO2/FiO2
246	plate23	Num	8		Day 23 Platelets x1000
247	creat23	Num	8		Day 23 Creatinine
248	bili23	Num	8		Day 23 Bilirubin
249	vaso23	Num	8		Day 23 Vasopressor
250	vaso23c	Char	3	$3.	Day 23 Vasopressor
251	brussdtX23	Char	64	$64.	Day 23 Date (Not Done)
252	brussX23	Char	64	$64.	Day 23 Brussels (Not Done)
253	brussdt24	Num	8	BEST12.	Day 24 Date (Day)
254	systbp24	Num	8		Day 24 Systolic BP
255	pf24	Num	8		Day 24 PaO2/FiO2
256	plate24	Num	8		Day 24 Platelets x1000
257	creat24	Num	8		Day 24 Creatinine
258	bili24	Num	8		Day 24 Bilirubin
259	vaso24	Num	8		Day 24 Vasopressor
260	vaso24c	Char	3	$3.	Day 24 Vasopressor
261	brussdtX24	Char	64	$64.	Day 24 Date (Not Done)
262	brussX24	Char	64	$64.	Day 24 Brussels (Not Done)
263	brussdt25	Num	8	BEST12.	Day 25 Date (Day)
264	systbp25	Num	8		Day 25 Systolic BP
265	pf25	Num	8		Day 25 PaO2/FiO2
266	plate25	Num	8		Day 25 Platelets x1000
267	creat25	Num	8		Day 25 Creatinine
268	bili25	Num	8		Day 25 Bilirubin
269	vaso25	Num	8		Day 25 Vasopressor
270	vaso25c	Char	3	$3.	Day 25 Vasopressor

Num	Variable	Type	Len	Format	Label
271	brussdtX25	Char	64	$64.	Day 25 Date (Not Done)
272	brussX25	Char	64	$64.	Day 25 Brussels (Not Done)
273	brussdt26	Num	8	BEST12.	Day 26 Date (Day)
274	systbp26	Num	8		Day 26 Systolic BP
275	pf26	Num	8		Day 26 PaO2/FiO2
276	plate26	Num	8		Day 26 Platelets x1000
277	creat26	Num	8		Day 26 Creatinine
278	bili26	Num	8		Day 26 Bilirubin
279	vaso26	Num	8		Day 26 Vasopressor
280	vaso26c	Char	3	$3.	Day 26 Vasopressor
281	brussdtX26	Char	64	$64.	Day 26 Date (Not Done)
282	brussX26	Char	64	$64.	Day 26 Brussels (Not Done)
283	brussdt27	Num	8	BEST12.	Day 27 Date (Day)
284	systbp27	Num	8		Day 27 Systolic BP
285	pf27	Num	8		Day 27 PaO2/FiO2
286	plate27	Num	8		Day 27 Platelets x1000
287	creat27	Num	8		Day 27 Creatinine
288	bili27	Num	8		Day 27 Bilirubin
289	vaso27	Num	8		Day 27 Vasopressor
290	vaso27c	Char	3	$3.	Day 27 Vasopressor
291	brussdtX27	Char	64	$64.	Day 27 Date (Not Done)
292	brussX27	Char	64	$64.	Day 27 Brussels (Not Done)
293	brussdt28	Num	8	BEST12.	Day 28 Date (Day)
294	systbp28	Num	8		Day 28 Systolic BP
295	pf28	Num	8		Day 28 PaO2/FiO2
296	plate28	Num	8		Day 28 Platelets x1000
297	creat28	Num	8		Day 28 Creatinine
298	bili28	Num	8		Day 28 Bilirubin
299	vaso28	Num	8		Day 28 Vasopressor
300	vaso28c	Char	3	$3.	Day 28 Vasopressor
301	brussdtX28	Char	64	$64.	Day 28 Date (Not Done)
302	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	b_pressors	Char	3		
3	on_propofol	Char	3		
4	randomdt	Num	8	BEST12.	Date and Time of randomization (Day)
5	randomtm	Num	8	TIME5.	Date and Time of randomization (Time)
6	alta	Char	20		
7	omega	Char	20		
8	omegachar	Char	12		
9	eden	Char	20		
10	altapatient	Num	8		
11	edenpatient	Num	8		
12	omegapatient	Num	8		
13	allcrit	Num	8		Met all three criteria?
14	allcritc	Char	3	$3.	Met all three criteria?
15	qualdt	Num	8	BEST12.	Date and time of qualifying CXR: (Day)
16	qualtm	Num	8	TIME5.	Date and time of qualifying CXR: (Time)
17	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?
18	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?
19	sirswbc	Num	8		White blood cell count > 12000 or > 4000 or > 10% band forms
20	sirswbcc	Char	60	$60.	White blood cell count > 12000 or > 4000 or > 10% band forms
21	sirstemp38	Num	8		Body Temperature > 38C (any route) or < 36C (by core temperatures only: indwelling catheter, esophageal, rectal)
22	sirstemp38c	Char	112	$112.	Body Temperature > 38C (any route) or < 36C (by core temperatures only: indwelling catheter, esophageal, rectal)
23	sirshr90	Num	8		Heart rate (> 90 beats/min) or receiving medications that slow heart rate or paced rhythm
24	sirshr90c	Char	89	$89.	Heart rate (> 90 beats/min) or receiving medications that slow heart rate or paced rhythm
25	inf	Num	8		Patient has suspected or proven infection?
26	infc	Char	23	$23.	Patient has suspected or proven infection?
27	infthorax	Num	8		Site of infection: Thorax
28	infthoraxc	Char	6	$6.	Site of infection: Thorax
29	infabdomen	Num	8		Site of infection: Abdomen
30	infabdomenc	Char	7	$7.	Site of infection: Abdomen

Num	Variable	Type	Len	Format	Label
31	infskin	Num	8		Site of infection: Skin or soft tissue
32	infskinc	Char	19	$19.	Site of infection: Skin or soft tissue
33	infmenin	Num	8		Site of infection: Bacterial meningitis
34	infmeninc	Char	20	$20.	Site of infection: Bacterial meningitis
35	inftract	Num	8		Site of infection: Urinary tract
36	inftractc	Char	13	$13.	Site of infection: Urinary tract
37	infcent	Num	8		Site of infection: Central line
38	infcentc	Char	12	$12.	Site of infection: Central line
39	infsinus	Num	8		Site of infection: Sinuses
40	infsinusc	Char	7	$7.	Site of infection: Sinuses
41	infosteo	Num	8		Site of infection: Osteomyelitis
42	infosteoc	Char	13	$13.	Site of infection: Osteomyelitis
43	infh1n1	Num	8		Site of infection: Confirmed Swine Influenza A (H1N1)
44	infh1n1c	Char	34	$34.	Site of infection: Confirmed Swine Influenza A (H1N1)
45	infother	Char	255	$255.	Other site of infection
46	quads	Num	8		Number of quadrants with opacities (2-4):
47	intubdt	Num	8	BEST12.	Date and time of current intubation (Day)
48	intubtm	Num	8	TIME5.	Date and time of current intubation (Time)
49	intfeed	Num	8		Intent to begin/continue enteral feedings?
50	intfeedc	Char	3	$3.	Intent to begin/continue enteral feedings?
51	pao2screen	Num	8		Pa02
52	fio2screen	Num	8		FiO2
53	qualpfdt	Num	8	BEST12.	Date and time of qualifying P/F (Day)
54	qualpftm	Num	8	TIME5.	Date and time of qualifying P/F (Time)
55	critdt	Num	8	BEST12.	First date that all these criteria exist simultaneously (Day)
56	gender	Num	8		Gender
57	genderc	Char	6	$6.	Gender
58	ethnic	Num	8		Hispanic or Not Hispanic?
59	ethnicc	Char	22	$22.	Hispanic or Not Hispanic?
60	norace	Num	8		Race Not Reported
61	noracec	Char	12	$12.	Race Not Reported
62	white	Num	8		White?
63	whitec	Char	5	$5.	White
64	afamer	Num	8		Black or African American?
65	afamerc	Char	25	$25.	Black or African American?
66	age	Num	8		Age as appears on screening form (in years):
67	agegt89	Num	8		Is true age greater than 89?
68	agegt89c	Char	54	$54.	Is true age greater than 89?
69	locat	Num	8		Location

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

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

Num	Variable	Type	Len	Format	Label
146	pregc	Char	26	$26.	Pregnant or breast feeding?
147	mdrefeoc	Char	36	$36.	MD refusal for EDEN/Omega?
148	mdrefeoreas	Num	8		Reason for MD refusal for EDEN/Omega?
149	mdrefeoreasc	Char	42	$42.	Reason for MD refusal for EDEN/Omega?
150	mdrefeooth	Char	100	$100.	Other reason for MD refusal for EDEN/Omega?
151	chronresp	Num	8		Severe chronic respiratory disease?
152	chronrespc	Char	34	$34.	Severe chronic respiratory disease?
153	burnsc	Char	46	$46.	Burns > 40% of body surface area?
154	sixmthmort	Num	8		6-month mortality > 50%?
155	sixmthmortc	Char	117	$117.	6-month mortality > 50%?
156	marrowtrans	Num	8		Allogenic bone marrow transplant?
157	marrowtransc	Char	53	$53.	Allogenic bone marrow transplant?
158	notcomm	Num	8		Not committed to full support?
159	notcommc	Char	62	$62.	Not committed to full support?
160	bowobs	Num	8		Presence of partial or complete bowel obstruction, or ischemia, or infarction
161	bowobsc	Char	78	$78.	Presence of partial or complete bowel obstruction, or ischemia, or infarction
162	agelt18	Num	8		Age less than 18 years?
163	agelt18c	Char	22	$22.	Age less than 18 years?
164	prevstatin	Num	8		Receiving a statin medication within 48 hours of randomization?
165	prevstatinc	Char	62	$62.	Receiving a statin medication within 48 hours of randomization?
166	allergystat	Num	8		Allergy or intolerance to statins?
167	allergystatc	Char	33	$33.	Allergy or intolerance to statins?
168	mdstat	Num	8		Physician insistence on use of statins during the current hospitalization?
169	mdstatc	Char	73	$73.	Physician insistence on use of statins during the current hospitalization?
170	mdnostat	Num	8		Physician insistence on AVOIDANCE of statins during the current hospitalization?
171	mdnostatc	Char	79	$79.	Physician insistence on AVOIDANCE of statins during the current hospitalization?
172	ckgt5	Num	8		CK, ALT or AST > 5 times the upper limit of normal (ULN)?
173	ckgt5c	Char	58	$58.	CK, ALT or AST > 5 times the upper limit of normal (ULN)?
174	hypothy	Num	8		Diagnosis of hypothyroidism and not on thyroid replacement therapy?
175	hypothyc	Char	66	$66.	Diagnosis of hypothyroidism and not on thyroid replacement therapy?
176	recniacin	Num	8		Receiving niacin, fenofibrate, cyclosporine, gemfibrozil, lopinavir, ritonavir or planned use of oral contraceptives or estrogen therapy during the ICU stay?

Num	Variable	Type	Len	Format	Label
177	recniacinc	Char	156	$156.	Receiving niacin, fenofibrate, cyclosporine, gemfibrozil, lopinavir, ritonavir or planned use of oral contraceptives or estrogen therapy during the ICU stay?
178	homevent	Num	8		Home mechanical ventilation (noninvasive ventilation or via tracheotomy) except for CPAP/BIPAP used solely for sleep-disordered breathing?
179	homeventc	Char	139	$139.	Home mechanical ventilation (noninvasive ventilation or via tracheotomy) except for CPAP/BIPAP used solely for sleep-disordered breathing?
180	chronrespfl	Num	8		Chronic respiratory failure defined as PaCO2 > 50 mm Hg in the outpatient setting?
181	chronrespflc	Char	83	$83.	Chronic respiratory failure defined as PaCO2 > 50 mm Hg in the outpatient setting?
182	intlung	Num	8		Interstitial lung disease of severity sufficient to require continuous home oxygen therapy?
183	intlungc	Char	91	$91.	Interstitial lung disease of severity sufficient to require continuous home oxygen therapy?
184	carddis	Num	8		Cardiac disease classified as NYHA class IV?
185	carddisc	Char	45	$45.	Cardiac disease classified as NYHA class IV?
186	noabsorb	Num	8		Unable to receive or unlikely to absorb enteral study drug?
187	noabsorbc	Char	187	$187.	Unable to receive or unlikely to absorb enteral study drug?
188	mi6mth	Num	8		Myocardial infarction within past 6 months?
189	mi6mthc	Char	42	$42.	Myocardial infarction within past 6 months?
190	notexenreas	Char	200	$200.	Neither excluded nor enrolled reason:
191	Trauma	Num	8		Trauma
192	Traumac	Char	9	$9.	Trauma
193	Sepsite	Num	8		Site of Sepsis for Primary Lung Injury?
194	Sepsitec	Char	24	$24.	Site of Sepsis for Primary Lung Injury?
195	Sepsis	Num	8		Sepsis
196	Sepsisc	Char	37	$37.	Sepsis
197	Transf	Num	8		Multiple Transfusions
198	Transfc	Char	9	$9.	Multiple Transfusions
199	Aspir	Num	8		Aspiration
200	Aspirc	Char	9	$9.	Aspiration
201	Pneumo	Num	8		Pneumonia
202	Pneumoc	Char	9	$9.	Pneumonia
203	Otherlung	Num	8		Other Lung Injury
204	Otherlungc	Char	49	$49.	Other Lung Injury
205	Otherpr	Char	40	$40.	Description of Other Primary Lung Injury
206	Othersec	Char	40	$40.	Description of Other Secondary Lung Injury
207	raceX	Char	64	$64.	Race (Not Done)
208	allcritX	Char	64	$64.	Met all three criteria? (Not Done)

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

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

Num	Variable	Type	Len	Format	Label
275	tumorc	Char	3	$3.	Solid tumor with metastasis
276	immune	Num	8		Immune Suppression w/in past 6 mths
277	immunec	Char	3	$3.	Immune Suppression w/in past 6 mths
278	hepa	Num	8		Hepatic Failure with coma or encephalo.
279	hepac	Char	3	$3.	Hepatic Failure with coma or encephalo.
280	cirr	Num	8		Cirrhosis
281	cirrc	Char	3	$3.	Cirrhosis
282	diab	Num	8		Diabetes Mellitus
283	diabc	Char	3	$3.	Diabetes Mellitus
284	hyper	Num	8		History of hypertension
285	hyperc	Char	3	$3.	History of hypertension
286	myocard	Num	8		Prior myocardial infarction
287	myocardc	Char	3	$3.	Prior myocardial infarction
288	heart	Num	8		Congestive heart failure
289	heartc	Char	3	$3.	Congestive heart failure
290	vascular	Num	8		Peripheral Vascular Disease
291	vascularc	Char	3	$3.	Peripheral Vascular Disease
292	aestroke	Num	8		Prior stroke with Sequel AE
293	aestrokec	Char	3	$3.	Prior stroke with Sequel AE
294	dementia	Num	8		Dementia
295	dementiac	Char	3	$3.	Dementia
296	chrpulm	Num	8		Chronic pulmonary disease
297	chrpulmc	Char	3	$3.	Chronic pulmonary disease
298	arthritis	Num	8		Arthritis
299	arthritisc	Char	3	$3.	Arthritis
300	ulcer	Num	8		Peptic Ulcer Disease
301	ulcerc	Char	3	$3.	Peptic Ulcer Disease
302	vasol24	Num	8		Vasopressors in the 24 hours prior to randomization
303	vasol24c	Char	3	$3.	Vasopressors in the 24 hours prior to randomization
304	hasddtX	Char	64	$64.	Hospital Admission Date (Not Done)
305	admtypeX	Char	64	$64.	Hospital Admission Type (Not Done)
306	icudtx	Char	64	$64.	ICU Admission Date (Not Done)
307	icutmx	Char	64	$64.	Time of ICU Admission (Not Done)
308	admitfromX	Char	64	$64.	Patient Admitted Directly From (Not Done)
309	resideX	Char	64	$64.	Place of residence prior to hospitalization (Not Done)
310	surgelX	Char	64	$64.	Patient post-operative elective surgery? (Not Done)
311	icureadmitX	Char	64	$64.	ICU Readmit (Not Done)
312	readmit24X	Char	64	$64.	ICU Readmit within 24 hours (Not Done)
313	healthinfoX	Char	64	$64.	Chronic health information available (Not Done)

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

Num	Variable	Type	Len	Format	Label
345	alchguiltc	Char	21	$21.	How often during the last year have you had a feeling of guilt or remorse after drinking?
346	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?
347	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?
348	alchinjury	Num	8		Have you or someone else been injured as a result of your drinking?
349	alchinjuryc	Char	29	$29.	Have you or someone else been injured as a result of your drinking?
350	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?
351	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?
352	smoker	Num	8		Ever smoker (> 100 cigarettes in lifetime)?
353	smokerc	Char	3	$3.	Ever smoker (> 100 cigarettes in lifetime)?
354	packyr	Num	8		If ever smoker, estimate pack years: (Pack years = [# packs per day] x [# years smoked])
355	cursmoker	Num	8		Current Smoker?
356	cursmokerc	Char	14	$14.	Current Smoker?
357	smokequitdt	Num	8	BEST12.	When Quit Smoking (Day)
358	alchfreqX	Char	64	$64.	How often do you have a drink containing alcohol? (Not Done)
359	alchnumX	Char	64	$64.	How many drinks containing alcohol do you have on a typical day when you are drinking? (Not Done)
360	alch6freqX	Char	64	$64.	How often do you have six or more drinks on one occasion? (Not Done)
361	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)
362	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)
363	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)
364	alchguiltX	Char	64	$64.	How often during the last year have you had a feeling of guilt or remorse after drinking? (Not Done)
365	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)
366	alchinjuryX	Char	64	$64.	Have you or someone else been injured as a result of your drinking? (Not Done)
367	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)

Num	Variable	Type	Len	Format	Label
368	smokerX	Char	64	$64.	Ever smoker (> 100 cigarettes in lifetime) (Not Done)?
369	packyrX	Char	64	$64.	If ever smoker, estimate pack years: (Not Done)
370	cursmokerX	Char	64	$64.	Current Smoker?
371	hgb_0	Num	8		Hgb (g/dL)
372	sodium_0	Num	8		Sodium (mEq/L):
373	potas_0	Num	8		Postassium (mEq/L)
374	gluc_0	Num	8		Glucose (mg/dL):
375	bicarb_0	Num	8		Serum Bicarb (mEq/L):
376	phos_0	Num	8		Serum Phosphorous (mg/dL)
377	mg_0	Num	8		Serum Magnesium (mEq/L)
378	protein_0	Num	8		Total Protein (g/dL)
379	album_0	Num	8		Albumin (g/dL):
380	glucmin_0	Num	8		Lowest glucose this day:
381	prothrombin_0	Num	8		Prothrombin time
382	hgbx	Char	64	$64.	Hgb (g/dL) (Not Done)
383	sodiumx	Char	64	$64.	Sodium (mEq/L): (Not Done)
384	potasx	Char	64	$64.	Postassium (mEq/L) (Not Done)
385	glucx	Char	64	$64.	Glucose (mg/dL): (Not Done)
386	bicarbx	Char	64	$64.	Serum Bicarb (mEq/L): (Not Done)
387	phosx_0	Char	64	$64.	Serum Phosphorous (mg/dL) (Not Done)
388	mgx_0	Char	64	$64.	Serum Magnesium (mEq/L) (Not Done)
389	proteinx_0	Char	64	$64.	Total Protein (g/dL) (Not Done)
390	albumx_0	Char	64	$64.	Albumin (g/dL): (Not Done)
391	alt_0	Num	8		ALT
392	ast	Num	8		AST
393	ck_0	Num	8		CK
394	crp_0	Num	8		CRP
395	crphl_0	Num	8		High sensitivity or regular CRP
396	crphlc_0	Char	16	$16.	High sensitivity or regular CRP
397	insulinrt_1	Num	8		Insulin drip rate at time of glucose value
398	insulinsq_1	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
399	hgb_1	Num	8		Hgb (g/dL)
400	sodium_1	Num	8		Sodium (mEq/L):
401	potas_1	Num	8		Postassium (mEq/L)
402	gluc_1	Num	8		Glucose (mg/dL):
403	bicarb_1	Num	8		Serum Bicarb (mEq/L):
404	phos_1	Num	8		Serum Phosphorus (mEq/L)
405	mg_1	Num	8		Serum Magnesium (mg/dL)
406	protein_1	Num	8		Total Protein (g/dL)

Num	Variable	Type	Len	Format	Label
407	album_1	Num	8		Albumin (g/dL):
408	prothrombin_1	Num	8		Prothrombin time (Seconds)
409	glucmin_1	Num	8		Lowest glucose this day
410	phosx_1	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
411	mgx_1	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
412	proteinx_1	Char	64	$64.	Total Protein (g/dL) (Not Done)
413	albumx_1	Char	64	$64.	Albumin (g/dL): (Not Done)
414	alt_1	Num	8		ALT
415	ck_1	Num	8		CK
416	crp_1	Num	8		CRP
417	crphl_1	Num	8		High sensitivity or regular CRP
418	crphlc_1	Char	16	$16.	High sensitivity or regular CRP
419	insulinrt_2	Num	8		Insulin drip rate at time of glucose value
420	insulinsq_2	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
421	hgb_2	Num	8		Hgb (g/dL)
422	sodium_2	Num	8		Sodium (mEq/L):
423	potas_2	Num	8		Postassium (mEq/L)
424	gluc_2	Num	8		Glucose (mg/dL):
425	bicarb_2	Num	8		Serum Bicarb (mEq/L):
426	phos_2	Num	8		Serum Phosphorus (mEq/L)
427	mg_2	Num	8		Serum Magnesium (mg/dL)
428	protein_2	Num	8		Total Protein (g/dL)
429	album_2	Num	8		Albumin (g/dL):
430	prothrombin_2	Num	8		Prothrombin time (Seconds)
431	glucmin_2	Num	8		Lowest glucose this day
432	phosx_2	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
433	mgx_2	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
434	proteinx_2	Char	64	$64.	Total Protein (g/dL) (Not Done)
435	albumx_2	Char	64	$64.	Albumin (g/dL): (Not Done)
436	alt_2	Num	8		ALT
437	ck_2	Num	8		CK
438	crp_2	Num	8		CRP
439	crphl_2	Num	8		High sensitivity or regular CRP
440	crphlc_2	Char	16	$16.	High sensitivity or regular CRP
441	insulinrt_3	Num	8		Insulin drip rate at time of glucose value
442	insulinsq_3	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
443	hgb_3	Num	8		Hgb (g/dL)
444	sodium_3	Num	8		Sodium (mEq/L):
445	potas_3	Num	8		Postassium (mEq/L)

Num	Variable	Type	Len	Format	Label
446	gluc_3	Num	8		Glucose (mg/dL):
447	bicarb_3	Num	8		Serum Bicarb (mEq/L):
448	phos_3	Num	8		Serum Phosphorus (mEq/L)
449	mg_3	Num	8		Serum Magnesium (mg/dL)
450	protein_3	Num	8		Total Protein (g/dL)
451	album_3	Num	8		Albumin (g/dL):
452	prothrombin_3	Num	8		Prothrombin time (Seconds)
453	glucmin_3	Num	8		Lowest glucose this day
454	phosx_3	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
455	mgx_3	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
456	proteinx_3	Char	64	$64.	Total Protein (g/dL) (Not Done)
457	albumx_3	Char	64	$64.	Albumin (g/dL): (Not Done)
458	alt_3	Num	8		ALT
459	ck_3	Num	8		CK
460	crp_3	Num	8		CRP
461	crphl_3	Num	8		High sensitivity or regular CRP
462	crphlc_3	Char	16	$16.	High sensitivity or regular CRP
463	insulinrt_4	Num	8		Insulin drip rate at time of glucose value
464	insulinsq_4	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
465	hgb_4	Num	8		Hgb (g/dL)
466	sodium_4	Num	8		Sodium (mEq/L):
467	potas_4	Num	8		Postassium (mEq/L)
468	gluc_4	Num	8		Glucose (mg/dL):
469	bicarb_4	Num	8		Serum Bicarb (mEq/L):
470	phos_4	Num	8		Serum Phosphorus (mEq/L)
471	mg_4	Num	8		Serum Magnesium (mg/dL)
472	protein_4	Num	8		Total Protein (g/dL)
473	album_4	Num	8		Albumin (g/dL):
474	prothrombin_4	Num	8		Prothrombin time (Seconds)
475	glucmin_4	Num	8		Lowest glucose this day
476	phosx_4	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
477	mgx_4	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
478	proteinx_4	Char	64	$64.	Total Protein (g/dL) (Not Done)
479	albumx_4	Char	64	$64.	Albumin (g/dL): (Not Done)
480	alt_4	Num	8		ALT
481	ck_4	Num	8		CK
482	crp_4	Num	8		CRP
483	crphl_4	Num	8		High sensitivity or regular CRP
484	crphlc_4	Char	16	$16.	High sensitivity or regular CRP

Num	Variable	Type	Len	Format	Label
485	insulinrt_5	Num	8		Insulin drip rate at time of glucose value
486	insulinsq_5	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
487	hgb_5	Num	8		Hgb (g/dL)
488	sodium_5	Num	8		Sodium (mEq/L):
489	potas_5	Num	8		Postassium (mEq/L)
490	gluc_5	Num	8		Glucose (mg/dL):
491	bicarb_5	Num	8		Serum Bicarb (mEq/L):
492	phos_5	Num	8		Serum Phosphorus (mEq/L)
493	mg_5	Num	8		Serum Magnesium (mg/dL)
494	protein_5	Num	8		Total Protein (g/dL)
495	album_5	Num	8		Albumin (g/dL):
496	prothrombin_5	Num	8		Prothrombin time (Seconds)
497	glucmin_5	Num	8		Lowest glucose this day
498	phosx_5	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
499	mgx_5	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
500	proteinx_5	Char	64	$64.	Total Protein (g/dL) (Not Done)
501	albumx_5	Char	64	$64.	Albumin (g/dL): (Not Done)
502	alt_5	Num	8		ALT
503	ck_5	Num	8		CK
504	crp_5	Num	8		CRP
505	crphl_5	Num	8		High sensitivity or regular CRP
506	crphlc_5	Char	16	$16.	High sensitivity or regular CRP
507	insulinrt_6	Num	8		Insulin drip rate at time of glucose value
508	insulinsq_6	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
509	hgb_6	Num	8		Hgb (g/dL)
510	sodium_6	Num	8		Sodium (mEq/L):
511	potas_6	Num	8		Postassium (mEq/L)
512	gluc_6	Num	8		Glucose (mg/dL):
513	bicarb_6	Num	8		Serum Bicarb (mEq/L):
514	phos_6	Num	8		Serum Phosphorus (mEq/L)
515	mg_6	Num	8		Serum Magnesium (mg/dL)
516	protein_6	Num	8		Total Protein (g/dL)
517	album_6	Num	8		Albumin (g/dL):
518	prothrombin_6	Num	8		Prothrombin time (Seconds)
519	glucmin_6	Num	8		Lowest glucose this day
520	phosx_6	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
521	mgx_6	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
522	proteinx_6	Char	64	$64.	Total Protein (g/dL) (Not Done)
523	albumx_6	Char	64	$64.	Albumin (g/dL): (Not Done)

Num	Variable	Type	Len	Format	Label
524	alt_6	Num	8		ALT
525	ck_6	Num	8		CK
526	crp_6	Num	8		CRP
527	crphl_6	Num	8		High sensitivity or regular CRP
528	crphlc_6	Char	16	$16.	High sensitivity or regular CRP
529	insulinrt_7	Num	8		Insulin drip rate at time of glucose value
530	insulinsq_7	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
531	hgb_7	Num	8		Hgb (g/dL)
532	sodium_7	Num	8		Sodium (mEq/L):
533	potas_7	Num	8		Postassium (mEq/L)
534	gluc_7	Num	8		Glucose (mg/dL):
535	bicarb_7	Num	8		Serum Bicarb (mEq/L):
536	phos_7	Num	8		Serum Phosphorus (mEq/L)
537	mg_7	Num	8		Serum Magnesium (mg/dL)
538	protein_7	Num	8		Total Protein (g/dL)
539	album_7	Num	8		Albumin (g/dL):
540	prothrombin_7	Num	8		Prothrombin time (Seconds)
541	glucmin_7	Num	8		Lowest glucose this day
542	phosx_7	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
543	mgx_7	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
544	proteinx_7	Char	64	$64.	Total Protein (g/dL) (Not Done)
545	albumx_7	Char	64	$64.	Albumin (g/dL): (Not Done)
546	alt_7	Num	8		ALT
547	ck_7	Num	8		CK
548	crp_7	Num	8		CRP
549	crphl_7	Num	8		High sensitivity or regular CRP
550	crphlc_7	Char	16	$16.	High sensitivity or regular CRP
551	insulinrt_8	Num	8		Insulin drip rate at time of glucose value
552	insulinsq_8	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
553	hgb_8	Num	8		Hgb (g/dL)
554	sodium_8	Num	8		Sodium (mEq/L):
555	potas_8	Num	8		Postassium (mEq/L)
556	gluc_8	Num	8		Glucose (mg/dL):
557	bicarb_8	Num	8		Serum Bicarb (mEq/L):
558	phos_8	Num	8		Serum Phosphorus (mEq/L)
559	mg_8	Num	8		Serum Magnesium (mg/dL)
560	protein_8	Num	8		Total Protein (g/dL)
561	album_8	Num	8		Albumin (g/dL):
562	prothrombin_8	Num	8		Prothrombin time (Seconds)

Num	Variable	Type	Len	Format	Label
563	glucmin_8	Num	8		Lowest glucose this day
564	phosx_8	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
565	mgx_8	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
566	proteinx_8	Char	64	$64.	Total Protein (g/dL) (Not Done)
567	albumx_8	Char	64	$64.	Albumin (g/dL): (Not Done)
568	alt_8	Num	8		ALT
569	ck_8	Num	8		CK
570	crp_8	Num	8		CRP
571	crphl_8	Num	8		High sensitivity or regular CRP
572	crphlc_8	Char	16	$16.	High sensitivity or regular CRP
573	insulinrt_9	Num	8		Insulin drip rate at time of glucose value
574	insulinsq_9	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
575	hgb_9	Num	8		Hgb (g/dL)
576	sodium_9	Num	8		Sodium (mEq/L):
577	potas_9	Num	8		Postassium (mEq/L)
578	gluc_9	Num	8		Glucose (mg/dL):
579	bicarb_9	Num	8		Serum Bicarb (mEq/L):
580	phos_9	Num	8		Serum Phosphorus (mEq/L)
581	mg_9	Num	8		Serum Magnesium (mg/dL)
582	protein_9	Num	8		Total Protein (g/dL)
583	album_9	Num	8		Albumin (g/dL):
584	prothrombin_9	Num	8		Prothrombin time (Seconds)
585	glucmin_9	Num	8		Lowest glucose this day
586	phosx_9	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
587	mgx_9	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
588	proteinx_9	Char	64	$64.	Total Protein (g/dL) (Not Done)
589	albumx_9	Char	64	$64.	Albumin (g/dL): (Not Done)
590	alt_9	Num	8		ALT
591	ck_9	Num	8		CK
592	crp_9	Num	8		CRP
593	crphl_9	Num	8		High sensitivity or regular CRP
594	crphlc_9	Char	16	$16.	High sensitivity or regular CRP
595	insulinrt_10	Num	8		Insulin drip rate at time of glucose value
596	insulinsq_10	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
597	hgb_10	Num	8		Hgb (g/dL)
598	sodium_10	Num	8		Sodium (mEq/L):
599	potas_10	Num	8		Postassium (mEq/L)
600	gluc_10	Num	8		Glucose (mg/dL):
601	bicarb_10	Num	8		Serum Bicarb (mEq/L):

Num	Variable	Type	Len	Format	Label
602	phos_10	Num	8		Serum Phosphorus (mEq/L)
603	mg_10	Num	8		Serum Magnesium (mg/dL)
604	protein_10	Num	8		Total Protein (g/dL)
605	album_10	Num	8		Albumin (g/dL):
606	prothrombin_10	Num	8		Prothrombin time (Seconds)
607	glucmin_10	Num	8		Lowest glucose this day
608	phosx_10	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
609	mgx_10	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
610	proteinx_10	Char	64	$64.	Total Protein (g/dL) (Not Done)
611	albumx_10	Char	64	$64.	Albumin (g/dL): (Not Done)
612	alt_10	Num	8		ALT
613	ck_10	Num	8		CK
614	crp_10	Num	8		CRP
615	crphl_10	Num	8		High sensitivity or regular CRP
616	crphlc_10	Char	16	$16.	High sensitivity or regular CRP
617	insulinrt_11	Num	8		Insulin drip rate at time of glucose value
618	insulinsq_11	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
619	hgb_11	Num	8		Hgb (g/dL)
620	sodium_11	Num	8		Sodium (mEq/L):
621	potas_11	Num	8		Postassium (mEq/L)
622	gluc_11	Num	8		Glucose (mg/dL):
623	bicarb_11	Num	8		Serum Bicarb (mEq/L):
624	phos_11	Num	8		Serum Phosphorus (mEq/L)
625	mg_11	Num	8		Serum Magnesium (mg/dL)
626	protein_11	Num	8		Total Protein (g/dL)
627	album_11	Num	8		Albumin (g/dL):
628	prothrombin_11	Num	8		Prothrombin time (Seconds)
629	glucmin_11	Num	8		Lowest glucose this day
630	phosx_11	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
631	mgx_11	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
632	proteinx_11	Char	64	$64.	Total Protein (g/dL) (Not Done)
633	albumx_11	Char	64	$64.	Albumin (g/dL): (Not Done)
634	alt_11	Num	8		ALT
635	ck_11	Num	8		CK
636	crp_11	Num	8		CRP
637	crphl_11	Num	8		High sensitivity or regular CRP
638	crphlc_11	Char	16	$16.	High sensitivity or regular CRP
639	insulinrt_12	Num	8		Insulin drip rate at time of glucose value
640	insulinsq_12	Num	8		Total sq insulin given in the 6 hours preceding the glucose value

Num	Variable	Type	Len	Format	Label
641	hgb_12	Num	8		Hgb (g/dL)
642	sodium_12	Num	8		Sodium (mEq/L):
643	potas_12	Num	8		Postassium (mEq/L)
644	gluc_12	Num	8		Glucose (mg/dL):
645	bicarb_12	Num	8		Serum Bicarb (mEq/L):
646	phos_12	Num	8		Serum Phosphorus (mEq/L)
647	mg_12	Num	8		Serum Magnesium (mg/dL)
648	protein_12	Num	8		Total Protein (g/dL)
649	album_12	Num	8		Albumin (g/dL):
650	prothrombin_12	Num	8		Prothrombin time (Seconds)
651	glucmin_12	Num	8		Lowest glucose this day
652	phosx_12	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
653	mgx_12	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
654	proteinx_12	Char	64	$64.	Total Protein (g/dL) (Not Done)
655	albumx_12	Char	64	$64.	Albumin (g/dL): (Not Done)
656	alt_12	Num	8		ALT
657	ck_12	Num	8		CK
658	crp_12	Num	8		CRP
659	crphl_12	Num	8		High sensitivity or regular CRP
660	crphlc_12	Char	16	$16.	High sensitivity or regular CRP
661	insulinrt_14	Num	8		Insulin drip rate at time of glucose value
662	insulinsq_14	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
663	hgb_14	Num	8		Hgb (g/dL)
664	sodium_14	Num	8		Sodium (mEq/L):
665	potas_14	Num	8		Postassium (mEq/L)
666	gluc_14	Num	8		Glucose (mg/dL):
667	bicarb_14	Num	8		Serum Bicarb (mEq/L):
668	phos_14	Num	8		Serum Phosphorus (mEq/L)
669	mg_14	Num	8		Serum Magnesium (mg/dL)
670	protein_14	Num	8		Total Protein (g/dL)
671	album_14	Num	8		Albumin (g/dL):
672	prothrombin_14	Num	8		Prothrombin time (Seconds)
673	glucmin_14	Num	8		Lowest glucose this day
674	phosx_14	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
675	mgx_14	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
676	proteinx_14	Char	64	$64.	Total Protein (g/dL) (Not Done)
677	albumx_14	Char	64	$64.	Albumin (g/dL): (Not Done)
678	alt_14	Num	8		ALT
679	ck_14	Num	8		CK

Num	Variable	Type	Len	Format	Label
680	crp_14	Num	8		CRP
681	crphl_14	Num	8		High sensitivity or regular CRP
682	crphlc_14	Char	16	$16.	High sensitivity or regular CRP
683	insulinrt_21	Num	8		Insulin drip rate at time of glucose value
684	insulinsq_21	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
685	hgb_21	Num	8		Hgb (g/dL)
686	sodium_21	Num	8		Sodium (mEq/L):
687	potas_21	Num	8		Postassium (mEq/L)
688	gluc_21	Num	8		Glucose (mg/dL):
689	bicarb_21	Num	8		Serum Bicarb (mEq/L):
690	phos_21	Num	8		Serum Phosphorus (mEq/L)
691	mg_21	Num	8		Serum Magnesium (mg/dL)
692	protein_21	Num	8		Total Protein (g/dL)
693	album_21	Num	8		Albumin (g/dL):
694	prothrombin_21	Num	8		Prothrombin time (Seconds)
695	glucmin_21	Num	8		Lowest glucose this day
696	phosx_21	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
697	mgx_21	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
698	proteinx_21	Char	64	$64.	Total Protein (g/dL) (Not Done)
699	albumx_21	Char	64	$64.	Albumin (g/dL): (Not Done)
700	alt_21	Num	8		ALT
701	ck_21	Num	8		CK
702	crp_21	Num	8		CRP
703	crphl_21	Num	8		High sensitivity or regular CRP
704	crphlc_21	Char	16	$16.	High sensitivity or regular CRP
705	ipatrox	Char	64		
706	hrate_0	Num	8		Heart Rate (beats/min):
707	sysbp_0	Num	8		Systolic BP (mmHg):
708	diabp_0	Num	8		Diastolic BP (mmHg)
709	cvp_0	Num	8		Central Venous Pressure (mmHg):
710	map	Num	8		Mean Arterial Pressure (mmHg):
711	temp_0	Num	8		Temperature (C)
712	height	Num	8		Measured Height (cm)
713	weight	Num	8		Measured Weight (Kg)
714	pbw	Char	255	$255.	Predicted Body Weight
715	vaso_0	Num	8		IV Vasopressors or inotropes in 24 hrs preceding randomization
716	vasoc_0	Char	3	$3.	IV Vasopressors or inotropes in 24 hrs preceding randomization
717	dobut_0	Num	8		Dobutamine Infusion Rate
718	dobutu_0	Char	9	$9.	Dobutamine Units

Num	Variable	Type	Len	Format	Label
719	dopa_0	Num	8		Dopamine Infusion Rate:
720	dopau_0	Char	9	$9.	Dopamine Units
721	norepi_0	Num	8		Norepinephrine Infusion Rate
722	norepiu_0	Char	9	$9.	Norepinephrine Units
723	epi_0	Num	8		Epinephrine Infusion Rate
724	epiu_0	Char	9	$9.	Epinephrine Units
725	vasorate_0	Num	8		Vasopressin Infusion Rate
726	neosyn_0	Num	8		Neosynephrine (phenylephrine) Infusion Rate
727	neosynu_0	Char	9	$9.	Neosynephrine (phenylephrine) Units
728	vasooth_0	Char	50	$50.	Other Vasopressor
729	betablock_0	Num	8		Beta blockers (IV, PO, PGT) in 24 hours preceding randomization?
730	betablockc_0	Char	3	$3.	Beta blockers (IV, PO, PGT) in 24 hours preceding randomization?
731	hratex_0	Char	64	$64.	Heart Rate (beats/min): (Not done)
732	sysbpx_0	Char	64	$64.	Systolic BP (mmHg): (Not Done)
733	diabpx_0	Char	64	$64.	Diastolic BP (mmHg) (Not Done)
734	tempx_0	Char	64	$64.	Temperature (C) (Not Done)
735	heightx	Char	64	$64.	Measured Height (cm) (Not Done)
736	vasox_0	Char	64	$64.	IV Vasopressors or inotropes in 24 hrs preceding randomization (Not Done)
737	betablockx_0	Char	64	$64.	Beta blockers (IV, PO, PGT) in 24 hours preceding randomization? (Not Done)
738	cxrquads_1	Num	8		CXR: Number of quadrants with infiltrates
739	cort20_1	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
740	cort20c_1	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
741	ipatro_1	Num	8		Aerosolized or MDI delivered ipatropium?
742	ipatroc_1	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
743	ipadose_1	Num	8		Yes: Enter total number of doses this day:
744	nsbetag_1	Num	8		Non-study beta-agonist aerosol this day?
745	nsbetagc_1	Char	85	$85.	Non-study beta-agonist aerosol this day?
746	nsbetagdose_1	Num	8		Yes: Enter total dose in mg this day
747	nsbetagx_1	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
748	hrate_1	Num	8		Heart Rate (beat/min):
749	sysbp_1	Num	8		Systolic BP (mmHg):
750	diabp_1	Num	8		Diastolic BP (mmHg):
751	temp_1	Num	8		Temperature (Celcius):
752	cvp_1	Num	8		CVP (mmHg):
753	vaso_1	Num	8		Vasopressors/inotropes this day?

Num	Variable	Type	Len	Format	Label
754	vasoc_1	Char	3	$3.	Vasopressors/inotropes this day?
755	dobut_1	Num	8		IV Dobutamine Infusion Rate:
756	dobutu_1	Char	9	$9.	IV Dobutamine Infusion Rate Units
757	dopa_1	Num	8		IV Dopamine Infusion Rate:
758	dopau_1	Char	9	$9.	IV Dopamine Infusion Rate Units
759	norepi_1	Num	8		IV Norepinephrine Infusion Rate:
760	norepiu_1	Char	9	$9.	IV Norepinephrine Infusion Rate Units
761	epi_1	Num	8		IV Epinephrine Infusion Rate:
762	epiu_1	Char	9	$9.	ug/kg/min or ug/min
763	vasorate_1	Num	8		IV Vasopressin Infusion Rate (units/min):
764	neosyn_1	Num	8		IV Neosynephrine Infusion Rate:
765	neosynu_1	Char	9	$9.	IV Neosynephrine Infusion Rate Units
766	vasooth_1	Char	50	$50.	If Other Please Specify:
767	betablock_1	Num	8		Beta Blockers (IV, PO, PGT) this day?
768	betablockc_1	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
769	hratex_1	Char	64	$64.	Heart Rate (beat/min): (Not Done)
770	sysbpx_1	Char	64	$64.	Systolic BP (mmHg): (Not Done)
771	diabpx_1	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
772	tempx_1	Char	64	$64.	Temperature (Celcius): (Not Done)
773	vasox_1	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
774	betablockx_1	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
775	cxrquads_2	Num	8		CXR: Number of quadrants with infiltrates
776	cort20_2	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
777	cort20c_2	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
778	ipatro_2	Num	8		Aerosolized or MDI delivered ipatropium?
779	ipatroc_2	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
780	ipadose_2	Num	8		Yes: Enter total number of doses this day:
781	nsbetag_2	Num	8		Non-study beta-agonist aerosol this day?
782	nsbetagc_2	Char	85	$85.	Non-study beta-agonist aerosol this day?
783	nsbetagdose_2	Num	8		Yes: Enter total dose in mg this day
784	nsbetagx_2	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
785	hrate_2	Num	8		Heart Rate (beat/min):
786	sysbp_2	Num	8		Systolic BP (mmHg):
787	diabp_2	Num	8		Diastolic BP (mmHg):
788	temp_2	Num	8		Temperature (Celcius):
789	cvp_2	Num	8		CVP (mmHg):
790	vaso_2	Num	8		Vasopressors/inotropes this day?

Num	Variable	Type	Len	Format	Label
791	vasoc_2	Char	3	$3.	Vasopressors/inotropes this day?
792	dobut_2	Num	8		IV Dobutamine Infusion Rate:
793	dobutu_2	Char	9	$9.	IV Dobutamine Infusion Rate Units
794	dopa_2	Num	8		IV Dopamine Infusion Rate:
795	dopau_2	Char	9	$9.	IV Dopamine Infusion Rate Units
796	norepi_2	Num	8		IV Norepinephrine Infusion Rate:
797	norepiu_2	Char	9	$9.	IV Norepinephrine Infusion Rate Units
798	epi_2	Num	8		IV Epinephrine Infusion Rate:
799	epiu_2	Char	9	$9.	ug/kg/min or ug/min
800	vasorate_2	Num	8		IV Vasopressin Infusion Rate (units/min):
801	neosyn_2	Num	8		IV Neosynephrine Infusion Rate:
802	neosynu_2	Char	9	$9.	IV Neosynephrine Infusion Rate Units
803	vasooth_2	Char	50	$50.	If Other Please Specify:
804	betablock_2	Num	8		Beta Blockers (IV, PO, PGT) this day?
805	betablockc_2	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
806	hratex_2	Char	64	$64.	Heart Rate (beat/min): (Not Done)
807	sysbpx_2	Char	64	$64.	Systolic BP (mmHg): (Not Done)
808	diabpx_2	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
809	tempx_2	Char	64	$64.	Temperature (Celcius): (Not Done)
810	vasox_2	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
811	betablockx_2	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
812	cxrquads_3	Num	8		CXR: Number of quadrants with infiltrates
813	cort20_3	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
814	cort20c_3	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
815	ipatro_3	Num	8		Aerosolized or MDI delivered ipatropium?
816	ipatroc_3	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
817	ipadose_3	Num	8		Yes: Enter total number of doses this day:
818	nsbetag_3	Num	8		Non-study beta-agonist aerosol this day?
819	nsbetagc_3	Char	85	$85.	Non-study beta-agonist aerosol this day?
820	nsbetagdose_3	Num	8		Yes: Enter total dose in mg this day
821	nsbetagx_3	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
822	hrate_3	Num	8		Heart Rate (beat/min):
823	sysbp_3	Num	8		Systolic BP (mmHg):
824	diabp_3	Num	8		Diastolic BP (mmHg):
825	temp_3	Num	8		Temperature (Celcius):
826	cvp_3	Num	8		CVP (mmHg):
827	vaso_3	Num	8		Vasopressors/inotropes this day?

Num	Variable	Type	Len	Format	Label
828	vasoc_3	Char	3	$3.	Vasopressors/inotropes this day?
829	dobut_3	Num	8		IV Dobutamine Infusion Rate:
830	dobutu_3	Char	9	$9.	IV Dobutamine Infusion Rate Units
831	dopa_3	Num	8		IV Dopamine Infusion Rate:
832	dopau_3	Char	9	$9.	IV Dopamine Infusion Rate Units
833	norepi_3	Num	8		IV Norepinephrine Infusion Rate:
834	norepiu_3	Char	9	$9.	IV Norepinephrine Infusion Rate Units
835	epi_3	Num	8		IV Epinephrine Infusion Rate:
836	epiu_3	Char	9	$9.	ug/kg/min or ug/min
837	vasorate_3	Num	8		IV Vasopressin Infusion Rate (units/min):
838	neosyn_3	Num	8		IV Neosynephrine Infusion Rate:
839	neosynu_3	Char	9	$9.	IV Neosynephrine Infusion Rate Units
840	vasooth_3	Char	50	$50.	If Other Please Specify:
841	betablock_3	Num	8		Beta Blockers (IV, PO, PGT) this day?
842	betablockc_3	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
843	hratex_3	Char	64	$64.	Heart Rate (beat/min): (Not Done)
844	sysbpx_3	Char	64	$64.	Systolic BP (mmHg): (Not Done)
845	diabpx_3	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
846	tempx_3	Char	64	$64.	Temperature (Celcius): (Not Done)
847	vasox_3	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
848	betablockx_3	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
849	cxrquads_4	Num	8		CXR: Number of quadrants with infiltrates
850	cort20_4	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
851	cort20c_4	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
852	ipatro_4	Num	8		Aerosolized or MDI delivered ipatropium?
853	ipatroc_4	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
854	ipadose_4	Num	8		Yes: Enter total number of doses this day:
855	nsbetag_4	Num	8		Non-study beta-agonist aerosol this day?
856	nsbetagc_4	Char	85	$85.	Non-study beta-agonist aerosol this day?
857	nsbetagdose_4	Num	8		Yes: Enter total dose in mg this day
858	nsbetagx_4	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
859	hrate_4	Num	8		Heart Rate (beat/min):
860	sysbp_4	Num	8		Systolic BP (mmHg):
861	diabp_4	Num	8		Diastolic BP (mmHg):
862	temp_4	Num	8		Temperature (Celcius):
863	cvp_4	Num	8		CVP (mmHg):
864	vaso_4	Num	8		Vasopressors/inotropes this day?

Num	Variable	Type	Len	Format	Label
865	vasoc_4	Char	3	$3.	Vasopressors/inotropes this day?
866	dobut_4	Num	8		IV Dobutamine Infusion Rate:
867	dobutu_4	Char	9	$9.	IV Dobutamine Infusion Rate Units
868	dopa_4	Num	8		IV Dopamine Infusion Rate:
869	dopau_4	Char	9	$9.	IV Dopamine Infusion Rate Units
870	norepi_4	Num	8		IV Norepinephrine Infusion Rate:
871	norepiu_4	Char	9	$9.	IV Norepinephrine Infusion Rate Units
872	epi_4	Num	8		IV Epinephrine Infusion Rate:
873	epiu_4	Char	9	$9.	ug/kg/min or ug/min
874	vasorate_4	Num	8		IV Vasopressin Infusion Rate (units/min):
875	neosyn_4	Num	8		IV Neosynephrine Infusion Rate:
876	neosynu_4	Char	9	$9.	IV Neosynephrine Infusion Rate Units
877	vasooth_4	Char	50	$50.	If Other Please Specify:
878	betablock_4	Num	8		Beta Blockers (IV, PO, PGT) this day?
879	betablockc_4	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
880	hratex_4	Char	64	$64.	Heart Rate (beat/min): (Not Done)
881	sysbpx_4	Char	64	$64.	Systolic BP (mmHg): (Not Done)
882	diabpx_4	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
883	tempx_4	Char	64	$64.	Temperature (Celcius): (Not Done)
884	vasox_4	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
885	betablockx_4	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
886	cxrquads_5	Num	8		CXR: Number of quadrants with infiltrates
887	cort20_5	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
888	cort20c_5	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
889	ipatro_5	Num	8		Aerosolized or MDI delivered ipatropium?
890	ipatroc_5	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
891	ipadose_5	Num	8		Yes: Enter total number of doses this day:
892	nsbetag_5	Num	8		Non-study beta-agonist aerosol this day?
893	nsbetagc_5	Char	85	$85.	Non-study beta-agonist aerosol this day?
894	nsbetagdose_5	Num	8		Yes: Enter total dose in mg this day
895	nsbetagx_5	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
896	hrate_5	Num	8		Heart Rate (beat/min):
897	sysbp_5	Num	8		Systolic BP (mmHg):
898	diabp_5	Num	8		Diastolic BP (mmHg):
899	temp_5	Num	8		Temperature (Celcius):
900	cvp_5	Num	8		CVP (mmHg):
901	vaso_5	Num	8		Vasopressors/inotropes this day?

Num	Variable	Type	Len	Format	Label
902	vasoc_5	Char	3	$3.	Vasopressors/inotropes this day?
903	dobut_5	Num	8		IV Dobutamine Infusion Rate:
904	dobutu_5	Char	9	$9.	IV Dobutamine Infusion Rate Units
905	dopa_5	Num	8		IV Dopamine Infusion Rate:
906	dopau_5	Char	9	$9.	IV Dopamine Infusion Rate Units
907	norepi_5	Num	8		IV Norepinephrine Infusion Rate:
908	norepiu_5	Char	9	$9.	IV Norepinephrine Infusion Rate Units
909	epi_5	Num	8		IV Epinephrine Infusion Rate:
910	epiu_5	Char	9	$9.	ug/kg/min or ug/min
911	vasorate_5	Num	8		IV Vasopressin Infusion Rate (units/min):
912	neosyn_5	Num	8		IV Neosynephrine Infusion Rate:
913	neosynu_5	Char	9	$9.	IV Neosynephrine Infusion Rate Units
914	vasooth_5	Char	50	$50.	If Other Please Specify:
915	betablock_5	Num	8		Beta Blockers (IV, PO, PGT) this day?
916	betablockc_5	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
917	hratex_5	Char	64	$64.	Heart Rate (beat/min): (Not Done)
918	sysbpx_5	Char	64	$64.	Systolic BP (mmHg): (Not Done)
919	diabpx_5	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
920	tempx_5	Char	64	$64.	Temperature (Celcius): (Not Done)
921	vasox_5	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
922	betablockx_5	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
923	cxrquads_6	Num	8		CXR: Number of quadrants with infiltrates
924	cort20_6	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
925	cort20c_6	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
926	ipatro_6	Num	8		Aerosolized or MDI delivered ipatropium?
927	ipatroc_6	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
928	ipadose_6	Num	8		Yes: Enter total number of doses this day:
929	nsbetag_6	Num	8		Non-study beta-agonist aerosol this day?
930	nsbetagc_6	Char	85	$85.	Non-study beta-agonist aerosol this day?
931	nsbetagdose_6	Num	8		Yes: Enter total dose in mg this day
932	nsbetagx_6	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
933	hrate_6	Num	8		Heart Rate (beat/min):
934	sysbp_6	Num	8		Systolic BP (mmHg):
935	diabp_6	Num	8		Diastolic BP (mmHg):
936	temp_6	Num	8		Temperature (Celcius):
937	cvp_6	Num	8		CVP (mmHg):
938	vaso_6	Num	8		Vasopressors/inotropes this day?

Num	Variable	Type	Len	Format	Label
939	vasoc_6	Char	3	$3.	Vasopressors/inotropes this day?
940	dobut_6	Num	8		IV Dobutamine Infusion Rate:
941	dobutu_6	Char	9	$9.	IV Dobutamine Infusion Rate Units
942	dopa_6	Num	8		IV Dopamine Infusion Rate:
943	dopau_6	Char	9	$9.	IV Dopamine Infusion Rate Units
944	norepi_6	Num	8		IV Norepinephrine Infusion Rate:
945	norepiu_6	Char	9	$9.	IV Norepinephrine Infusion Rate Units
946	epi_6	Num	8		IV Epinephrine Infusion Rate:
947	epiu_6	Char	9	$9.	ug/kg/min or ug/min
948	vasorate_6	Num	8		IV Vasopressin Infusion Rate (units/min):
949	neosyn_6	Num	8		IV Neosynephrine Infusion Rate:
950	neosynu_6	Char	9	$9.	IV Neosynephrine Infusion Rate Units
951	vasooth_6	Char	50	$50.	If Other Please Specify:
952	betablock_6	Num	8		Beta Blockers (IV, PO, PGT) this day?
953	betablockc_6	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
954	hratex_6	Char	64	$64.	Heart Rate (beat/min): (Not Done)
955	sysbpx_6	Char	64	$64.	Systolic BP (mmHg): (Not Done)
956	diabpx_6	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
957	tempx_6	Char	64	$64.	Temperature (Celcius): (Not Done)
958	vasox_6	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
959	betablockx_6	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
960	cxrquads_7	Num	8		CXR: Number of quadrants with infiltrates
961	cort20_7	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
962	cort20c_7	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
963	ipatro_7	Num	8		Aerosolized or MDI delivered ipatropium?
964	ipatroc_7	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
965	ipadose_7	Num	8		Yes: Enter total number of doses this day:
966	nsbetag_7	Num	8		Non-study beta-agonist aerosol this day?
967	nsbetagc_7	Char	85	$85.	Non-study beta-agonist aerosol this day?
968	nsbetagdose_7	Num	8		Yes: Enter total dose in mg this day
969	nsbetagx_7	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
970	hrate_7	Num	8		Heart Rate (beat/min):
971	sysbp_7	Num	8		Systolic BP (mmHg):
972	diabp_7	Num	8		Diastolic BP (mmHg):
973	temp_7	Num	8		Temperature (Celcius):
974	cvp_7	Num	8		CVP (mmHg):
975	vaso_7	Num	8		Vasopressors/inotropes this day?

Num	Variable	Type	Len	Format	Label
976	vasoc_7	Char	3	$3.	Vasopressors/inotropes this day?
977	dobut_7	Num	8		IV Dobutamine Infusion Rate:
978	dobutu_7	Char	9	$9.	IV Dobutamine Infusion Rate Units
979	dopa_7	Num	8		IV Dopamine Infusion Rate:
980	dopau_7	Char	9	$9.	IV Dopamine Infusion Rate Units
981	norepi_7	Num	8		IV Norepinephrine Infusion Rate:
982	norepiu_7	Char	9	$9.	IV Norepinephrine Infusion Rate Units
983	epi_7	Num	8		IV Epinephrine Infusion Rate:
984	epiu_7	Char	9	$9.	ug/kg/min or ug/min
985	vasorate_7	Num	8		IV Vasopressin Infusion Rate (units/min):
986	neosyn_7	Num	8		IV Neosynephrine Infusion Rate:
987	neosynu_7	Char	9	$9.	IV Neosynephrine Infusion Rate Units
988	vasooth_7	Char	50	$50.	If Other Please Specify:
989	betablock_7	Num	8		Beta Blockers (IV, PO, PGT) this day?
990	betablockc_7	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
991	hratex_7	Char	64	$64.	Heart Rate (beat/min): (Not Done)
992	sysbpx_7	Char	64	$64.	Systolic BP (mmHg): (Not Done)
993	diabpx_7	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
994	tempx_7	Char	64	$64.	Temperature (Celcius): (Not Done)
995	vasox_7	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
996	betablockx_7	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
997	cxrquads_8	Num	8		CXR: Number of quadrants with infiltrates
998	cort20_8	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
999	cort20c_8	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
1000	ipatro_8	Num	8		Aerosolized or MDI delivered ipatropium?
1001	ipatroc_8	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
1002	ipadose_8	Num	8		Yes: Enter total number of doses this day:
1003	nsbetag_8	Num	8		Non-study beta-agonist aerosol this day?
1004	nsbetagc_8	Char	85	$85.	Non-study beta-agonist aerosol this day?
1005	nsbetagdose_8	Num	8		Yes: Enter total dose in mg this day
1006	nsbetagx_8	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
1007	hrate_8	Num	8		Heart Rate (beat/min):
1008	sysbp_8	Num	8		Systolic BP (mmHg):
1009	diabp_8	Num	8		Diastolic BP (mmHg):
1010	temp_8	Num	8		Temperature (Celcius):
1011	cvp_8	Num	8		CVP (mmHg):
1012	vaso_8	Num	8		Vasopressors/inotropes this day?

Num	Variable	Type	Len	Format	Label
1013	vasoc_8	Char	3	$3.	Vasopressors/inotropes this day?
1014	dobut_8	Num	8		IV Dobutamine Infusion Rate:
1015	dobutu_8	Char	9	$9.	IV Dobutamine Infusion Rate Units
1016	dopa_8	Num	8		IV Dopamine Infusion Rate:
1017	dopau_8	Char	9	$9.	IV Dopamine Infusion Rate Units
1018	norepi_8	Num	8		IV Norepinephrine Infusion Rate:
1019	norepiu_8	Char	9	$9.	IV Norepinephrine Infusion Rate Units
1020	epi_8	Num	8		IV Epinephrine Infusion Rate:
1021	epiu_8	Char	9	$9.	ug/kg/min or ug/min
1022	vasorate_8	Num	8		IV Vasopressin Infusion Rate (units/min):
1023	neosyn_8	Num	8		IV Neosynephrine Infusion Rate:
1024	neosynu_8	Char	9	$9.	IV Neosynephrine Infusion Rate Units
1025	vasooth_8	Char	50	$50.	If Other Please Specify:
1026	betablock_8	Num	8		Beta Blockers (IV, PO, PGT) this day?
1027	betablockc_8	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
1028	hratex_8	Char	64	$64.	Heart Rate (beat/min): (Not Done)
1029	sysbpx_8	Char	64	$64.	Systolic BP (mmHg): (Not Done)
1030	diabpx_8	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
1031	tempx_8	Char	64	$64.	Temperature (Celcius): (Not Done)
1032	vasox_8	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
1033	betablockx_8	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
1034	cxrquads_9	Num	8		CXR: Number of quadrants with infiltrates
1035	cort20_9	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
1036	cort20c_9	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
1037	ipatro_9	Num	8		Aerosolized or MDI delivered ipatropium?
1038	ipatroc_9	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
1039	ipadose_9	Num	8		Yes: Enter total number of doses this day:
1040	nsbetag_9	Num	8		Non-study beta-agonist aerosol this day?
1041	nsbetagc_9	Char	85	$85.	Non-study beta-agonist aerosol this day?
1042	nsbetagdose_9	Num	8		Yes: Enter total dose in mg this day
1043	nsbetagx_9	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
1044	hrate_9	Num	8		Heart Rate (beat/min):
1045	sysbp_9	Num	8		Systolic BP (mmHg):
1046	diabp_9	Num	8		Diastolic BP (mmHg):
1047	temp_9	Num	8		Temperature (Celcius):
1048	cvp_9	Num	8		CVP (mmHg):
1049	vaso_9	Num	8		Vasopressors/inotropes this day?

Num	Variable	Type	Len	Format	Label
1050	vasoc_9	Char	3	$3.	Vasopressors/inotropes this day?
1051	dobut_9	Num	8		IV Dobutamine Infusion Rate:
1052	dobutu_9	Char	9	$9.	IV Dobutamine Infusion Rate Units
1053	dopa_9	Num	8		IV Dopamine Infusion Rate:
1054	dopau_9	Char	9	$9.	IV Dopamine Infusion Rate Units
1055	norepi_9	Num	8		IV Norepinephrine Infusion Rate:
1056	norepiu_9	Char	9	$9.	IV Norepinephrine Infusion Rate Units
1057	epi_9	Num	8		IV Epinephrine Infusion Rate:
1058	epiu_9	Char	9	$9.	ug/kg/min or ug/min
1059	vasorate_9	Num	8		IV Vasopressin Infusion Rate (units/min):
1060	neosyn_9	Num	8		IV Neosynephrine Infusion Rate:
1061	neosynu_9	Char	9	$9.	IV Neosynephrine Infusion Rate Units
1062	vasooth_9	Char	50	$50.	If Other Please Specify:
1063	betablock_9	Num	8		Beta Blockers (IV, PO, PGT) this day?
1064	betablockc_9	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
1065	hratex_9	Char	64	$64.	Heart Rate (beat/min): (Not Done)
1066	sysbpx_9	Char	64	$64.	Systolic BP (mmHg): (Not Done)
1067	diabpx_9	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
1068	tempx_9	Char	64	$64.	Temperature (Celcius): (Not Done)
1069	vasox_9	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
1070	betablockx_9	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
1071	cxrquads_10	Num	8		CXR: Number of quadrants with infiltrates
1072	cort20_10	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
1073	cort20c_10	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
1074	ipatro_10	Num	8		Aerosolized or MDI delivered ipatropium?
1075	ipatroc_10	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
1076	ipadose_10	Num	8		Yes: Enter total number of doses this day:
1077	nsbetag_10	Num	8		Non-study beta-agonist aerosol this day?
1078	nsbetagc_10	Char	85	$85.	Non-study beta-agonist aerosol this day?
1079	nsbetagdose_10	Num	8		Yes: Enter total dose in mg this day
1080	nsbetagx_10	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
1081	hrate_10	Num	8		Heart Rate (beat/min):
1082	sysbp_10	Num	8		Systolic BP (mmHg):
1083	diabp_10	Num	8		Diastolic BP (mmHg):
1084	temp_10	Num	8		Temperature (Celcius):
1085	cvp_10	Num	8		CVP (mmHg):
1086	vaso_10	Num	8		Vasopressors/inotropes this day?

Num	Variable	Type	Len	Format	Label
1087	vasoc_10	Char	3	$3.	Vasopressors/inotropes this day?
1088	dobut_10	Num	8		IV Dobutamine Infusion Rate:
1089	dobutu_10	Char	9	$9.	IV Dobutamine Infusion Rate Units
1090	dopa_10	Num	8		IV Dopamine Infusion Rate:
1091	dopau_10	Char	9	$9.	IV Dopamine Infusion Rate Units
1092	norepi_10	Num	8		IV Norepinephrine Infusion Rate:
1093	norepiu_10	Char	9	$9.	IV Norepinephrine Infusion Rate Units
1094	epi_10	Num	8		IV Epinephrine Infusion Rate:
1095	epiu_10	Char	9	$9.	ug/kg/min or ug/min
1096	vasorate_10	Num	8		IV Vasopressin Infusion Rate (units/min):
1097	neosyn_10	Num	8		IV Neosynephrine Infusion Rate:
1098	neosynu_10	Char	9	$9.	IV Neosynephrine Infusion Rate Units
1099	vasooth_10	Char	50	$50.	If Other Please Specify:
1100	betablock_10	Num	8		Beta Blockers (IV, PO, PGT) this day?
1101	betablockc_10	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
1102	hratex_10	Char	64	$64.	Heart Rate (beat/min): (Not Done)
1103	sysbpx_10	Char	64	$64.	Systolic BP (mmHg): (Not Done)
1104	diabpx_10	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
1105	tempx_10	Char	64	$64.	Temperature (Celcius): (Not Done)
1106	vasox_10	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
1107	betablockx_10	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
1108	simv_0	Num	8		SIMV
1109	simvc_0	Char	4	$4.	SIMV
1110	prvc_0	Num	8		PRVC (pressure regulated volume control) or equivalent
1111	prvc2_0	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
1112	pressup_0	Num	8		Pressure Support (y/n)
1113	pressupc_0	Char	16	$16.	Pressure Support (y/n)
1114	pressupcmH2O	Num	8		Pressure Support cmH2O
1115	volassist_0	Num	8		Volume Assist/Control
1116	volassistc_0	Char	21	$21.	Volume Assist/Control
1117	presassist_0	Num	8		Pressure Assist (y/n)
1118	presassistc_0	Char	15	$15.	Pressure Assist (y/n)
1119	presascmH2O	Num	8		Pressure Assist cmH2O
1120	pcirv_0	Num	8		PC IRV
1121	pcirvc_0	Char	6	$6.	PC IRV
1122	aprv_0	Num	8		Airway Pressure Release Ventilation (APRV)
1123	aprvc_0	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
1124	ventoth_0	Num	8		Other vent mode
1125	ventothc_0	Char	5	$5.	Other vent mode

Num	Variable	Type	Len	Format	Label
1126	hfov_0	Num	8		HFOV
1127	hfovc_0	Char	4	$4.	HFOV
1128	othvent_0	Char	255	$255.	Enter other vent mode:
1129	tidal_0	Num	8		Calculated Delivered Tidal Volume
1130	setrate_0	Num	8		Set Rate
1131	resp_0	Num	8		Total Respiratory Rate
1132	minvent_0	Num	8		Total Minute Ventilation (L/min)
1133	peep_0	Num	8		PEEP (cm H2O):
1134	fio2_0	Num	8		FiO2 prior to randomization
1135	SpO2_0	Num	8		SpO2 prior to randomization
1136	pplat_0	Num	8		Plateau Pressure (cm H2O):
1137	pip_0	Num	8		Peak Inspiratory Pressure
1138	meanair_0	Num	8		Mean airway pressure
1139	tidalpost	Num	8		Calculated delivered tidal volume after vent change
1140	pplatpost	Num	8		Plateau Pressure after vent change
1141	peeppost	Num	8		PEEP after vent change
1142	spo2abg_0	Num	8		SpO2 at time of ABG
1143	ventX	Char	64	$64.	Vent Mode (Not Done)
1144	tidalx_0	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
1145	respX	Char	64	$64.	Total Respiratory Rate (Not Done)
1146	minventX	Char	64	$64.	Total Minute Ventilation (L/min) (Not Done)
1147	peepx_0	Char	64	$64.	PEEP (cm H2O): (Not Done)
1148	fio2x_0	Char	64	$64.	FiO2 prior to randomization (Not Done)
1149	SpO2x_0	Char	64	$64.	SpO2 prior to randomization (Not Done)
1150	meanairX	Char	64	$64.	Mean airway pressure (Not Done)
1151	pressupcmh2o_1	Num	8		Pressure Support cmH2O
1152	presascmh2o_1	Num	8		Pressure Assist cmH2O
1153	ventmodex_1	Char	64	$64.	Vent mode: (Not Done)
1154	respx_1	Char	64	$64.	Total Respiratory Rate (Not Done)
1155	minventx_1	Char	64	$64.	Total Minute Ventilation (Not Done)
1156	meanairx_1	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
1157	simv_1	Num	8		SIMV
1158	simvc_1	Char	4	$4.	SIMV
1159	prvc_1	Num	8		PRVC (pressure regulated volume control) or equivalent
1160	prvc2_1	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
1161	pressup_1	Num	8		Pressure Support (y/n)
1162	pressupc_1	Char	16	$16.	Pressure Support (y/n)
1163	volassist_1	Num	8		Volume Assist/Control
1164	volassistc_1	Char	21	$21.	Volume Assist/Control

Num	Variable	Type	Len	Format	Label
1165	presassist_1	Num	8		Pressure Assist (y/n)
1166	presassistc_1	Char	15	$15.	Pressure Assist (y/n)
1167	pcirv_1	Num	8		PC IRV
1168	pcirvc_1	Char	6	$6.	PC IRV
1169	aprv_1	Num	8		Airway Pressure Release Ventilation (APRV)
1170	aprvc_1	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
1171	ventoth_1	Num	8		Other vent mode
1172	ventothc_1	Char	5	$5.	Other vent mode
1173	hfov_1	Num	8		HFOV
1174	hfovc_1	Char	4	$4.	HFOV
1175	othvent_1	Char	255	$255.	Enter other vent mode:
1176	tidal_1	Num	8		Calculated Delivered Tidal Volume
1177	setrate_1	Num	8		Set Rate
1178	resp_1	Num	8		Total Respiratory Rate
1179	minvent_1	Num	8		Total Minute Ventilation
1180	peep_1	Num	8		PEEP (cm H2O):
1181	fio2_1	Num	8		FiO2 at 0800
1182	SpO2_1	Num	8		SpO2 at 0800
1183	pplat_1	Num	8		Plateau Pressure (cm H2O):
1184	pip_1	Num	8		Peak Inspiratory Pressure
1185	meanair_1	Num	8		Mean airway pressure (cm H2O)
1186	fio2abg_1	Num	8		FiO2 at time of ABG:
1187	pao2abg_1	Num	8		PaO2 (cm H20):
1188	paco2abg_1	Num	8		PaCO2 (cm H20):
1189	phabg_1	Num	8		Arterial pH:
1190	spo2abg_1	Num	8		SpO2 at time of ABG
1191	tidalx_1	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
1192	peepx_1	Char	64	$64.	PEEP (cm H2O): (Not Done)
1193	fio2x_1	Char	64	$64.	FiO2 at 0800 (Not Done)
1194	SpO2x_1	Char	64	$64.	SpO2 at 0800 (Not Done)
1195	pressupcmh2o_2	Num	8		Pressure Support cmH2O
1196	presascmh2o_2	Num	8		Pressure Assist cmH2O
1197	ventmodex_2	Char	64	$64.	Vent mode: (Not Done)
1198	respx_2	Char	64	$64.	Total Respiratory Rate (Not Done)
1199	minventx_2	Char	64	$64.	Total Minute Ventilation (Not Done)
1200	meanairx_2	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
1201	simv_2	Num	8		SIMV
1202	simvc_2	Char	4	$4.	SIMV
1203	prvc_2	Num	8		PRVC (pressure regulated volume control) or equivalent

Num	Variable	Type	Len	Format	Label
1204	prvc2_2	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
1205	pressup_2	Num	8		Pressure Support (y/n)
1206	pressupc_2	Char	16	$16.	Pressure Support (y/n)
1207	volassist_2	Num	8		Volume Assist/Control
1208	volassistc_2	Char	21	$21.	Volume Assist/Control
1209	presassist_2	Num	8		Pressure Assist (y/n)
1210	presassistc_2	Char	15	$15.	Pressure Assist (y/n)
1211	pcirv_2	Num	8		PC IRV
1212	pcirvc_2	Char	6	$6.	PC IRV
1213	aprv_2	Num	8		Airway Pressure Release Ventilation (APRV)
1214	aprvc_2	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
1215	ventoth_2	Num	8		Other vent mode
1216	ventothc_2	Char	5	$5.	Other vent mode
1217	hfov_2	Num	8		HFOV
1218	hfovc_2	Char	4	$4.	HFOV
1219	othvent_2	Char	255	$255.	Enter other vent mode:
1220	tidal_2	Num	8		Calculated Delivered Tidal Volume
1221	setrate_2	Num	8		Set Rate
1222	resp_2	Num	8		Total Respiratory Rate
1223	minvent_2	Num	8		Total Minute Ventilation
1224	peep_2	Num	8		PEEP (cm H2O):
1225	fio2_2	Num	8		FiO2 at 0800
1226	SpO2_2	Num	8		SpO2 at 0800
1227	pplat_2	Num	8		Plateau Pressure (cm H2O):
1228	pip_2	Num	8		Peak Inspiratory Pressure
1229	meanair_2	Num	8		Mean airway pressure (cm H2O)
1230	fio2abg_2	Num	8		FiO2 at time of ABG:
1231	pao2abg_2	Num	8		PaO2 (cm H20):
1232	paco2abg_2	Num	8		PaCO2 (cm H20):
1233	phabg_2	Num	8		Arterial pH:
1234	spo2abg_2	Num	8		SpO2 at time of ABG
1235	tidalx_2	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
1236	peepx_2	Char	64	$64.	PEEP (cm H2O): (Not Done)
1237	fio2x_2	Char	64	$64.	FiO2 at 0800 (Not Done)
1238	SpO2x_2	Char	64	$64.	SpO2 at 0800 (Not Done)
1239	pressupcmh2o_3	Num	8		Pressure Support cmH2O
1240	presascmh2o_3	Num	8		Pressure Assist cmH2O
1241	ventmodex_3	Char	64	$64.	Vent mode: (Not Done)
1242	respx_3	Char	64	$64.	Total Respiratory Rate (Not Done)

Num	Variable	Type	Len	Format	Label
1243	minventx_3	Char	64	$64.	Total Minute Ventilation (Not Done)
1244	meanairx_3	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
1245	simv_3	Num	8		SIMV
1246	simvc_3	Char	4	$4.	SIMV
1247	prvc_3	Num	8		PRVC (pressure regulated volume control) or equivalent
1248	prvc2_3	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
1249	pressup_3	Num	8		Pressure Support (y/n)
1250	pressupc_3	Char	16	$16.	Pressure Support (y/n)
1251	volassist_3	Num	8		Volume Assist/Control
1252	volassistc_3	Char	21	$21.	Volume Assist/Control
1253	presassist_3	Num	8		Pressure Assist (y/n)
1254	presassistc_3	Char	15	$15.	Pressure Assist (y/n)
1255	pcirv_3	Num	8		PC IRV
1256	pcirvc_3	Char	6	$6.	PC IRV
1257	aprv_3	Num	8		Airway Pressure Release Ventilation (APRV)
1258	aprvc_3	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
1259	ventoth_3	Num	8		Other vent mode
1260	ventothc_3	Char	5	$5.	Other vent mode
1261	hfov_3	Num	8		HFOV
1262	hfovc_3	Char	4	$4.	HFOV
1263	othvent_3	Char	255	$255.	Enter other vent mode:
1264	tidal_3	Num	8		Calculated Delivered Tidal Volume
1265	setrate_3	Num	8		Set Rate
1266	resp_3	Num	8		Total Respiratory Rate
1267	minvent_3	Num	8		Total Minute Ventilation
1268	peep_3	Num	8		PEEP (cm H2O):
1269	fio2_3	Num	8		FiO2 at 0800
1270	SpO2_3	Num	8		SpO2 at 0800
1271	pplat_3	Num	8		Plateau Pressure (cm H2O):
1272	pip_3	Num	8		Peak Inspiratory Pressure
1273	meanair_3	Num	8		Mean airway pressure (cm H2O)
1274	fio2abg_3	Num	8		FiO2 at time of ABG:
1275	pao2abg_3	Num	8		PaO2 (cm H20):
1276	paco2abg_3	Num	8		PaCO2 (cm H20):
1277	phabg_3	Num	8		Arterial pH:
1278	spo2abg_3	Num	8		SpO2 at time of ABG
1279	tidalx_3	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
1280	peepx_3	Char	64	$64.	PEEP (cm H2O): (Not Done)
1281	fio2x_3	Char	64	$64.	FiO2 at 0800 (Not Done)

Num	Variable	Type	Len	Format	Label
1282	SpO2x_3	Char	64	$64.	SpO2 at 0800 (Not Done)
1283	pressupcmh2o_4	Num	8		Pressure Support cmH2O
1284	presascmh2o_4	Num	8		Pressure Assist cmH2O
1285	ventmodex_4	Char	64	$64.	Vent mode: (Not Done)
1286	respx_4	Char	64	$64.	Total Respiratory Rate (Not Done)
1287	minventx_4	Char	64	$64.	Total Minute Ventilation (Not Done)
1288	meanairx_4	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
1289	simv_4	Num	8		SIMV
1290	simvc_4	Char	4	$4.	SIMV
1291	prvc_4	Num	8		PRVC (pressure regulated volume control) or equivalent
1292	prvc2_4	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
1293	pressup_4	Num	8		Pressure Support (y/n)
1294	pressupc_4	Char	16	$16.	Pressure Support (y/n)
1295	volassist_4	Num	8		Volume Assist/Control
1296	volassistc_4	Char	21	$21.	Volume Assist/Control
1297	presassist_4	Num	8		Pressure Assist (y/n)
1298	presassistc_4	Char	15	$15.	Pressure Assist (y/n)
1299	pcirv_4	Num	8		PC IRV
1300	pcirvc_4	Char	6	$6.	PC IRV
1301	aprv_4	Num	8		Airway Pressure Release Ventilation (APRV)
1302	aprvc_4	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
1303	ventoth_4	Num	8		Other vent mode
1304	ventothc_4	Char	5	$5.	Other vent mode
1305	hfov_4	Num	8		HFOV
1306	hfovc_4	Char	4	$4.	HFOV
1307	othvent_4	Char	255	$255.	Enter other vent mode:
1308	tidal_4	Num	8		Calculated Delivered Tidal Volume
1309	setrate_4	Num	8		Set Rate
1310	resp_4	Num	8		Total Respiratory Rate
1311	minvent_4	Num	8		Total Minute Ventilation
1312	peep_4	Num	8		PEEP (cm H2O):
1313	fio2_4	Num	8		FiO2 at 0800
1314	SpO2_4	Num	8		SpO2 at 0800
1315	pplat_4	Num	8		Plateau Pressure (cm H2O):
1316	pip_4	Num	8		Peak Inspiratory Pressure
1317	meanair_4	Num	8		Mean airway pressure (cm H2O)
1318	fio2abg_4	Num	8		FiO2 at time of ABG:
1319	pao2abg_4	Num	8		PaO2 (cm H20):
1320	paco2abg_4	Num	8		PaCO2 (cm H20):

Num	Variable	Type	Len	Format	Label
1321	phabg_4	Num	8		Arterial pH:
1322	spo2abg_4	Num	8		SpO2 at time of ABG
1323	tidalx_4	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
1324	peepx_4	Char	64	$64.	PEEP (cm H2O): (Not Done)
1325	fio2x_4	Char	64	$64.	FiO2 at 0800 (Not Done)
1326	SpO2x_4	Char	64	$64.	SpO2 at 0800 (Not Done)
1327	pressupcmh2o_7	Num	8		Pressure Support cmH2O
1328	presascmh2o_7	Num	8		Pressure Assist cmH2O
1329	ventmodex_7	Char	64	$64.	Vent mode: (Not Done)
1330	respx_7	Char	64	$64.	Total Respiratory Rate (Not Done)
1331	minventx_7	Char	64	$64.	Total Minute Ventilation (Not Done)
1332	meanairx_7	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
1333	simv_7	Num	8		SIMV
1334	simvc_7	Char	4	$4.	SIMV
1335	prvc_7	Num	8		PRVC (pressure regulated volume control) or equivalent
1336	prvc2_7	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
1337	pressup_7	Num	8		Pressure Support (y/n)
1338	pressupc_7	Char	16	$16.	Pressure Support (y/n)
1339	volassist_7	Num	8		Volume Assist/Control
1340	volassistc_7	Char	21	$21.	Volume Assist/Control
1341	presassist_7	Num	8		Pressure Assist (y/n)
1342	presassistc_7	Char	15	$15.	Pressure Assist (y/n)
1343	pcirv_7	Num	8		PC IRV
1344	pcirvc_7	Char	6	$6.	PC IRV
1345	aprv_7	Num	8		Airway Pressure Release Ventilation (APRV)
1346	aprvc_7	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
1347	ventoth_7	Num	8		Other vent mode
1348	ventothc_7	Char	5	$5.	Other vent mode
1349	hfov_7	Num	8		HFOV
1350	hfovc_7	Char	4	$4.	HFOV
1351	othvent_7	Char	255	$255.	Enter other vent mode:
1352	tidal_7	Num	8		Calculated Delivered Tidal Volume
1353	setrate_7	Num	8		Set Rate
1354	resp_7	Num	8		Total Respiratory Rate
1355	minvent_7	Num	8		Total Minute Ventilation
1356	peep_7	Num	8		PEEP (cm H2O):
1357	fio2_7	Num	8		FiO2 at 0800
1358	SpO2_7	Num	8		SpO2 at 0800
1359	pplat_7	Num	8		Plateau Pressure (cm H2O):

Num	Variable	Type	Len	Format	Label
1360	pip_7	Num	8		Peak Inspiratory Pressure
1361	meanair_7	Num	8		Mean airway pressure (cm H2O)
1362	fio2abg_7	Num	8		FiO2 at time of ABG:
1363	pao2abg_7	Num	8		PaO2 (cm H20):
1364	paco2abg_7	Num	8		PaCO2 (cm H20):
1365	phabg_7	Num	8		Arterial pH:
1366	spo2abg_7	Num	8		SpO2 at time of ABG
1367	tidalx_7	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
1368	peepx_7	Char	64	$64.	PEEP (cm H2O): (Not Done)
1369	fio2x_7	Char	64	$64.	FiO2 at 0800 (Not Done)
1370	SpO2x_7	Char	64	$64.	SpO2 at 0800 (Not Done)
1371	pressupcmh2o_12	Num	8		Pressure Support cmH2O
1372	presascmh2o_12	Num	8		Pressure Assist cmH2O
1373	ventmodex_12	Char	64	$64.	Vent mode: (Not Done)
1374	respx_12	Char	64	$64.	Total Respiratory Rate (Not Done)
1375	minventx_12	Char	64	$64.	Total Minute Ventilation (Not Done)
1376	meanairx_12	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
1377	simv_12	Num	8		SIMV
1378	simvc_12	Char	4	$4.	SIMV
1379	prvc_12	Num	8		PRVC (pressure regulated volume control) or equivalent
1380	prvc2_12	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
1381	pressup_12	Num	8		Pressure Support (y/n)
1382	pressupc_12	Char	16	$16.	Pressure Support (y/n)
1383	volassist_12	Num	8		Volume Assist/Control
1384	volassistc_12	Char	21	$21.	Volume Assist/Control
1385	presassist_12	Num	8		Pressure Assist (y/n)
1386	presassistc_12	Char	15	$15.	Pressure Assist (y/n)
1387	pcirv_12	Num	8		PC IRV
1388	pcirvc_12	Char	6	$6.	PC IRV
1389	aprv_12	Num	8		Airway Pressure Release Ventilation (APRV)
1390	aprvc_12	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
1391	ventoth_12	Num	8		Other vent mode
1392	ventothc_12	Char	5	$5.	Other vent mode
1393	hfov_12	Num	8		HFOV
1394	hfovc_12	Char	4	$4.	HFOV
1395	othvent_12	Char	255	$255.	Enter other vent mode:
1396	tidal_12	Num	8		Calculated Delivered Tidal Volume
1397	setrate_12	Num	8		Set Rate
1398	resp_12	Num	8		Total Respiratory Rate

Num	Variable	Type	Len	Format	Label
1399	minvent_12	Num	8		Total Minute Ventilation
1400	peep_12	Num	8		PEEP (cm H2O):
1401	fio2_12	Num	8		FiO2 at 0800
1402	SpO2_12	Num	8		SpO2 at 0800
1403	pplat_12	Num	8		Plateau Pressure (cm H2O):
1404	pip_12	Num	8		Peak Inspiratory Pressure
1405	meanair_12	Num	8		Mean airway pressure (cm H2O)
1406	fio2abg_12	Num	8		FiO2 at time of ABG:
1407	pao2abg_12	Num	8		PaO2 (cm H20):
1408	paco2abg_12	Num	8		PaCO2 (cm H20):
1409	phabg_12	Num	8		Arterial pH:
1410	spo2abg_12	Num	8		SpO2 at time of ABG
1411	tidalx_12	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
1412	peepx_12	Char	64	$64.	PEEP (cm H2O): (Not Done)
1413	fio2x_12	Char	64	$64.	FiO2 at 0800 (Not Done)
1414	SpO2x_12	Char	64	$64.	SpO2 at 0800 (Not Done)
1415	pressupcmh2o_21	Num	8		Pressure Support cmH2O
1416	presascmh2o_21	Num	8		Pressure Assist cmH2O
1417	ventmodex_21	Char	64	$64.	Vent mode: (Not Done)
1418	respx_21	Char	64	$64.	Total Respiratory Rate (Not Done)
1419	minventx_21	Char	64	$64.	Total Minute Ventilation (Not Done)
1420	meanairx_21	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
1421	simv_21	Num	8		SIMV
1422	simvc_21	Char	4	$4.	SIMV
1423	prvc_21	Num	8		PRVC (pressure regulated volume control) or equivalent
1424	prvc2_21	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
1425	pressup_21	Num	8		Pressure Support (y/n)
1426	pressupc_21	Char	16	$16.	Pressure Support (y/n)
1427	volassist_21	Num	8		Volume Assist/Control
1428	volassistc_21	Char	21	$21.	Volume Assist/Control
1429	presassist_21	Num	8		Pressure Assist (y/n)
1430	presassistc_21	Char	15	$15.	Pressure Assist (y/n)
1431	pcirv_21	Num	8		PC IRV
1432	pcirvc_21	Char	6	$6.	PC IRV
1433	aprv_21	Num	8		Airway Pressure Release Ventilation (APRV)
1434	aprvc_21	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
1435	ventoth_21	Num	8		Other vent mode
1436	ventothc_21	Char	5	$5.	Other vent mode
1437	hfov_21	Num	8		HFOV

Num	Variable	Type	Len	Format	Label
1438	hfovc_21	Char	4	$4.	HFOV
1439	othvent_21	Char	255	$255.	Enter other vent mode:
1440	tidal_21	Num	8		Calculated Delivered Tidal Volume
1441	setrate_21	Num	8		Set Rate
1442	resp_21	Num	8		Total Respiratory Rate
1443	minvent_21	Num	8		Total Minute Ventilation
1444	peep_21	Num	8		PEEP (cm H2O):
1445	fio2_21	Num	8		FiO2 at 0800
1446	SpO2_21	Num	8		SpO2 at 0800
1447	pplat_21	Num	8		Plateau Pressure (cm H2O):
1448	pip_21	Num	8		Peak Inspiratory Pressure
1449	meanair_21	Num	8		Mean airway pressure (cm H2O)
1450	fio2abg_21	Num	8		FiO2 at time of ABG:
1451	pao2abg_21	Num	8		PaO2 (cm H20):
1452	paco2abg_21	Num	8		PaCO2 (cm H20):
1453	phabg_21	Num	8		Arterial pH:
1454	spo2abg_21	Num	8		SpO2 at time of ABG
1455	tidalx_21	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
1456	peepx_21	Char	64	$64.	PEEP (cm H2O): (Not Done)
1457	fio2x_21	Char	64	$64.	FiO2 at 0800 (Not Done)
1458	SpO2x_21	Char	64	$64.	SpO2 at 0800 (Not Done)
1459	pressupcmh2o_28	Num	8		Pressure Support cmH2O
1460	presascmh2o_28	Num	8		Pressure Assist cmH2O
1461	ventmodex_28	Char	64	$64.	Vent mode: (Not Done)
1462	respx_28	Char	64	$64.	Total Respiratory Rate (Not Done)
1463	minventx_28	Char	64	$64.	Total Minute Ventilation (Not Done)
1464	meanairx_28	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
1465	simv_28	Num	8		SIMV
1466	simvc_28	Char	4	$4.	SIMV
1467	prvc_28	Num	8		PRVC (pressure regulated volume control) or equivalent
1468	prvc2_28	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
1469	pressup_28	Num	8		Pressure Support (y/n)
1470	pressupc_28	Char	16	$16.	Pressure Support (y/n)
1471	volassist_28	Num	8		Volume Assist/Control
1472	volassistc_28	Char	21	$21.	Volume Assist/Control
1473	presassist_28	Num	8		Pressure Assist (y/n)
1474	presassistc_28	Char	15	$15.	Pressure Assist (y/n)
1475	pcirv_28	Num	8		PC IRV
1476	pcirvc_28	Char	6	$6.	PC IRV

Num	Variable	Type	Len	Format	Label
1477	aprv_28	Num	8		Airway Pressure Release Ventilation (APRV)
1478	aprvc_28	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
1479	ventoth_28	Num	8		Other vent mode
1480	ventothc_28	Char	5	$5.	Other vent mode
1481	hfov_28	Num	8		HFOV
1482	hfovc_28	Char	4	$4.	HFOV
1483	othvent_28	Char	255	$255.	Enter other vent mode:
1484	tidal_28	Num	8		Calculated Delivered Tidal Volume
1485	setrate_28	Num	8		Set Rate
1486	resp_28	Num	8		Total Respiratory Rate
1487	minvent_28	Num	8		Total Minute Ventilation
1488	peep_28	Num	8		PEEP (cm H2O):
1489	fio2_28	Num	8		FiO2 at 0800
1490	SpO2_28	Num	8		SpO2 at 0800
1491	pplat_28	Num	8		Plateau Pressure (cm H2O):
1492	pip_28	Num	8		Peak Inspiratory Pressure
1493	meanair_28	Num	8		Mean airway pressure (cm H2O)
1494	fio2abg_28	Num	8		FiO2 at time of ABG:
1495	pao2abg_28	Num	8		PaO2 (cm H20):
1496	paco2abg_28	Num	8		PaCO2 (cm H20):
1497	phabg_28	Num	8		Arterial pH:
1498	spo2abg_28	Num	8		SpO2 at time of ABG
1499	tidalx_28	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
1500	peepx_28	Char	64	$64.	PEEP (cm H2O): (Not Done)
1501	fio2x_28	Char	64	$64.	FiO2 at 0800 (Not Done)
1502	SpO2x_28	Char	64	$64.	SpO2 at 0800 (Not Done)
1503	proprate	Num	8		Propofol infusion rate at time of randomization
1504	feedgrp	Num	8		Enteral Feeding Group
1505	feedgrpc	Char	12	$12.	Enteral Feeding Group
1506	prebasefeed	Num	8		In the 12 hours prior to enrollment, did patient receive any enteral feedings?
1507	prebasefeedc	Char	72	$72.	In the 12 hours prior to enrollment, did patient receive any enteral feedings?
1508	prebasevol	Num	8		Yes, enter total volume of enteral feeds in 12 hours prior to enrollment
1509	feedinitdt	Num	8	BEST12.	Date and time of initiation of protocol specified enteral feeds (Day)
1510	feedinittm	Num	8	TIME5.	Date and time of initiation of protocol specified enteral feeds (Time)
1511	recfeed_0	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?

Num	Variable	Type	Len	Format	Label
1512	recfeedc_0	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
1513	goalrate_0	Num	8		Tube feeding goal rate
1514	goalchange_0	Num	8		Did the goal rate change during the 24 hour period?
1515	goalchangec_0	Char	19	$19.	Did the goal rate change during the 24 hour period?
1516	newgoal_0	Num	8		New goal rate
1517	brand1_0	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
1518	brand1vol_0	Num	8		Total volume of enteral formula 1 infused for 24 hour period
1519	brand2_0	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
1520	brand2vol_0	Num	8		Total volume of enteral formula 2 infused for 24 hour period
1521	feedhrs_0	Num	8		Number of hours enteral tube feeds on for this 24 hour period
1522	feedoff_0	Num	8		Feeds turned off for > 30 minutes within 24 hour period
1523	feedoffc_0	Char	61	$61.	Feeds turned off for > 30 minutes within 24 hour period
1524	planext_0	Num	8		Planned Extubation
1525	planextc_0	Char	18	$18.	Planned Extubation
1526	giint_0	Num	8		GI Intolerance
1527	giintc_0	Char	14	$14.	GI Intolerance
1528	invbside_0	Num	8		Invasive bedside procedure
1529	invbsidec_0	Char	26	$26.	Invasive bedside procedure
1530	surgery	Num	8		Surgery
1531	surgeryc	Char	7	$7.	Surgery
1532	leftfloor_0	Num	8		Patient left the floor
1533	leftfloorc_0	Char	22	$22.	Patient left the floor
1534	care_0	Num	8		Nursing Care(ie bathing, HOB down)
1535	carec_0	Char	34	$34.	Nursing Care(ie bathing, HOB down)
1536	medadm_0	Num	8		Medical Administration
1537	medadmc_0	Char	22	$22.	Medical Administration
1538	feedoffoth_0	Num	8		Other reason feed turned off:
1539	feedoffothc_0	Char	5	$5.	Other reason feed turned off:
1540	feedoffreas_0	Char	255	$255.	Other reason feed turned off: Reason
1541	giintoleden_0	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
1542	giintoledenc_0	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
1543	diarrhea_0	Num	8		Diarrhea
1544	diarrheac_0	Char	8	$8.	Diarrhea
1545	vomiting_0	Num	8		Vomiting
1546	vomitingc_0	Char	8	$8.	Vomiting
1547	aspiration_0	Num	8		Aspiration
1548	aspirationc_0	Char	10	$10.	Aspiration

Num	Variable	Type	Len	Format	Label
1549	elevresid	Num	8		Elevated Residuals
1550	elevresidc	Char	18	$18.	Elevated Residuals
1551	regurg_0	Num	8		Regurgitation
1552	regurgc_0	Char	13	$13.	Regurgitation
1553	constipation	Num	8		Constipation
1554	constipationc	Char	12	$12.	Constipation
1555	cramping	Num	8		Abdominal distention or cramping
1556	crampingc	Char	32	$32.	Abdominal distention or cramping
1557	feedsite_0	Num	8		Insertion site of feeding tube:
1558	feedsitec_0	Char	12	$12.	Insertion site of feeding tube:
1559	tubesize_0	Num	8		Feeding tube size
1560	tubesizec_0	Char	10	$10.	Feeding tube size
1561	distalpos_0	Num	8		Distal position of feeding tube
1562	distalposc_0	Char	12	$12.	Distal position of feeding tube
1563	distalconf_0	Num	8		Was distal position confirmed during this 24 hour period?
1564	distalconfc_0	Char	19	$19.	Was distal position confirmed during this 24 hour period?
1565	distalhow_0	Num	8		How distal position confirmed
1566	distalhowc_0	Char	15	$15.	How distal position confirmed
1567	distaloth_0	Char	40	$40.	How distal position confirmed: other
1568	fullcal_0	Num	8		Was rate advanced to full-calorie rate during this calendar day?
1569	fullcalc_0	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
1570	fullcaltm_0	Num	8	TIMEAMPM.	time full calorie reached
1571	pronevent_0	Num	8		Prone ventilation between randomization and midnight?
1572	proneventc_0	Char	3	$3.	Prone ventilation between randomization and midnight?
1573	propratex	Char	64	$64.	Propofol infusion rate at time of randomization (Not Done)
1574	feedgrpx	Char	64	$64.	Enteral Feeding Group (Not Done)
1575	prebasefeedx	Char	64	$64.	In the 12 hours prior to enrollment, did patient receive any enteral feedings? (Not Done)
1576	feedinitdtmx	Char	64	$64.	Date and time of initiation of protocol specified enteral feeds (Not Done)
1577	recfeedx_0	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
1578	goalratex_0	Char	64	$64.	Tube feeding goal rate (Not Done)
1579	goalchangex_0	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
1580	brand1x_0	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period (Not Done)
1581	feedhrsx_0	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
1582	feedoffX	Char	64	$64.	Feeds turned off for > 30 minutes within 24 hour period (Not Done)

Num	Variable	Type	Len	Format	Label
1583	giintoledenx_0	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
1584	feedsiteX	Char	64	$64.	Insertion site of feeding tube: (Not Done)
1585	tubesizeX	Char	64	$64.	Feeding tube size (Not Done)
1586	distalposX	Char	64	$64.	Distal position of feeding tube (Not Done)
1587	distalconfx_0	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
1588	fullcalx_0	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
1589	surg_1	Num	8		Surgery
1590	surgc_1	Char	7	$7.	Surgery
1591	residual_1	Num	8		Elevated Residuals
1592	residualc_1	Char	18	$18.	Elevated Residuals
1593	const_1	Num	8		Constipation
1594	constc_1	Char	12	$12.	Constipation
1595	cramp_1	Num	8		Abdominal distention or cramping
1596	crampc_1	Char	32	$32.	Abdominal distention or cramping
1597	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)
1598	feedsitex_1	Char	64	$64.	Insertion site of feeding tube (Not Done)
1599	tubesizex_1	Char	64	$64.	Feeding tube size (Not Done)
1600	distalposx_1	Char	64	$64.	Distal position of feeding tube (Not Done)
1601	proneventx_1	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
1602	recfeed_1	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
1603	recfeedc_1	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
1604	goalrate_1	Num	8		Tube feeding goal rate
1605	goalchange_1	Num	8		Did the goal rate change during the 24 hour period?
1606	goalchangec_1	Char	19	$19.	Did the goal rate change during the 24 hour period?
1607	newgoal_1	Num	8		Yes, new goal rate
1608	brand1_1	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
1609	brand1vol_1	Num	8		Total volume of enteral formula 1 infused for 24 hour period
1610	brand2_1	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
1611	brand2vol_1	Num	8		Total volume of enteral formula 2 infused for 24 hour period
1612	feedhrs_1	Num	8		Number of hours enteral tube feeds on for this 24 hour period
1613	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?
1614	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?
1615	planext_1	Num	8		Planned Extubation

Num	Variable	Type	Len	Format	Label
1616	planextc_1	Char	18	$18.	Planned Extubation
1617	giint_1	Num	8		GI Intolerance
1618	giintc_1	Char	14	$14.	GI Intolerance
1619	invbside_1	Num	8		Invasive bedside procedure
1620	invbsidec_1	Char	26	$26.	Invasive bedside procedure
1621	leftfloor_1	Num	8		Patient left the floor
1622	leftfloorc_1	Char	22	$22.	Patient left the floor
1623	care_1	Num	8		Nursing Care (i.e. bathing, HOB down)
1624	carec_1	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
1625	medadm_1	Num	8		Medical Administration
1626	medadmc_1	Char	22	$22.	Medical Administration
1627	feedoffoth_1	Num	8		Other reason feed turned off:
1628	feedoffothc_1	Char	5	$5.	Other reason feed turned off:
1629	feedoffreas_1	Char	255	$255.	Other reason feed turned off: Reason
1630	giintoleden_1	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
1631	giintoledenc_1	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
1632	diarrhea_1	Num	8		Diarrhea
1633	diarrheac_1	Char	8	$8.	Diarrhea
1634	vomiting_1	Num	8		Vomiting
1635	vomitingc_1	Char	8	$8.	Vomiting
1636	aspiration_1	Num	8		Aspiration
1637	aspirationc_1	Char	10	$10.	Aspiration
1638	regurg_1	Num	8		Regurgitation
1639	regurgc_1	Char	13	$13.	Regurgitation
1640	feedsite_1	Num	8		Insertion site of feeding tube
1641	feedsitec_1	Char	12	$12.	Insertion site of feeding tube
1642	tubesize_1	Num	8		Feeding tube size
1643	tubesizec_1	Char	10	$10.	Feeding tube size
1644	distalpos_1	Num	8		Distal position of feeding tube
1645	distalposc_1	Char	12	$12.	Distal position of feeding tube
1646	distalconf_1	Num	8		Was distal position confirmed during this 24 hour period?
1647	distalconfc_1	Char	19	$19.	Was distal position confirmed during this 24 hour period?
1648	distalhow_1	Num	8		Yes, how confirmed:
1649	distalhowc_1	Char	15	$15.	Yes, how confirmed:
1650	distaloth_1	Char	40	$40.	Yes, how confirmed: Other
1651	fullcal_1	Num	8		Was rate advanced to full-calorie rate during this calendar day?
1652	fullcalc_1	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?

Num	Variable	Type	Len	Format	Label
1653	fullcaltm_1	Num	8	TIMEAMPM.	Yes, time full calorie reached:
1654	pronevent_1	Num	8		Prone ventilation this 24 hour period?
1655	proneventc_1	Char	3	$3.	Prone ventilation this 24 hour period?
1656	recfeedx_1	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
1657	goalratex_1	Char	64	$64.	Tube feeding goal rate (Not Done)
1658	goalchangex_1	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
1659	brand1x_1	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
1660	feedhrsx_1	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
1661	giintoledenx_1	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
1662	distalconfx_1	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
1663	fullcalx_1	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
1664	surg_2	Num	8		Surgery
1665	surgc_2	Char	7	$7.	Surgery
1666	residual_2	Num	8		Elevated Residuals
1667	residualc_2	Char	18	$18.	Elevated Residuals
1668	const_2	Num	8		Constipation
1669	constc_2	Char	12	$12.	Constipation
1670	cramp_2	Num	8		Abdominal distention or cramping
1671	crampc_2	Char	32	$32.	Abdominal distention or cramping
1672	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)
1673	feedsitex_2	Char	64	$64.	Insertion site of feeding tube (Not Done)
1674	tubesizex_2	Char	64	$64.	Feeding tube size (Not Done)
1675	distalposx_2	Char	64	$64.	Distal position of feeding tube (Not Done)
1676	proneventx_2	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
1677	recfeed_2	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
1678	recfeedc_2	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
1679	goalrate_2	Num	8		Tube feeding goal rate
1680	goalchange_2	Num	8		Did the goal rate change during the 24 hour period?
1681	goalchangec_2	Char	19	$19.	Did the goal rate change during the 24 hour period?
1682	newgoal_2	Num	8		Yes, new goal rate
1683	brand1_2	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
1684	brand1vol_2	Num	8		Total volume of enteral formula 1 infused for 24 hour period
1685	brand2_2	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period

Num	Variable	Type	Len	Format	Label
1686	brand2vol_2	Num	8		Total volume of enteral formula 2 infused for 24 hour period
1687	feedhrs_2	Num	8		Number of hours enteral tube feeds on for this 24 hour period
1688	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?
1689	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?
1690	planext_2	Num	8		Planned Extubation
1691	planextc_2	Char	18	$18.	Planned Extubation
1692	giint_2	Num	8		GI Intolerance
1693	giintc_2	Char	14	$14.	GI Intolerance
1694	invbside_2	Num	8		Invasive bedside procedure
1695	invbsidec_2	Char	26	$26.	Invasive bedside procedure
1696	leftfloor_2	Num	8		Patient left the floor
1697	leftfloorc_2	Char	22	$22.	Patient left the floor
1698	care_2	Num	8		Nursing Care (i.e. bathing, HOB down)
1699	carec_2	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
1700	medadm_2	Num	8		Medical Administration
1701	medadmc_2	Char	22	$22.	Medical Administration
1702	feedoffoth_2	Num	8		Other reason feed turned off:
1703	feedoffothc_2	Char	5	$5.	Other reason feed turned off:
1704	feedoffreas_2	Char	255	$255.	Other reason feed turned off: Reason
1705	giintoleden_2	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
1706	giintoledenc_2	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
1707	diarrhea_2	Num	8		Diarrhea
1708	diarrheac_2	Char	8	$8.	Diarrhea
1709	vomiting_2	Num	8		Vomiting
1710	vomitingc_2	Char	8	$8.	Vomiting
1711	aspiration_2	Num	8		Aspiration
1712	aspirationc_2	Char	10	$10.	Aspiration
1713	regurg_2	Num	8		Regurgitation
1714	regurgc_2	Char	13	$13.	Regurgitation
1715	feedsite_2	Num	8		Insertion site of feeding tube
1716	feedsitec_2	Char	12	$12.	Insertion site of feeding tube
1717	tubesize_2	Num	8		Feeding tube size
1718	tubesizec_2	Char	10	$10.	Feeding tube size
1719	distalpos_2	Num	8		Distal position of feeding tube
1720	distalposc_2	Char	12	$12.	Distal position of feeding tube
1721	distalconf_2	Num	8		Was distal position confirmed during this 24 hour period?

Num	Variable	Type	Len	Format	Label
1722	distalconfc_2	Char	19	$19.	Was distal position confirmed during this 24 hour period?
1723	distalhow_2	Num	8		Yes, how confirmed:
1724	distalhowc_2	Char	15	$15.	Yes, how confirmed:
1725	distaloth_2	Char	40	$40.	Yes, how confirmed: Other
1726	fullcal_2	Num	8		Was rate advanced to full-calorie rate during this calendar day?
1727	fullcalc_2	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
1728	fullcaltm_2	Num	8	TIMEAMPM.	Yes, time full calorie reached:
1729	pronevent_2	Num	8		Prone ventilation this 24 hour period?
1730	proneventc_2	Char	3	$3.	Prone ventilation this 24 hour period?
1731	recfeedx_2	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
1732	goalratex_2	Char	64	$64.	Tube feeding goal rate (Not Done)
1733	goalchangex_2	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
1734	brand1x_2	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
1735	feedhrsx_2	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
1736	giintoledenx_2	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
1737	distalconfx_2	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
1738	fullcalx_2	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
1739	surg_3	Num	8		Surgery
1740	surgc_3	Char	7	$7.	Surgery
1741	residual_3	Num	8		Elevated Residuals
1742	residualc_3	Char	18	$18.	Elevated Residuals
1743	const_3	Num	8		Constipation
1744	constc_3	Char	12	$12.	Constipation
1745	cramp_3	Num	8		Abdominal distention or cramping
1746	crampc_3	Char	32	$32.	Abdominal distention or cramping
1747	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)
1748	feedsitex_3	Char	64	$64.	Insertion site of feeding tube (Not Done)
1749	tubesizex_3	Char	64	$64.	Feeding tube size (Not Done)
1750	distalposx_3	Char	64	$64.	Distal position of feeding tube (Not Done)
1751	proneventx_3	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
1752	recfeed_3	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
1753	recfeedc_3	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
1754	goalrate_3	Num	8		Tube feeding goal rate

Num	Variable	Type	Len	Format	Label
1755	goalchange_3	Num	8		Did the goal rate change during the 24 hour period?
1756	goalchangec_3	Char	19	$19.	Did the goal rate change during the 24 hour period?
1757	newgoal_3	Num	8		Yes, new goal rate
1758	brand1_3	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
1759	brand1vol_3	Num	8		Total volume of enteral formula 1 infused for 24 hour period
1760	brand2_3	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
1761	brand2vol_3	Num	8		Total volume of enteral formula 2 infused for 24 hour period
1762	feedhrs_3	Num	8		Number of hours enteral tube feeds on for this 24 hour period
1763	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?
1764	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?
1765	planext_3	Num	8		Planned Extubation
1766	planextc_3	Char	18	$18.	Planned Extubation
1767	giint_3	Num	8		GI Intolerance
1768	giintc_3	Char	14	$14.	GI Intolerance
1769	invbside_3	Num	8		Invasive bedside procedure
1770	invbsidec_3	Char	26	$26.	Invasive bedside procedure
1771	leftfloor_3	Num	8		Patient left the floor
1772	leftfloorc_3	Char	22	$22.	Patient left the floor
1773	care_3	Num	8		Nursing Care (i.e. bathing, HOB down)
1774	carec_3	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
1775	medadm_3	Num	8		Medical Administration
1776	medadmc_3	Char	22	$22.	Medical Administration
1777	feedoffoth_3	Num	8		Other reason feed turned off:
1778	feedoffothc_3	Char	5	$5.	Other reason feed turned off:
1779	feedoffreas_3	Char	255	$255.	Other reason feed turned off: Reason
1780	giintoleden_3	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
1781	giintoledenc_3	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
1782	diarrhea_3	Num	8		Diarrhea
1783	diarrheac_3	Char	8	$8.	Diarrhea
1784	vomiting_3	Num	8		Vomiting
1785	vomitingc_3	Char	8	$8.	Vomiting
1786	aspiration_3	Num	8		Aspiration
1787	aspirationc_3	Char	10	$10.	Aspiration
1788	regurg_3	Num	8		Regurgitation
1789	regurgc_3	Char	13	$13.	Regurgitation
1790	feedsite_3	Num	8		Insertion site of feeding tube

Num	Variable	Type	Len	Format	Label
1791	feedsitec_3	Char	12	$12.	Insertion site of feeding tube
1792	tubesize_3	Num	8		Feeding tube size
1793	tubesizec_3	Char	10	$10.	Feeding tube size
1794	distalpos_3	Num	8		Distal position of feeding tube
1795	distalposc_3	Char	12	$12.	Distal position of feeding tube
1796	distalconf_3	Num	8		Was distal position confirmed during this 24 hour period?
1797	distalconfc_3	Char	19	$19.	Was distal position confirmed during this 24 hour period?
1798	distalhow_3	Num	8		Yes, how confirmed:
1799	distalhowc_3	Char	15	$15.	Yes, how confirmed:
1800	distaloth_3	Char	40	$40.	Yes, how confirmed: Other
1801	fullcal_3	Num	8		Was rate advanced to full-calorie rate during this calendar day?
1802	fullcalc_3	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
1803	fullcaltm_3	Num	8	TIMEAMPM.	Yes, time full calorie reached:
1804	pronevent_3	Num	8		Prone ventilation this 24 hour period?
1805	proneventc_3	Char	3	$3.	Prone ventilation this 24 hour period?
1806	recfeedx_3	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
1807	goalratex_3	Char	64	$64.	Tube feeding goal rate (Not Done)
1808	goalchangex_3	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
1809	brand1x_3	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
1810	feedhrsx_3	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
1811	giintoledenx_3	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
1812	distalconfx_3	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
1813	fullcalx_3	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
1814	surg_4	Num	8		Surgery
1815	surgc_4	Char	7	$7.	Surgery
1816	residual_4	Num	8		Elevated Residuals
1817	residualc_4	Char	18	$18.	Elevated Residuals
1818	const_4	Num	8		Constipation
1819	constc_4	Char	12	$12.	Constipation
1820	cramp_4	Num	8		Abdominal distention or cramping
1821	crampc_4	Char	32	$32.	Abdominal distention or cramping
1822	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)
1823	feedsitex_4	Char	64	$64.	Insertion site of feeding tube (Not Done)
1824	tubesizex_4	Char	64	$64.	Feeding tube size (Not Done)
1825	distalposx_4	Char	64	$64.	Distal position of feeding tube (Not Done)

Num	Variable	Type	Len	Format	Label
1826	proneventx_4	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
1827	recfeed_4	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
1828	recfeedc_4	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
1829	goalrate_4	Num	8		Tube feeding goal rate
1830	goalchange_4	Num	8		Did the goal rate change during the 24 hour period?
1831	goalchangec_4	Char	19	$19.	Did the goal rate change during the 24 hour period?
1832	newgoal_4	Num	8		Yes, new goal rate
1833	brand1_4	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
1834	brand1vol_4	Num	8		Total volume of enteral formula 1 infused for 24 hour period
1835	brand2_4	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
1836	brand2vol_4	Num	8		Total volume of enteral formula 2 infused for 24 hour period
1837	feedhrs_4	Num	8		Number of hours enteral tube feeds on for this 24 hour period
1838	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?
1839	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?
1840	planext_4	Num	8		Planned Extubation
1841	planextc_4	Char	18	$18.	Planned Extubation
1842	giint_4	Num	8		GI Intolerance
1843	giintc_4	Char	14	$14.	GI Intolerance
1844	invbside_4	Num	8		Invasive bedside procedure
1845	invbsidec_4	Char	26	$26.	Invasive bedside procedure
1846	leftfloor_4	Num	8		Patient left the floor
1847	leftfloorc_4	Char	22	$22.	Patient left the floor
1848	care_4	Num	8		Nursing Care (i.e. bathing, HOB down)
1849	carec_4	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
1850	medadm_4	Num	8		Medical Administration
1851	medadmc_4	Char	22	$22.	Medical Administration
1852	feedoffoth_4	Num	8		Other reason feed turned off:
1853	feedoffothc_4	Char	5	$5.	Other reason feed turned off:
1854	feedoffreas_4	Char	255	$255.	Other reason feed turned off: Reason
1855	giintoleden_4	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
1856	giintoledenc_4	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
1857	diarrhea_4	Num	8		Diarrhea
1858	diarrheac_4	Char	8	$8.	Diarrhea
1859	vomiting_4	Num	8		Vomiting
1860	vomitingc_4	Char	8	$8.	Vomiting

Num	Variable	Type	Len	Format	Label
1861	aspiration_4	Num	8		Aspiration
1862	aspirationc_4	Char	10	$10.	Aspiration
1863	regurg_4	Num	8		Regurgitation
1864	regurgc_4	Char	13	$13.	Regurgitation
1865	feedsite_4	Num	8		Insertion site of feeding tube
1866	feedsitec_4	Char	12	$12.	Insertion site of feeding tube
1867	tubesize_4	Num	8		Feeding tube size
1868	tubesizec_4	Char	10	$10.	Feeding tube size
1869	distalpos_4	Num	8		Distal position of feeding tube
1870	distalposc_4	Char	12	$12.	Distal position of feeding tube
1871	distalconf_4	Num	8		Was distal position confirmed during this 24 hour period?
1872	distalconfc_4	Char	19	$19.	Was distal position confirmed during this 24 hour period?
1873	distalhow_4	Num	8		Yes, how confirmed:
1874	distalhowc_4	Char	15	$15.	Yes, how confirmed:
1875	distaloth_4	Char	40	$40.	Yes, how confirmed: Other
1876	fullcal_4	Num	8		Was rate advanced to full-calorie rate during this calendar day?
1877	fullcalc_4	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
1878	fullcaltm_4	Num	8	TIMEAMPM.	Yes, time full calorie reached:
1879	pronevent_4	Num	8		Prone ventilation this 24 hour period?
1880	proneventc_4	Char	3	$3.	Prone ventilation this 24 hour period?
1881	recfeedx_4	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
1882	goalratex_4	Char	64	$64.	Tube feeding goal rate (Not Done)
1883	goalchangex_4	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
1884	brand1x_4	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
1885	feedhrsx_4	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
1886	giintoledenx_4	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
1887	distalconfx_4	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
1888	fullcalx_4	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
1889	surg_5	Num	8		Surgery
1890	surgc_5	Char	7	$7.	Surgery
1891	residual_5	Num	8		Elevated Residuals
1892	residualc_5	Char	18	$18.	Elevated Residuals
1893	const_5	Num	8		Constipation
1894	constc_5	Char	12	$12.	Constipation
1895	cramp_5	Num	8		Abdominal distention or cramping

Num	Variable	Type	Len	Format	Label
1896	crampc_5	Char	32	$32.	Abdominal distention or cramping
1897	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)
1898	feedsitex_5	Char	64	$64.	Insertion site of feeding tube (Not Done)
1899	tubesizex_5	Char	64	$64.	Feeding tube size (Not Done)
1900	distalposx_5	Char	64	$64.	Distal position of feeding tube (Not Done)
1901	proneventx_5	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
1902	recfeed_5	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
1903	recfeedc_5	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
1904	goalrate_5	Num	8		Tube feeding goal rate
1905	goalchange_5	Num	8		Did the goal rate change during the 24 hour period?
1906	goalchangec_5	Char	19	$19.	Did the goal rate change during the 24 hour period?
1907	newgoal_5	Num	8		Yes, new goal rate
1908	brand1_5	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
1909	brand1vol_5	Num	8		Total volume of enteral formula 1 infused for 24 hour period
1910	brand2_5	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
1911	brand2vol_5	Num	8		Total volume of enteral formula 2 infused for 24 hour period
1912	feedhrs_5	Num	8		Number of hours enteral tube feeds on for this 24 hour period
1913	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?
1914	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?
1915	planext_5	Num	8		Planned Extubation
1916	planextc_5	Char	18	$18.	Planned Extubation
1917	giint_5	Num	8		GI Intolerance
1918	giintc_5	Char	14	$14.	GI Intolerance
1919	invbside_5	Num	8		Invasive bedside procedure
1920	invbsidec_5	Char	26	$26.	Invasive bedside procedure
1921	leftfloor_5	Num	8		Patient left the floor
1922	leftfloorc_5	Char	22	$22.	Patient left the floor
1923	care_5	Num	8		Nursing Care (i.e. bathing, HOB down)
1924	carec_5	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
1925	medadm_5	Num	8		Medical Administration
1926	medadmc_5	Char	22	$22.	Medical Administration
1927	feedoffoth_5	Num	8		Other reason feed turned off:
1928	feedoffothc_5	Char	5	$5.	Other reason feed turned off:
1929	feedoffreas_5	Char	255	$255.	Other reason feed turned off: Reason
1930	giintoleden_5	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
1931	giintoledenc_5	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
1932	diarrhea_5	Num	8		Diarrhea
1933	diarrheac_5	Char	8	$8.	Diarrhea
1934	vomiting_5	Num	8		Vomiting
1935	vomitingc_5	Char	8	$8.	Vomiting
1936	aspiration_5	Num	8		Aspiration
1937	aspirationc_5	Char	10	$10.	Aspiration
1938	regurg_5	Num	8		Regurgitation
1939	regurgc_5	Char	13	$13.	Regurgitation
1940	feedsite_5	Num	8		Insertion site of feeding tube
1941	feedsitec_5	Char	12	$12.	Insertion site of feeding tube
1942	tubesize_5	Num	8		Feeding tube size
1943	tubesizec_5	Char	10	$10.	Feeding tube size
1944	distalpos_5	Num	8		Distal position of feeding tube
1945	distalposc_5	Char	12	$12.	Distal position of feeding tube
1946	distalconf_5	Num	8		Was distal position confirmed during this 24 hour period?
1947	distalconfc_5	Char	19	$19.	Was distal position confirmed during this 24 hour period?
1948	distalhow_5	Num	8		Yes, how confirmed:
1949	distalhowc_5	Char	15	$15.	Yes, how confirmed:
1950	distaloth_5	Char	40	$40.	Yes, how confirmed: Other
1951	fullcal_5	Num	8		Was rate advanced to full-calorie rate during this calendar day?
1952	fullcalc_5	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
1953	fullcaltm_5	Num	8	TIMEAMPM.	Yes, time full calorie reached:
1954	pronevent_5	Num	8		Prone ventilation this 24 hour period?
1955	proneventc_5	Char	3	$3.	Prone ventilation this 24 hour period?
1956	recfeedx_5	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
1957	goalratex_5	Char	64	$64.	Tube feeding goal rate (Not Done)
1958	goalchangex_5	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
1959	brand1x_5	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
1960	feedhrsx_5	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
1961	giintoledenx_5	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
1962	distalconfx_5	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
1963	fullcalx_5	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
1964	surg_6	Num	8		Surgery
1965	surgc_6	Char	7	$7.	Surgery

Num	Variable	Type	Len	Format	Label
1966	residual_6	Num	8		Elevated Residuals
1967	residualc_6	Char	18	$18.	Elevated Residuals
1968	const_6	Num	8		Constipation
1969	constc_6	Char	12	$12.	Constipation
1970	cramp_6	Num	8		Abdominal distention or cramping
1971	crampc_6	Char	32	$32.	Abdominal distention or cramping
1972	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)
1973	feedsitex_6	Char	64	$64.	Insertion site of feeding tube (Not Done)
1974	tubesizex_6	Char	64	$64.	Feeding tube size (Not Done)
1975	distalposx_6	Char	64	$64.	Distal position of feeding tube (Not Done)
1976	proneventx_6	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
1977	recfeed_6	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
1978	recfeedc_6	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
1979	goalrate_6	Num	8		Tube feeding goal rate
1980	goalchange_6	Num	8		Did the goal rate change during the 24 hour period?
1981	goalchangec_6	Char	19	$19.	Did the goal rate change during the 24 hour period?
1982	newgoal_6	Num	8		Yes, new goal rate
1983	brand1_6	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
1984	brand1vol_6	Num	8		Total volume of enteral formula 1 infused for 24 hour period
1985	brand2_6	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
1986	brand2vol_6	Num	8		Total volume of enteral formula 2 infused for 24 hour period
1987	feedhrs_6	Num	8		Number of hours enteral tube feeds on for this 24 hour period
1988	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?
1989	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?
1990	planext_6	Num	8		Planned Extubation
1991	planextc_6	Char	18	$18.	Planned Extubation
1992	giint_6	Num	8		GI Intolerance
1993	giintc_6	Char	14	$14.	GI Intolerance
1994	invbside_6	Num	8		Invasive bedside procedure
1995	invbsidec_6	Char	26	$26.	Invasive bedside procedure
1996	leftfloor_6	Num	8		Patient left the floor
1997	leftfloorc_6	Char	22	$22.	Patient left the floor
1998	care_6	Num	8		Nursing Care (i.e. bathing, HOB down)
1999	carec_6	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
2000	medadm_6	Num	8		Medical Administration

Num	Variable	Type	Len	Format	Label
2001	medadmc_6	Char	22	$22.	Medical Administration
2002	feedoffoth_6	Num	8		Other reason feed turned off:
2003	feedoffothc_6	Char	5	$5.	Other reason feed turned off:
2004	feedoffreas_6	Char	255	$255.	Other reason feed turned off: Reason
2005	giintoleden_6	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
2006	giintoledenc_6	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
2007	diarrhea_6	Num	8		Diarrhea
2008	diarrheac_6	Char	8	$8.	Diarrhea
2009	vomiting_6	Num	8		Vomiting
2010	vomitingc_6	Char	8	$8.	Vomiting
2011	aspiration_6	Num	8		Aspiration
2012	aspirationc_6	Char	10	$10.	Aspiration
2013	regurg_6	Num	8		Regurgitation
2014	regurgc_6	Char	13	$13.	Regurgitation
2015	feedsite_6	Num	8		Insertion site of feeding tube
2016	feedsitec_6	Char	12	$12.	Insertion site of feeding tube
2017	tubesize_6	Num	8		Feeding tube size
2018	tubesizec_6	Char	10	$10.	Feeding tube size
2019	distalpos_6	Num	8		Distal position of feeding tube
2020	distalposc_6	Char	12	$12.	Distal position of feeding tube
2021	distalconf_6	Num	8		Was distal position confirmed during this 24 hour period?
2022	distalconfc_6	Char	19	$19.	Was distal position confirmed during this 24 hour period?
2023	distalhow_6	Num	8		Yes, how confirmed:
2024	distalhowc_6	Char	15	$15.	Yes, how confirmed:
2025	distaloth_6	Char	40	$40.	Yes, how confirmed: Other
2026	fullcal_6	Num	8		Was rate advanced to full-calorie rate during this calendar day?
2027	fullcalc_6	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
2028	fullcaltm_6	Num	8	TIMEAMPM.	Yes, time full calorie reached:
2029	pronevent_6	Num	8		Prone ventilation this 24 hour period?
2030	proneventc_6	Char	3	$3.	Prone ventilation this 24 hour period?
2031	recfeedx_6	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
2032	goalratex_6	Char	64	$64.	Tube feeding goal rate (Not Done)
2033	goalchangex_6	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
2034	brand1x_6	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
2035	feedhrsx_6	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)

Num	Variable	Type	Len	Format	Label
2036	giintoledenx_6	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
2037	distalconfx_6	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
2038	fullcalx_6	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
2039	surg_7	Num	8		Surgery
2040	surgc_7	Char	7	$7.	Surgery
2041	residual_7	Num	8		Elevated Residuals
2042	residualc_7	Char	18	$18.	Elevated Residuals
2043	const_7	Num	8		Constipation
2044	constc_7	Char	12	$12.	Constipation
2045	cramp_7	Num	8		Abdominal distention or cramping
2046	crampc_7	Char	32	$32.	Abdominal distention or cramping
2047	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)
2048	feedsitex_7	Char	64	$64.	Insertion site of feeding tube (Not Done)
2049	tubesizex_7	Char	64	$64.	Feeding tube size (Not Done)
2050	distalposx_7	Char	64	$64.	Distal position of feeding tube (Not Done)
2051	proneventx_7	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
2052	recfeed_7	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
2053	recfeedc_7	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
2054	goalrate_7	Num	8		Tube feeding goal rate
2055	goalchange_7	Num	8		Did the goal rate change during the 24 hour period?
2056	goalchangec_7	Char	19	$19.	Did the goal rate change during the 24 hour period?
2057	newgoal_7	Num	8		Yes, new goal rate
2058	brand1_7	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
2059	brand1vol_7	Num	8		Total volume of enteral formula 1 infused for 24 hour period
2060	brand2_7	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
2061	brand2vol_7	Num	8		Total volume of enteral formula 2 infused for 24 hour period
2062	feedhrs_7	Num	8		Number of hours enteral tube feeds on for this 24 hour period
2063	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?
2064	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?
2065	planext_7	Num	8		Planned Extubation
2066	planextc_7	Char	18	$18.	Planned Extubation
2067	giint_7	Num	8		GI Intolerance
2068	giintc_7	Char	14	$14.	GI Intolerance

Num	Variable	Type	Len	Format	Label
2069	invbside_7	Num	8		Invasive bedside procedure
2070	invbsidec_7	Char	26	$26.	Invasive bedside procedure
2071	leftfloor_7	Num	8		Patient left the floor
2072	leftfloorc_7	Char	22	$22.	Patient left the floor
2073	care_7	Num	8		Nursing Care (i.e. bathing, HOB down)
2074	carec_7	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
2075	medadm_7	Num	8		Medical Administration
2076	medadmc_7	Char	22	$22.	Medical Administration
2077	feedoffoth_7	Num	8		Other reason feed turned off:
2078	feedoffothc_7	Char	5	$5.	Other reason feed turned off:
2079	feedoffreas_7	Char	255	$255.	Other reason feed turned off: Reason
2080	giintoleden_7	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
2081	giintoledenc_7	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
2082	diarrhea_7	Num	8		Diarrhea
2083	diarrheac_7	Char	8	$8.	Diarrhea
2084	vomiting_7	Num	8		Vomiting
2085	vomitingc_7	Char	8	$8.	Vomiting
2086	aspiration_7	Num	8		Aspiration
2087	aspirationc_7	Char	10	$10.	Aspiration
2088	regurg_7	Num	8		Regurgitation
2089	regurgc_7	Char	13	$13.	Regurgitation
2090	feedsite_7	Num	8		Insertion site of feeding tube
2091	feedsitec_7	Char	12	$12.	Insertion site of feeding tube
2092	tubesize_7	Num	8		Feeding tube size
2093	tubesizec_7	Char	10	$10.	Feeding tube size
2094	distalpos_7	Num	8		Distal position of feeding tube
2095	distalposc_7	Char	12	$12.	Distal position of feeding tube
2096	distalconf_7	Num	8		Was distal position confirmed during this 24 hour period?
2097	distalconfc_7	Char	19	$19.	Was distal position confirmed during this 24 hour period?
2098	distalhow_7	Num	8		Yes, how confirmed:
2099	distalhowc_7	Char	15	$15.	Yes, how confirmed:
2100	distaloth_7	Char	40	$40.	Yes, how confirmed: Other
2101	fullcal_7	Num	8		Was rate advanced to full-calorie rate during this calendar day?
2102	fullcalc_7	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
2103	fullcaltm_7	Num	8	TIMEAMPM.	Yes, time full calorie reached:
2104	pronevent_7	Num	8		Prone ventilation this 24 hour period?
2105	proneventc_7	Char	3	$3.	Prone ventilation this 24 hour period?

Num	Variable	Type	Len	Format	Label
2106	recfeedx_7	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
2107	goalratex_7	Char	64	$64.	Tube feeding goal rate (Not Done)
2108	goalchangex_7	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
2109	brand1x_7	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
2110	feedhrsx_7	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
2111	giintoledenx_7	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
2112	distalconfx_7	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
2113	fullcalx_7	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
2114	surg_8	Num	8		Surgery
2115	surgc_8	Char	7	$7.	Surgery
2116	residual_8	Num	8		Elevated Residuals
2117	residualc_8	Char	18	$18.	Elevated Residuals
2118	const_8	Num	8		Constipation
2119	constc_8	Char	12	$12.	Constipation
2120	cramp_8	Num	8		Abdominal distention or cramping
2121	crampc_8	Char	32	$32.	Abdominal distention or cramping
2122	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)
2123	feedsitex_8	Char	64	$64.	Insertion site of feeding tube (Not Done)
2124	tubesizex_8	Char	64	$64.	Feeding tube size (Not Done)
2125	distalposx_8	Char	64	$64.	Distal position of feeding tube (Not Done)
2126	proneventx_8	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
2127	recfeed_8	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
2128	recfeedc_8	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
2129	goalrate_8	Num	8		Tube feeding goal rate
2130	goalchange_8	Num	8		Did the goal rate change during the 24 hour period?
2131	goalchangec_8	Char	19	$19.	Did the goal rate change during the 24 hour period?
2132	newgoal_8	Num	8		Yes, new goal rate
2133	brand1_8	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
2134	brand1vol_8	Num	8		Total volume of enteral formula 1 infused for 24 hour period
2135	brand2_8	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
2136	brand2vol_8	Num	8		Total volume of enteral formula 2 infused for 24 hour period
2137	feedhrs_8	Num	8		Number of hours enteral tube feeds on for this 24 hour period
2138	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?

Num	Variable	Type	Len	Format	Label
2139	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?
2140	planext_8	Num	8		Planned Extubation
2141	planextc_8	Char	18	$18.	Planned Extubation
2142	giint_8	Num	8		GI Intolerance
2143	giintc_8	Char	14	$14.	GI Intolerance
2144	invbside_8	Num	8		Invasive bedside procedure
2145	invbsidec_8	Char	26	$26.	Invasive bedside procedure
2146	leftfloor_8	Num	8		Patient left the floor
2147	leftfloorc_8	Char	22	$22.	Patient left the floor
2148	care_8	Num	8		Nursing Care (i.e. bathing, HOB down)
2149	carec_8	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
2150	medadm_8	Num	8		Medical Administration
2151	medadmc_8	Char	22	$22.	Medical Administration
2152	feedoffoth_8	Num	8		Other reason feed turned off:
2153	feedoffothc_8	Char	5	$5.	Other reason feed turned off:
2154	feedoffreas_8	Char	255	$255.	Other reason feed turned off: Reason
2155	giintoleden_8	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
2156	giintoledenc_8	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
2157	diarrhea_8	Num	8		Diarrhea
2158	diarrheac_8	Char	8	$8.	Diarrhea
2159	vomiting_8	Num	8		Vomiting
2160	vomitingc_8	Char	8	$8.	Vomiting
2161	aspiration_8	Num	8		Aspiration
2162	aspirationc_8	Char	10	$10.	Aspiration
2163	regurg_8	Num	8		Regurgitation
2164	regurgc_8	Char	13	$13.	Regurgitation
2165	feedsite_8	Num	8		Insertion site of feeding tube
2166	feedsitec_8	Char	12	$12.	Insertion site of feeding tube
2167	tubesize_8	Num	8		Feeding tube size
2168	tubesizec_8	Char	10	$10.	Feeding tube size
2169	distalpos_8	Num	8		Distal position of feeding tube
2170	distalposc_8	Char	12	$12.	Distal position of feeding tube
2171	distalconf_8	Num	8		Was distal position confirmed during this 24 hour period?
2172	distalconfc_8	Char	19	$19.	Was distal position confirmed during this 24 hour period?
2173	distalhow_8	Num	8		Yes, how confirmed:
2174	distalhowc_8	Char	15	$15.	Yes, how confirmed:
2175	distaloth_8	Char	40	$40.	Yes, how confirmed: Other

Num	Variable	Type	Len	Format	Label
2176	fullcal_8	Num	8		Was rate advanced to full-calorie rate during this calendar day?
2177	fullcalc_8	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
2178	fullcaltm_8	Num	8	TIMEAMPM.	Yes, time full calorie reached:
2179	pronevent_8	Num	8		Prone ventilation this 24 hour period?
2180	proneventc_8	Char	3	$3.	Prone ventilation this 24 hour period?
2181	recfeedx_8	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
2182	goalratex_8	Char	64	$64.	Tube feeding goal rate (Not Done)
2183	goalchangex_8	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
2184	brand1x_8	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
2185	feedhrsx_8	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
2186	giintoledenx_8	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
2187	distalconfx_8	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
2188	fullcalx_8	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
2189	surg_9	Num	8		Surgery
2190	surgc_9	Char	7	$7.	Surgery
2191	residual_9	Num	8		Elevated Residuals
2192	residualc_9	Char	18	$18.	Elevated Residuals
2193	const_9	Num	8		Constipation
2194	constc_9	Char	12	$12.	Constipation
2195	cramp_9	Num	8		Abdominal distention or cramping
2196	crampc_9	Char	32	$32.	Abdominal distention or cramping
2197	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)
2198	feedsitex_9	Char	64	$64.	Insertion site of feeding tube (Not Done)
2199	tubesizex_9	Char	64	$64.	Feeding tube size (Not Done)
2200	distalposx_9	Char	64	$64.	Distal position of feeding tube (Not Done)
2201	proneventx_9	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
2202	recfeed_9	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
2203	recfeedc_9	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
2204	goalrate_9	Num	8		Tube feeding goal rate
2205	goalchange_9	Num	8		Did the goal rate change during the 24 hour period?
2206	goalchangec_9	Char	19	$19.	Did the goal rate change during the 24 hour period?
2207	newgoal_9	Num	8		Yes, new goal rate
2208	brand1_9	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period

Num	Variable	Type	Len	Format	Label
2209	brand1vol_9	Num	8		Total volume of enteral formula 1 infused for 24 hour period
2210	brand2_9	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
2211	brand2vol_9	Num	8		Total volume of enteral formula 2 infused for 24 hour period
2212	feedhrs_9	Num	8		Number of hours enteral tube feeds on for this 24 hour period
2213	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?
2214	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?
2215	planext_9	Num	8		Planned Extubation
2216	planextc_9	Char	18	$18.	Planned Extubation
2217	giint_9	Num	8		GI Intolerance
2218	giintc_9	Char	14	$14.	GI Intolerance
2219	invbside_9	Num	8		Invasive bedside procedure
2220	invbsidec_9	Char	26	$26.	Invasive bedside procedure
2221	leftfloor_9	Num	8		Patient left the floor
2222	leftfloorc_9	Char	22	$22.	Patient left the floor
2223	care_9	Num	8		Nursing Care (i.e. bathing, HOB down)
2224	carec_9	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
2225	medadm_9	Num	8		Medical Administration
2226	medadmc_9	Char	22	$22.	Medical Administration
2227	feedoffoth_9	Num	8		Other reason feed turned off:
2228	feedoffothc_9	Char	5	$5.	Other reason feed turned off:
2229	feedoffreas_9	Char	255	$255.	Other reason feed turned off: Reason
2230	giintoleden_9	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
2231	giintoledenc_9	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
2232	diarrhea_9	Num	8		Diarrhea
2233	diarrheac_9	Char	8	$8.	Diarrhea
2234	vomiting_9	Num	8		Vomiting
2235	vomitingc_9	Char	8	$8.	Vomiting
2236	aspiration_9	Num	8		Aspiration
2237	aspirationc_9	Char	10	$10.	Aspiration
2238	regurg_9	Num	8		Regurgitation
2239	regurgc_9	Char	13	$13.	Regurgitation
2240	feedsite_9	Num	8		Insertion site of feeding tube
2241	feedsitec_9	Char	12	$12.	Insertion site of feeding tube
2242	tubesize_9	Num	8		Feeding tube size
2243	tubesizec_9	Char	10	$10.	Feeding tube size
2244	distalpos_9	Num	8		Distal position of feeding tube

Num	Variable	Type	Len	Format	Label
2245	distalposc_9	Char	12	$12.	Distal position of feeding tube
2246	distalconf_9	Num	8		Was distal position confirmed during this 24 hour period?
2247	distalconfc_9	Char	19	$19.	Was distal position confirmed during this 24 hour period?
2248	distalhow_9	Num	8		Yes, how confirmed:
2249	distalhowc_9	Char	15	$15.	Yes, how confirmed:
2250	distaloth_9	Char	40	$40.	Yes, how confirmed: Other
2251	fullcal_9	Num	8		Was rate advanced to full-calorie rate during this calendar day?
2252	fullcalc_9	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
2253	fullcaltm_9	Num	8	TIMEAMPM.	Yes, time full calorie reached:
2254	pronevent_9	Num	8		Prone ventilation this 24 hour period?
2255	proneventc_9	Char	3	$3.	Prone ventilation this 24 hour period?
2256	recfeedx_9	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
2257	goalratex_9	Char	64	$64.	Tube feeding goal rate (Not Done)
2258	goalchangex_9	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
2259	brand1x_9	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
2260	feedhrsx_9	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
2261	giintoledenx_9	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
2262	distalconfx_9	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
2263	fullcalx_9	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
2264	surg_10	Num	8		Surgery
2265	surgc_10	Char	7	$7.	Surgery
2266	residual_10	Num	8		Elevated Residuals
2267	residualc_10	Char	18	$18.	Elevated Residuals
2268	const_10	Num	8		Constipation
2269	constc_10	Char	12	$12.	Constipation
2270	cramp_10	Num	8		Abdominal distention or cramping
2271	crampc_10	Char	32	$32.	Abdominal distention or cramping
2272	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)
2273	feedsitex_10	Char	64	$64.	Insertion site of feeding tube (Not Done)
2274	tubesizex_10	Char	64	$64.	Feeding tube size (Not Done)
2275	distalposx_10	Char	64	$64.	Distal position of feeding tube (Not Done)
2276	proneventx_10	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
2277	recfeed_10	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?

Num	Variable	Type	Len	Format	Label
2278	recfeedc_10	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
2279	goalrate_10	Num	8		Tube feeding goal rate
2280	goalchange_10	Num	8		Did the goal rate change during the 24 hour period?
2281	goalchangec_10	Char	19	$19.	Did the goal rate change during the 24 hour period?
2282	newgoal_10	Num	8		Yes, new goal rate
2283	brand1_10	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
2284	brand1vol_10	Num	8		Total volume of enteral formula 1 infused for 24 hour period
2285	brand2_10	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
2286	brand2vol_10	Num	8		Total volume of enteral formula 2 infused for 24 hour period
2287	feedhrs_10	Num	8		Number of hours enteral tube feeds on for this 24 hour period
2288	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?
2289	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?
2290	planext_10	Num	8		Planned Extubation
2291	planextc_10	Char	18	$18.	Planned Extubation
2292	giint_10	Num	8		GI Intolerance
2293	giintc_10	Char	14	$14.	GI Intolerance
2294	invbside_10	Num	8		Invasive bedside procedure
2295	invbsidec_10	Char	26	$26.	Invasive bedside procedure
2296	leftfloor_10	Num	8		Patient left the floor
2297	leftfloorc_10	Char	22	$22.	Patient left the floor
2298	care_10	Num	8		Nursing Care (i.e. bathing, HOB down)
2299	carec_10	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
2300	medadm_10	Num	8		Medical Administration
2301	medadmc_10	Char	22	$22.	Medical Administration
2302	feedoffoth_10	Num	8		Other reason feed turned off:
2303	feedoffothc_10	Char	5	$5.	Other reason feed turned off:
2304	feedoffreas_10	Char	255	$255.	Other reason feed turned off: Reason
2305	giintoleden_10	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
2306	giintoledenc_10	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
2307	diarrhea_10	Num	8		Diarrhea
2308	diarrheac_10	Char	8	$8.	Diarrhea
2309	vomiting_10	Num	8		Vomiting
2310	vomitingc_10	Char	8	$8.	Vomiting
2311	aspiration_10	Num	8		Aspiration
2312	aspirationc_10	Char	10	$10.	Aspiration

Num	Variable	Type	Len	Format	Label
2313	regurg_10	Num	8		Regurgitation
2314	regurgc_10	Char	13	$13.	Regurgitation
2315	feedsite_10	Num	8		Insertion site of feeding tube
2316	feedsitec_10	Char	12	$12.	Insertion site of feeding tube
2317	tubesize_10	Num	8		Feeding tube size
2318	tubesizec_10	Char	10	$10.	Feeding tube size
2319	distalpos_10	Num	8		Distal position of feeding tube
2320	distalposc_10	Char	12	$12.	Distal position of feeding tube
2321	distalconf_10	Num	8		Was distal position confirmed during this 24 hour period?
2322	distalconfc_10	Char	19	$19.	Was distal position confirmed during this 24 hour period?
2323	distalhow_10	Num	8		Yes, how confirmed:
2324	distalhowc_10	Char	15	$15.	Yes, how confirmed:
2325	distaloth_10	Char	40	$40.	Yes, how confirmed: Other
2326	fullcal_10	Num	8		Was rate advanced to full-calorie rate during this calendar day?
2327	fullcalc_10	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
2328	fullcaltm_10	Num	8	TIMEAMPM.	Yes, time full calorie reached:
2329	pronevent_10	Num	8		Prone ventilation this 24 hour period?
2330	proneventc_10	Char	3	$3.	Prone ventilation this 24 hour period?
2331	recfeedx_10	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
2332	goalratex_10	Char	64	$64.	Tube feeding goal rate (Not Done)
2333	goalchangex_10	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
2334	brand1x_10	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
2335	feedhrsx_10	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
2336	giintoledenx_10	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
2337	distalconfx_10	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
2338	fullcalx_10	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
2339	surg_11	Num	8		Surgery
2340	surgc_11	Char	7	$7.	Surgery
2341	residual_11	Num	8		Elevated Residuals
2342	residualc_11	Char	18	$18.	Elevated Residuals
2343	const_11	Num	8		Constipation
2344	constc_11	Char	12	$12.	Constipation
2345	cramp_11	Num	8		Abdominal distention or cramping
2346	crampc_11	Char	32	$32.	Abdominal distention or cramping
2347	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)

Num	Variable	Type	Len	Format	Label
2348	feedsitex_11	Char	64	$64.	Insertion site of feeding tube (Not Done)
2349	tubesizex_11	Char	64	$64.	Feeding tube size (Not Done)
2350	distalposx_11	Char	64	$64.	Distal position of feeding tube (Not Done)
2351	proneventx_11	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
2352	recfeed_11	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
2353	recfeedc_11	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
2354	goalrate_11	Num	8		Tube feeding goal rate
2355	goalchange_11	Num	8		Did the goal rate change during the 24 hour period?
2356	goalchangec_11	Char	19	$19.	Did the goal rate change during the 24 hour period?
2357	newgoal_11	Num	8		Yes, new goal rate
2358	brand1_11	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
2359	brand1vol_11	Num	8		Total volume of enteral formula 1 infused for 24 hour period
2360	brand2_11	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
2361	brand2vol_11	Num	8		Total volume of enteral formula 2 infused for 24 hour period
2362	feedhrs_11	Num	8		Number of hours enteral tube feeds on for this 24 hour period
2363	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?
2364	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?
2365	planext_11	Num	8		Planned Extubation
2366	planextc_11	Char	18	$18.	Planned Extubation
2367	giint_11	Num	8		GI Intolerance
2368	giintc_11	Char	14	$14.	GI Intolerance
2369	invbside_11	Num	8		Invasive bedside procedure
2370	invbsidec_11	Char	26	$26.	Invasive bedside procedure
2371	leftfloor_11	Num	8		Patient left the floor
2372	leftfloorc_11	Char	22	$22.	Patient left the floor
2373	care_11	Num	8		Nursing Care (i.e. bathing, HOB down)
2374	carec_11	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
2375	medadm_11	Num	8		Medical Administration
2376	medadmc_11	Char	22	$22.	Medical Administration
2377	feedoffoth_11	Num	8		Other reason feed turned off:
2378	feedoffothc_11	Char	5	$5.	Other reason feed turned off:
2379	feedoffreas_11	Char	255	$255.	Other reason feed turned off: Reason
2380	giintoleden_11	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
2381	giintoledenc_11	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
2382	diarrhea_11	Num	8		Diarrhea

Num	Variable	Type	Len	Format	Label
2383	diarrheac_11	Char	8	$8.	Diarrhea
2384	vomiting_11	Num	8		Vomiting
2385	vomitingc_11	Char	8	$8.	Vomiting
2386	aspiration_11	Num	8		Aspiration
2387	aspirationc_11	Char	10	$10.	Aspiration
2388	regurg_11	Num	8		Regurgitation
2389	regurgc_11	Char	13	$13.	Regurgitation
2390	feedsite_11	Num	8		Insertion site of feeding tube
2391	feedsitec_11	Char	12	$12.	Insertion site of feeding tube
2392	tubesize_11	Num	8		Feeding tube size
2393	tubesizec_11	Char	10	$10.	Feeding tube size
2394	distalpos_11	Num	8		Distal position of feeding tube
2395	distalposc_11	Char	12	$12.	Distal position of feeding tube
2396	distalconf_11	Num	8		Was distal position confirmed during this 24 hour period?
2397	distalconfc_11	Char	19	$19.	Was distal position confirmed during this 24 hour period?
2398	distalhow_11	Num	8		Yes, how confirmed:
2399	distalhowc_11	Char	15	$15.	Yes, how confirmed:
2400	distaloth_11	Char	40	$40.	Yes, how confirmed: Other
2401	fullcal_11	Num	8		Was rate advanced to full-calorie rate during this calendar day?
2402	fullcalc_11	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
2403	fullcaltm_11	Num	8	TIMEAMPM.	Yes, time full calorie reached:
2404	pronevent_11	Num	8		Prone ventilation this 24 hour period?
2405	proneventc_11	Char	3	$3.	Prone ventilation this 24 hour period?
2406	recfeedx_11	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
2407	goalratex_11	Char	64	$64.	Tube feeding goal rate (Not Done)
2408	goalchangex_11	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
2409	brand1x_11	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
2410	feedhrsx_11	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
2411	giintoledenx_11	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
2412	distalconfx_11	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
2413	fullcalx_11	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
2414	surg_12	Num	8		Surgery
2415	surgc_12	Char	7	$7.	Surgery
2416	residual_12	Num	8		Elevated Residuals
2417	residualc_12	Char	18	$18.	Elevated Residuals

Num	Variable	Type	Len	Format	Label
2418	const_12	Num	8		Constipation
2419	constc_12	Char	12	$12.	Constipation
2420	cramp_12	Num	8		Abdominal distention or cramping
2421	crampc_12	Char	32	$32.	Abdominal distention or cramping
2422	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)
2423	feedsitex_12	Char	64	$64.	Insertion site of feeding tube (Not Done)
2424	tubesizex_12	Char	64	$64.	Feeding tube size (Not Done)
2425	distalposx_12	Char	64	$64.	Distal position of feeding tube (Not Done)
2426	proneventx_12	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
2427	recfeed_12	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
2428	recfeedc_12	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
2429	goalrate_12	Num	8		Tube feeding goal rate
2430	goalchange_12	Num	8		Did the goal rate change during the 24 hour period?
2431	goalchangec_12	Char	19	$19.	Did the goal rate change during the 24 hour period?
2432	newgoal_12	Num	8		Yes, new goal rate
2433	brand1_12	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
2434	brand1vol_12	Num	8		Total volume of enteral formula 1 infused for 24 hour period
2435	brand2_12	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
2436	brand2vol_12	Num	8		Total volume of enteral formula 2 infused for 24 hour period
2437	feedhrs_12	Num	8		Number of hours enteral tube feeds on for this 24 hour period
2438	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?
2439	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?
2440	planext_12	Num	8		Planned Extubation
2441	planextc_12	Char	18	$18.	Planned Extubation
2442	giint_12	Num	8		GI Intolerance
2443	giintc_12	Char	14	$14.	GI Intolerance
2444	invbside_12	Num	8		Invasive bedside procedure
2445	invbsidec_12	Char	26	$26.	Invasive bedside procedure
2446	leftfloor_12	Num	8		Patient left the floor
2447	leftfloorc_12	Char	22	$22.	Patient left the floor
2448	care_12	Num	8		Nursing Care (i.e. bathing, HOB down)
2449	carec_12	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
2450	medadm_12	Num	8		Medical Administration
2451	medadmc_12	Char	22	$22.	Medical Administration
2452	feedoffoth_12	Num	8		Other reason feed turned off:

Num	Variable	Type	Len	Format	Label
2453	feedoffothc_12	Char	5	$5.	Other reason feed turned off:
2454	feedoffreas_12	Char	255	$255.	Other reason feed turned off: Reason
2455	giintoleden_12	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
2456	giintoledenc_12	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
2457	diarrhea_12	Num	8		Diarrhea
2458	diarrheac_12	Char	8	$8.	Diarrhea
2459	vomiting_12	Num	8		Vomiting
2460	vomitingc_12	Char	8	$8.	Vomiting
2461	aspiration_12	Num	8		Aspiration
2462	aspirationc_12	Char	10	$10.	Aspiration
2463	regurg_12	Num	8		Regurgitation
2464	regurgc_12	Char	13	$13.	Regurgitation
2465	feedsite_12	Num	8		Insertion site of feeding tube
2466	feedsitec_12	Char	12	$12.	Insertion site of feeding tube
2467	tubesize_12	Num	8		Feeding tube size
2468	tubesizec_12	Char	10	$10.	Feeding tube size
2469	distalpos_12	Num	8		Distal position of feeding tube
2470	distalposc_12	Char	12	$12.	Distal position of feeding tube
2471	distalconf_12	Num	8		Was distal position confirmed during this 24 hour period?
2472	distalconfc_12	Char	19	$19.	Was distal position confirmed during this 24 hour period?
2473	distalhow_12	Num	8		Yes, how confirmed:
2474	distalhowc_12	Char	15	$15.	Yes, how confirmed:
2475	distaloth_12	Char	40	$40.	Yes, how confirmed: Other
2476	fullcal_12	Num	8		Was rate advanced to full-calorie rate during this calendar day?
2477	fullcalc_12	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
2478	fullcaltm_12	Num	8	TIMEAMPM.	Yes, time full calorie reached:
2479	pronevent_12	Num	8		Prone ventilation this 24 hour period?
2480	proneventc_12	Char	3	$3.	Prone ventilation this 24 hour period?
2481	recfeedx_12	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
2482	goalratex_12	Char	64	$64.	Tube feeding goal rate (Not Done)
2483	goalchangex_12	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
2484	brand1x_12	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
2485	feedhrsx_12	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
2486	giintoledenx_12	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
2487	distalconfx_12	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)

Num	Variable	Type	Len	Format	Label
2488	fullcalx_12	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
2489	templ	Num	8		Lowest Temperature in Celcius
2490	temph	Num	8		Highest Temperature in Clecius
2491	sysbpl	Num	8		Lowest Systolic BP
2492	sysbph	Num	8		Highest Systolic BP
2493	mapl	Num	8		Lowest Mean Arterial Pressure
2494	maph	Num	8		Highest Mean Arterial Pressure
2495	hratel	Num	8		Lowest Heart Rate (beats/min)
2496	hrateh	Num	8		Highest Heart Rate (beats/min)
2497	respl	Num	8		Lowest Respiratory Rate (breaths/min)
2498	resph	Num	8		Highest Respiratory Rate (breaths/min)
2499	ventl	Num	8		Patient ventilated at lowest resp. rate
2500	ventlc	Char	3	$3.	Patient ventilated at lowest resp. rate
2501	venth	Num	8		Patient ventilated at highest resp. rate
2502	venthc	Char	3	$3.	Patient ventilated at highest resp. rate
2503	urineout_0	Num	8		Urine output for 24 hours preceding randomization
2504	fluidout_0	Num	8		Total fluid output last 24 hours
2505	fluidin_0	Num	8		Total fluid intake for the 24 hours preceding randomization
2506	hcto	Num	8		Hct: Only %
2507	hctl	Num	8		Hct: Lowest %
2508	hcth	Num	8		Hct: Highest %
2509	wbco	Num	8		WBC: Only mm^3
2510	wbcl	Num	8		WBC: Lowest mm^3
2511	wbch	Num	8		WBC: Highest mm^3
2512	plate	Num	8		Platelets (lowest): x 1000 / mm^3
2513	sodiumo	Num	8		Serum Sodium: Only (mEq/L)
2514	sodiuml	Num	8		Serum Sodium: Lowest (mEq/L)
2515	sodiumh	Num	8		Serum Sodium: Highest (mEq/L)
2516	potaso	Num	8		Serum Potassium: Only (mEq/L)
2517	potasl	Num	8		Serum Potassium: Lowest (mEq/L)
2518	potash	Num	8		Serum Potassium: Highest (mEq/L)
2519	bun	Num	8		Serum BUN (highest): (mg/dL)
2520	creato	Num	8		Serum Creatinine Only: (mg/dL)
2521	creatl	Num	8		Serum Creatinine Lowest: (mg/dL)
2522	creath	Num	8		Serum Creatinine Highest: (mg/dL)
2523	gluco	Num	8		Serum Glucose Only: (mg/dL)
2524	glucl	Num	8		Serum Glucose Lowest: (mg/dL)
2525	gluch	Num	8		Serum Glucose Highest: (mg/dL)

Num	Variable	Type	Len	Format	Label
2526	albumo	Num	8		Serum Albumin Only: (g/dL)
2527	albuml	Num	8		Serum Albumin Lowest: (g/dL)
2528	albumh	Num	8		Serum Albumin Highest: (g/dL)
2529	bilih	Num	8		Serum Bilirubin Highest: (mg/dL)
2530	bicarbl	Num	8		Serum Bicarbonate Lowest: (mEq/L)
2531	tempX	Char	64	$64.	Highest Temperature in Clecius (Not Done)
2532	sysbpX	Char	64	$64.	Highest Systolic BP (Not Done)
2533	mapX	Char	64	$64.	Highest Mean Arterial Pressure (Not Done)
2534	hrateX	Char	64	$64.	Highest Heart Rate (beats/min) (Not Done)
2535	resphlX	Char	64	$64.	Highest Respiratory Rate (breaths/min) (Not Done)
2536	ventlX	Char	64	$64.	Patient ventilated at lowest resp. rate (Not Done)
2537	venthX	Char	64	$64.	Patient ventilated at highest resp. rate (Not Done)
2538	urineoutX	Char	64	$64.	Urine output for 24 hours preceding randomization (Not Done)
2539	fluidoutX	Char	64	$64.	Total fluid output last 24 hours (Not Done)
2540	fluidinX	Char	64	$64.	Total fluid intake for the 24 hours preceding randomization (Not Done)
2541	hctX	Char	64	$64.	Hct: (Not Done)
2542	wbcX	Char	64	$64.	WBC: (Not Done)
2543	plateX	Char	64	$64.	Platelets (lowest): x 1000 / mm^3 (Not Done)
2544	bunX	Char	64	$64.	Serum BUN (highest): (mg/dL) (Not Done)
2545	creatX	Char	64	$64.	Serum Creatinine: (mg/dL) (Not Done)
2546	albumX	Char	64	$64.	Serum Albumin: (g/dL) (Not Done)
2547	bilihX	Char	64	$64.	Serum Bilirubin Highest: (mg/dL) (Not Done)
2548	bicarblx	Char	64	$64.	Serum Bicarbonate Lowest: (mEq/L) (Not Done)
2549	prbc24_1	Num	8		PRBC given in last 24 hours
2550	ffp24_1	Num	8		FFP given in last 24 hours
2551	notedenpt_1	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2552	notedenptc_1	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2553	entfeedvol_1	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
2554	fluidinx_1	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
2555	fluidoutx_1	Char	64	$64.	Total fluid out last 24 hours (Not Done)
2556	urineoutx_1	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
2557	fluidin_1	Num	8		Total Fluid Intake in last 24h
2558	fluidout_1	Num	8		Total fluid out last 24 hours
2559	urineout_1	Num	8		Total urine output in the last 24 hours
2560	prbc24_2	Num	8		PRBC given in last 24 hours
2561	ffp24_2	Num	8		FFP given in last 24 hours
2562	notedenpt_2	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?

Num	Variable	Type	Len	Format	Label
2563	notedenptc_2	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2564	entfeedvol_2	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
2565	fluidinx_2	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
2566	fluidoutx_2	Char	64	$64.	Total fluid out last 24 hours (Not Done)
2567	urineoutx_2	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
2568	fluidin_2	Num	8		Total Fluid Intake in last 24h
2569	fluidout_2	Num	8		Total fluid out last 24 hours
2570	urineout_2	Num	8		Total urine output in the last 24 hours
2571	prbc24_3	Num	8		PRBC given in last 24 hours
2572	ffp24_3	Num	8		FFP given in last 24 hours
2573	notedenpt_3	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2574	notedenptc_3	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2575	entfeedvol_3	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
2576	fluidinx_3	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
2577	fluidoutx_3	Char	64	$64.	Total fluid out last 24 hours (Not Done)
2578	urineoutx_3	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
2579	fluidin_3	Num	8		Total Fluid Intake in last 24h
2580	fluidout_3	Num	8		Total fluid out last 24 hours
2581	urineout_3	Num	8		Total urine output in the last 24 hours
2582	prbc24_4	Num	8		PRBC given in last 24 hours
2583	ffp24_4	Num	8		FFP given in last 24 hours
2584	notedenpt_4	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2585	notedenptc_4	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2586	entfeedvol_4	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
2587	fluidinx_4	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
2588	fluidoutx_4	Char	64	$64.	Total fluid out last 24 hours (Not Done)
2589	urineoutx_4	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
2590	fluidin_4	Num	8		Total Fluid Intake in last 24h
2591	fluidout_4	Num	8		Total fluid out last 24 hours
2592	urineout_4	Num	8		Total urine output in the last 24 hours
2593	prbc24_5	Num	8		PRBC given in last 24 hours
2594	ffp24_5	Num	8		FFP given in last 24 hours
2595	notedenpt_5	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2596	notedenptc_5	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2597	entfeedvol_5	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
2598	fluidinx_5	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)

Num	Variable	Type	Len	Format	Label
2599	fluidoutx_5	Char	64	$64.	Total fluid out last 24 hours (Not Done)
2600	urineoutx_5	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
2601	fluidin_5	Num	8		Total Fluid Intake in last 24h
2602	fluidout_5	Num	8		Total fluid out last 24 hours
2603	urineout_5	Num	8		Total urine output in the last 24 hours
2604	prbc24_6	Num	8		PRBC given in last 24 hours
2605	ffp24_6	Num	8		FFP given in last 24 hours
2606	notedenpt_6	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2607	notedenptc_6	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2608	entfeedvol_6	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
2609	fluidinx_6	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
2610	fluidoutx_6	Char	64	$64.	Total fluid out last 24 hours (Not Done)
2611	urineoutx_6	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
2612	fluidin_6	Num	8		Total Fluid Intake in last 24h
2613	fluidout_6	Num	8		Total fluid out last 24 hours
2614	urineout_6	Num	8		Total urine output in the last 24 hours
2615	prbc24_7	Num	8		PRBC given in last 24 hours
2616	ffp24_7	Num	8		FFP given in last 24 hours
2617	notedenpt_7	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2618	notedenptc_7	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2619	entfeedvol_7	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
2620	fluidinx_7	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
2621	fluidoutx_7	Char	64	$64.	Total fluid out last 24 hours (Not Done)
2622	urineoutx_7	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
2623	fluidin_7	Num	8		Total Fluid Intake in last 24h
2624	fluidout_7	Num	8		Total fluid out last 24 hours
2625	urineout_7	Num	8		Total urine output in the last 24 hours
2626	prbc24_8	Num	8		PRBC given in last 24 hours
2627	ffp24_8	Num	8		FFP given in last 24 hours
2628	notedenpt_8	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2629	notedenptc_8	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
2630	entfeedvol_8	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
2631	fluidinx_8	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
2632	fluidoutx_8	Char	64	$64.	Total fluid out last 24 hours (Not Done)
2633	urineoutx_8	Char	64	$64.	Total urine output in the last 24 hours (Not Done)
2634	fluidin_8	Num	8		Total Fluid Intake in last 24h
2635	fluidout_8	Num	8		Total fluid out last 24 hours

Num	Variable	Type	Len	Format	Label
2636	urineout_8	Num	8		Total urine output in the last 24 hours
2637	sedative_0	Num	8		Is patient on a sedative or neuromuscular blocker?
2638	sedativec_0	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
2639	eye_0	Num	8		Eye opening score:
2640	eyec_0	Char	11	$11.	Eye opening score:
2641	motor_0	Num	8		Motor response score:
2642	motorc_0	Char	26	$26.	Motor response score:
2643	verbal_0	Num	8		Verbal response score:
2644	verbalc_0	Char	50	$50.	Verbal response score:
2645	gcs_0	Num	8		Total
2646	gcsdt_0	Num	8	BEST12.	Date Taken (Day)
2647	sedativex_0	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
2648	eyex_0	Char	64	$64.	Eye opening score: (Not Done)
2649	motorx_0	Char	64	$64.	Motor response score: (Not Done)
2650	verbalx_0	Char	64	$64.	Verbal response score: (Not Done)
2651	VISITORDER_0	Num	8		VISITORDER
2652	sedative_7	Num	8		Is patient on a sedative or neuromuscular blocker?
2653	sedativec_7	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
2654	eye_7	Num	8		Eye opening score:
2655	eyec_7	Char	11	$11.	Eye opening score:
2656	motor_7	Num	8		Motor response score:
2657	motorc_7	Char	26	$26.	Motor response score:
2658	verbal_7	Num	8		Verbal response score:
2659	verbalc_7	Char	50	$50.	Verbal response score:
2660	gcs_7	Num	8		Total
2661	gcsdt_7	Num	8	BEST12.	Date Taken (Day)
2662	sedativex_7	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
2663	eyex_7	Char	64	$64.	Eye opening score: (Not Done)
2664	motorx_7	Char	64	$64.	Motor response score: (Not Done)
2665	verbalx_7	Char	64	$64.	Verbal response score: (Not Done)
2666	VISITORDER_7	Num	8		VISITORDER
2667	sedative_13	Num	8		Is patient on a sedative or neuromuscular blocker?
2668	sedativec_13	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
2669	eye_13	Num	8		Eye opening score:
2670	eyec_13	Char	11	$11.	Eye opening score:
2671	motor_13	Num	8		Motor response score:
2672	motorc_13	Char	26	$26.	Motor response score:
2673	verbal_13	Num	8		Verbal response score:
2674	verbalc_13	Char	50	$50.	Verbal response score:

Num	Variable	Type	Len	Format	Label
2675	gcs_13	Num	8		Total
2676	gcsdt_13	Num	8	BEST12.	Date Taken (Day)
2677	sedativex_13	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
2678	eyex_13	Char	64	$64.	Eye opening score: (Not Done)
2679	motorx_13	Char	64	$64.	Motor response score: (Not Done)
2680	verbalx_13	Char	64	$64.	Verbal response score: (Not Done)
2681	VISITORDER_13	Num	8		VISITORDER
2682	sedative_14	Num	8		Is patient on a sedative or neuromuscular blocker?
2683	sedativec_14	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
2684	eye_14	Num	8		Eye opening score:
2685	eyec_14	Char	11	$11.	Eye opening score:
2686	motor_14	Num	8		Motor response score:
2687	motorc_14	Char	26	$26.	Motor response score:
2688	verbal_14	Num	8		Verbal response score:
2689	verbalc_14	Char	50	$50.	Verbal response score:
2690	gcs_14	Num	8		Total
2691	gcsdt_14	Num	8	BEST12.	Date Taken (Day)
2692	sedativex_14	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
2693	eyex_14	Char	64	$64.	Eye opening score: (Not Done)
2694	motorx_14	Char	64	$64.	Motor response score: (Not Done)
2695	verbalx_14	Char	64	$64.	Verbal response score: (Not Done)
2696	VISITORDER_14	Num	8		VISITORDER
2697	sedative_15	Num	8		Is patient on a sedative or neuromuscular blocker?
2698	sedativec_15	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
2699	eye_15	Num	8		Eye opening score:
2700	eyec_15	Char	11	$11.	Eye opening score:
2701	motor_15	Num	8		Motor response score:
2702	motorc_15	Char	26	$26.	Motor response score:
2703	verbal_15	Num	8		Verbal response score:
2704	verbalc_15	Char	50	$50.	Verbal response score:
2705	gcs_15	Num	8		Total
2706	gcsdt_15	Num	8	BEST12.	Date Taken (Day)
2707	sedativex_15	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
2708	eyex_15	Char	64	$64.	Eye opening score: (Not Done)
2709	motorx_15	Char	64	$64.	Motor response score: (Not Done)
2710	verbalx_15	Char	64	$64.	Verbal response score: (Not Done)
2711	VISITORDER_15	Num	8		VISITORDER
2712	sedative_16	Num	8		Is patient on a sedative or neuromuscular blocker?
2713	sedativec_16	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?

Num	Variable	Type	Len	Format	Label
2714	eye_16	Num	8		Eye opening score:
2715	eyec_16	Char	11	$11.	Eye opening score:
2716	motor_16	Num	8		Motor response score:
2717	motorc_16	Char	26	$26.	Motor response score:
2718	verbal_16	Num	8		Verbal response score:
2719	verbalc_16	Char	50	$50.	Verbal response score:
2720	gcs_16	Num	8		Total
2721	gcsdt_16	Num	8	BEST12.	Date Taken (Day)
2722	sedativex_16	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
2723	eyex_16	Char	64	$64.	Eye opening score: (Not Done)
2724	motorx_16	Char	64	$64.	Motor response score: (Not Done)
2725	verbalx_16	Char	64	$64.	Verbal response score: (Not Done)
2726	VISITORDER_16	Num	8		VISITORDER
2727	sedative_17	Num	8		Is patient on a sedative or neuromuscular blocker?
2728	sedativec_17	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
2729	eye_17	Num	8		Eye opening score:
2730	eyec_17	Char	11	$11.	Eye opening score:
2731	motor_17	Num	8		Motor response score:
2732	motorc_17	Char	26	$26.	Motor response score:
2733	verbal_17	Num	8		Verbal response score:
2734	verbalc_17	Char	50	$50.	Verbal response score:
2735	gcs_17	Num	8		Total
2736	gcsdt_17	Num	8	BEST12.	Date Taken (Day)
2737	sedativex_17	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
2738	eyex_17	Char	64	$64.	Eye opening score: (Not Done)
2739	motorx_17	Char	64	$64.	Motor response score: (Not Done)
2740	verbalx_17	Char	64	$64.	Verbal response score: (Not Done)
2741	VISITORDER_17	Num	8		VISITORDER
2742	sedative_18	Num	8		Is patient on a sedative or neuromuscular blocker?
2743	sedativec_18	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
2744	eye_18	Num	8		Eye opening score:
2745	eyec_18	Char	11	$11.	Eye opening score:
2746	motor_18	Num	8		Motor response score:
2747	motorc_18	Char	26	$26.	Motor response score:
2748	verbal_18	Num	8		Verbal response score:
2749	verbalc_18	Char	50	$50.	Verbal response score:
2750	gcs_18	Num	8		Total
2751	gcsdt_18	Num	8	BEST12.	Date Taken (Day)
2752	sedativex_18	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)

Num	Variable	Type	Len	Format	Label
2753	eyex_18	Char	64	$64.	Eye opening score: (Not Done)
2754	motorx_18	Char	64	$64.	Motor response score: (Not Done)
2755	verbalx_18	Char	64	$64.	Verbal response score: (Not Done)
2756	VISITORDER_18	Num	8		VISITORDER
2757	sedative_19	Num	8		Is patient on a sedative or neuromuscular blocker?
2758	sedativec_19	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
2759	eye_19	Num	8		Eye opening score:
2760	eyec_19	Char	11	$11.	Eye opening score:
2761	motor_19	Num	8		Motor response score:
2762	motorc_19	Char	26	$26.	Motor response score:
2763	verbal_19	Num	8		Verbal response score:
2764	verbalc_19	Char	50	$50.	Verbal response score:
2765	gcs_19	Num	8		Total
2766	gcsdt_19	Num	8	BEST12.	Date Taken (Day)
2767	sedativex_19	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
2768	eyex_19	Char	64	$64.	Eye opening score: (Not Done)
2769	motorx_19	Char	64	$64.	Motor response score: (Not Done)
2770	verbalx_19	Char	64	$64.	Verbal response score: (Not Done)
2771	VISITORDER_19	Num	8		VISITORDER
2772	sedative_20	Num	8		Is patient on a sedative or neuromuscular blocker?
2773	sedativec_20	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
2774	eye_20	Num	8		Eye opening score:
2775	eyec_20	Char	11	$11.	Eye opening score:
2776	motor_20	Num	8		Motor response score:
2777	motorc_20	Char	26	$26.	Motor response score:
2778	verbal_20	Num	8		Verbal response score:
2779	verbalc_20	Char	50	$50.	Verbal response score:
2780	gcs_20	Num	8		Total
2781	gcsdt_20	Num	8	BEST12.	Date Taken (Day)
2782	sedativex_20	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
2783	eyex_20	Char	64	$64.	Eye opening score: (Not Done)
2784	motorx_20	Char	64	$64.	Motor response score: (Not Done)
2785	verbalx_20	Char	64	$64.	Verbal response score: (Not Done)
2786	VISITORDER_20	Num	8		VISITORDER
2787	sedative_28	Num	8		Is patient on a sedative or neuromuscular blocker?
2788	sedativec_28	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
2789	eye_28	Num	8		Eye opening score:
2790	eyec_28	Char	11	$11.	Eye opening score:
2791	motor_28	Num	8		Motor response score:

Num	Variable	Type	Len	Format	Label
2792	motorc_28	Char	26	$26.	Motor response score:
2793	verbal_28	Num	8		Verbal response score:
2794	verbalc_28	Char	50	$50.	Verbal response score:
2795	gcs_28	Num	8		Total
2796	gcsdt_28	Num	8	BEST12.	Date Taken (Day)
2797	sedativex_28	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
2798	eyex_28	Char	64	$64.	Eye opening score: (Not Done)
2799	motorx_28	Char	64	$64.	Motor response score: (Not Done)
2800	verbalx_28	Char	64	$64.	Verbal response score: (Not Done)
2801	VISITORDER_28	Num	8		VISITORDER
2802	sedative_uns	Num	8		Is patient on a sedative or neuromuscular blocker?
2803	sedativec_uns	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
2804	eye_uns	Num	8		Eye opening score:
2805	eyec_uns	Char	11	$11.	Eye opening score:
2806	motor_uns	Num	8		Motor response score:
2807	motorc_uns	Char	26	$26.	Motor response score:
2808	verbal_uns	Num	8		Verbal response score:
2809	verbalc_uns	Char	50	$50.	Verbal response score:
2810	gcs_uns	Num	8		Total
2811	gcsdt_uns	Num	8	BEST12.	Date Taken (Day)
2812	sedativex_uns	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
2813	eyex_uns	Char	64	$64.	Eye opening score: (Not Done)
2814	motorx_uns	Char	64	$64.	Motor response score: (Not Done)
2815	verbalx_uns	Char	64	$64.	Verbal response score: (Not Done)
2816	VISITORDER_uns	Num	8		VISITORDER
2817	index	Num	8		
2818	narcotics_1	Num	8		Did patient receive any narcotics this calendar date?
2819	narcoticsc_1	Char	3	$3.	Did patient receive any narcotics this calendar date?
2820	paralytics_1	Num	8		Did patient receive any paralytics this calendar date?
2821	paralyticsc_1	Char	3	$3.	Did patient receive any paralytics this calendar date?
2822	prokinetics_1	Num	8		Did patient receive any prokinetics this calendar date?
2823	prokineticsc_1	Char	3	$3.	Did patient receive any prokinetics this calendar date?
2824	antiemetics_1	Num	8		Did patient receive any anti-emetics this calendar date?
2825	antiemeticsc_1	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
2826	antidiarrheals_1	Num	8		Did patient receive any anti-diarrheals this calendar date?
2827	antidiarrhealsc_1	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
2828	laxatives_1	Num	8		Did patient receive any laxatives this calendar date?
2829	laxativesc_1	Char	3	$3.	Did patient receive any laxatives this calendar date?
2830	narcoticsx_1	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)

Num	Variable	Type	Len	Format	Label
2831	paralyticsx_1	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
2832	prokineticsx_1	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
2833	antiemeticsx_1	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
2834	antidiarrhealsx_1	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
2835	laxativesx_1	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
2836	narcotics_2	Num	8		Did patient receive any narcotics this calendar date?
2837	narcoticsc_2	Char	3	$3.	Did patient receive any narcotics this calendar date?
2838	paralytics_2	Num	8		Did patient receive any paralytics this calendar date?
2839	paralyticsc_2	Char	3	$3.	Did patient receive any paralytics this calendar date?
2840	prokinetics_2	Num	8		Did patient receive any prokinetics this calendar date?
2841	prokineticsc_2	Char	3	$3.	Did patient receive any prokinetics this calendar date?
2842	antiemetics_2	Num	8		Did patient receive any anti-emetics this calendar date?
2843	antiemeticsc_2	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
2844	antidiarrheals_2	Num	8		Did patient receive any anti-diarrheals this calendar date?
2845	antidiarrhealsc_2	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
2846	laxatives_2	Num	8		Did patient receive any laxatives this calendar date?
2847	laxativesc_2	Char	3	$3.	Did patient receive any laxatives this calendar date?
2848	narcoticsx_2	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
2849	paralyticsx_2	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
2850	prokineticsx_2	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
2851	antiemeticsx_2	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
2852	antidiarrhealsx_2	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
2853	laxativesx_2	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
2854	narcotics_3	Num	8		Did patient receive any narcotics this calendar date?
2855	narcoticsc_3	Char	3	$3.	Did patient receive any narcotics this calendar date?
2856	paralytics_3	Num	8		Did patient receive any paralytics this calendar date?
2857	paralyticsc_3	Char	3	$3.	Did patient receive any paralytics this calendar date?
2858	prokinetics_3	Num	8		Did patient receive any prokinetics this calendar date?
2859	prokineticsc_3	Char	3	$3.	Did patient receive any prokinetics this calendar date?
2860	antiemetics_3	Num	8		Did patient receive any anti-emetics this calendar date?
2861	antiemeticsc_3	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
2862	antidiarrheals_3	Num	8		Did patient receive any anti-diarrheals this calendar date?
2863	antidiarrhealsc_3	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?

Num	Variable	Type	Len	Format	Label
2864	laxatives_3	Num	8		Did patient receive any laxatives this calendar date?
2865	laxativesc_3	Char	3	$3.	Did patient receive any laxatives this calendar date?
2866	narcoticsx_3	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
2867	paralyticsx_3	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
2868	prokineticsx_3	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
2869	antiemeticsx_3	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
2870	antidiarrhealsx_3	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
2871	laxativesx_3	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
2872	narcotics_4	Num	8		Did patient receive any narcotics this calendar date?
2873	narcoticsc_4	Char	3	$3.	Did patient receive any narcotics this calendar date?
2874	paralytics_4	Num	8		Did patient receive any paralytics this calendar date?
2875	paralyticsc_4	Char	3	$3.	Did patient receive any paralytics this calendar date?
2876	prokinetics_4	Num	8		Did patient receive any prokinetics this calendar date?
2877	prokineticsc_4	Char	3	$3.	Did patient receive any prokinetics this calendar date?
2878	antiemetics_4	Num	8		Did patient receive any anti-emetics this calendar date?
2879	antiemeticsc_4	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
2880	antidiarrheals_4	Num	8		Did patient receive any anti-diarrheals this calendar date?
2881	antidiarrhealsc_4	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
2882	laxatives_4	Num	8		Did patient receive any laxatives this calendar date?
2883	laxativesc_4	Char	3	$3.	Did patient receive any laxatives this calendar date?
2884	narcoticsx_4	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
2885	paralyticsx_4	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
2886	prokineticsx_4	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
2887	antiemeticsx_4	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
2888	antidiarrhealsx_4	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
2889	laxativesx_4	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
2890	narcotics_5	Num	8		Did patient receive any narcotics this calendar date?
2891	narcoticsc_5	Char	3	$3.	Did patient receive any narcotics this calendar date?
2892	paralytics_5	Num	8		Did patient receive any paralytics this calendar date?
2893	paralyticsc_5	Char	3	$3.	Did patient receive any paralytics this calendar date?
2894	prokinetics_5	Num	8		Did patient receive any prokinetics this calendar date?
2895	prokineticsc_5	Char	3	$3.	Did patient receive any prokinetics this calendar date?
2896	antiemetics_5	Num	8		Did patient receive any anti-emetics this calendar date?

Num	Variable	Type	Len	Format	Label
2897	antiemeticsc_5	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
2898	antidiarrheals_5	Num	8		Did patient receive any anti-diarrheals this calendar date?
2899	antidiarrhealsc_5	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
2900	laxatives_5	Num	8		Did patient receive any laxatives this calendar date?
2901	laxativesc_5	Char	3	$3.	Did patient receive any laxatives this calendar date?
2902	narcoticsx_5	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
2903	paralyticsx_5	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
2904	prokineticsx_5	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
2905	antiemeticsx_5	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
2906	antidiarrhealsx_5	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
2907	laxativesx_5	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
2908	narcotics_6	Num	8		Did patient receive any narcotics this calendar date?
2909	narcoticsc_6	Char	3	$3.	Did patient receive any narcotics this calendar date?
2910	paralytics_6	Num	8		Did patient receive any paralytics this calendar date?
2911	paralyticsc_6	Char	3	$3.	Did patient receive any paralytics this calendar date?
2912	prokinetics_6	Num	8		Did patient receive any prokinetics this calendar date?
2913	prokineticsc_6	Char	3	$3.	Did patient receive any prokinetics this calendar date?
2914	antiemetics_6	Num	8		Did patient receive any anti-emetics this calendar date?
2915	antiemeticsc_6	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
2916	antidiarrheals_6	Num	8		Did patient receive any anti-diarrheals this calendar date?
2917	antidiarrhealsc_6	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
2918	laxatives_6	Num	8		Did patient receive any laxatives this calendar date?
2919	laxativesc_6	Char	3	$3.	Did patient receive any laxatives this calendar date?
2920	narcoticsx_6	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
2921	paralyticsx_6	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
2922	prokineticsx_6	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
2923	antiemeticsx_6	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
2924	antidiarrhealsx_6	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
2925	laxativesx_6	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
2926	narcotics_7	Num	8		Did patient receive any narcotics this calendar date?
2927	narcoticsc_7	Char	3	$3.	Did patient receive any narcotics this calendar date?
2928	paralytics_7	Num	8		Did patient receive any paralytics this calendar date?
2929	paralyticsc_7	Char	3	$3.	Did patient receive any paralytics this calendar date?

Num	Variable	Type	Len	Format	Label
2930	prokinetics_7	Num	8		Did patient receive any prokinetics this calendar date?
2931	prokineticsc_7	Char	3	$3.	Did patient receive any prokinetics this calendar date?
2932	antiemetics_7	Num	8		Did patient receive any anti-emetics this calendar date?
2933	antiemeticsc_7	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
2934	antidiarrheals_7	Num	8		Did patient receive any anti-diarrheals this calendar date?
2935	antidiarrhealsc_7	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
2936	laxatives_7	Num	8		Did patient receive any laxatives this calendar date?
2937	laxativesc_7	Char	3	$3.	Did patient receive any laxatives this calendar date?
2938	narcoticsx_7	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
2939	paralyticsx_7	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
2940	prokineticsx_7	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
2941	antiemeticsx_7	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
2942	antidiarrhealsx_7	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
2943	laxativesx_7	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
2944	narcotics_8	Num	8		Did patient receive any narcotics this calendar date?
2945	narcoticsc_8	Char	3	$3.	Did patient receive any narcotics this calendar date?
2946	paralytics_8	Num	8		Did patient receive any paralytics this calendar date?
2947	paralyticsc_8	Char	3	$3.	Did patient receive any paralytics this calendar date?
2948	prokinetics_8	Num	8		Did patient receive any prokinetics this calendar date?
2949	prokineticsc_8	Char	3	$3.	Did patient receive any prokinetics this calendar date?
2950	antiemetics_8	Num	8		Did patient receive any anti-emetics this calendar date?
2951	antiemeticsc_8	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
2952	antidiarrheals_8	Num	8		Did patient receive any anti-diarrheals this calendar date?
2953	antidiarrhealsc_8	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
2954	laxatives_8	Num	8		Did patient receive any laxatives this calendar date?
2955	laxativesc_8	Char	3	$3.	Did patient receive any laxatives this calendar date?
2956	narcoticsx_8	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
2957	paralyticsx_8	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
2958	prokineticsx_8	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
2959	antiemeticsx_8	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
2960	antidiarrhealsx_8	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
2961	laxativesx_8	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
2962	narcotics_9	Num	8		Did patient receive any narcotics this calendar date?

Num	Variable	Type	Len	Format	Label
2963	narcoticsc_9	Char	3	$3.	Did patient receive any narcotics this calendar date?
2964	paralytics_9	Num	8		Did patient receive any paralytics this calendar date?
2965	paralyticsc_9	Char	3	$3.	Did patient receive any paralytics this calendar date?
2966	prokinetics_9	Num	8		Did patient receive any prokinetics this calendar date?
2967	prokineticsc_9	Char	3	$3.	Did patient receive any prokinetics this calendar date?
2968	antiemetics_9	Num	8		Did patient receive any anti-emetics this calendar date?
2969	antiemeticsc_9	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
2970	antidiarrheals_9	Num	8		Did patient receive any anti-diarrheals this calendar date?
2971	antidiarrhealsc_9	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
2972	laxatives_9	Num	8		Did patient receive any laxatives this calendar date?
2973	laxativesc_9	Char	3	$3.	Did patient receive any laxatives this calendar date?
2974	narcoticsx_9	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
2975	paralyticsx_9	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
2976	prokineticsx_9	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
2977	antiemeticsx_9	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
2978	antidiarrhealsx_9	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
2979	laxativesx_9	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
2980	narcotics_10	Num	8		Did patient receive any narcotics this calendar date?
2981	narcoticsc_10	Char	3	$3.	Did patient receive any narcotics this calendar date?
2982	paralytics_10	Num	8		Did patient receive any paralytics this calendar date?
2983	paralyticsc_10	Char	3	$3.	Did patient receive any paralytics this calendar date?
2984	prokinetics_10	Num	8		Did patient receive any prokinetics this calendar date?
2985	prokineticsc_10	Char	3	$3.	Did patient receive any prokinetics this calendar date?
2986	antiemetics_10	Num	8		Did patient receive any anti-emetics this calendar date?
2987	antiemeticsc_10	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
2988	antidiarrheals_10	Num	8		Did patient receive any anti-diarrheals this calendar date?
2989	antidiarrhealsc_10	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
2990	laxatives_10	Num	8		Did patient receive any laxatives this calendar date?
2991	laxativesc_10	Char	3	$3.	Did patient receive any laxatives this calendar date?
2992	narcoticsx_10	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
2993	paralyticsx_10	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
2994	prokineticsx_10	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
2995	antiemeticsx_10	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)

Num	Variable	Type	Len	Format	Label
2996	antidiarrhealsx_10	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
2997	laxativesx_10	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
2998	narcotics_11	Num	8		Did patient receive any narcotics this calendar date?
2999	narcoticsc_11	Char	3	$3.	Did patient receive any narcotics this calendar date?
3000	paralytics_11	Num	8		Did patient receive any paralytics this calendar date?
3001	paralyticsc_11	Char	3	$3.	Did patient receive any paralytics this calendar date?
3002	prokinetics_11	Num	8		Did patient receive any prokinetics this calendar date?
3003	prokineticsc_11	Char	3	$3.	Did patient receive any prokinetics this calendar date?
3004	antiemetics_11	Num	8		Did patient receive any anti-emetics this calendar date?
3005	antiemeticsc_11	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
3006	antidiarrheals_11	Num	8		Did patient receive any anti-diarrheals this calendar date?
3007	antidiarrhealsc_11	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
3008	laxatives_11	Num	8		Did patient receive any laxatives this calendar date?
3009	laxativesc_11	Char	3	$3.	Did patient receive any laxatives this calendar date?
3010	narcoticsx_11	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
3011	paralyticsx_11	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
3012	prokineticsx_11	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
3013	antiemeticsx_11	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
3014	antidiarrhealsx_11	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
3015	laxativesx_11	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
3016	narcotics_12	Num	8		Did patient receive any narcotics this calendar date?
3017	narcoticsc_12	Char	3	$3.	Did patient receive any narcotics this calendar date?
3018	paralytics_12	Num	8		Did patient receive any paralytics this calendar date?
3019	paralyticsc_12	Char	3	$3.	Did patient receive any paralytics this calendar date?
3020	prokinetics_12	Num	8		Did patient receive any prokinetics this calendar date?
3021	prokineticsc_12	Char	3	$3.	Did patient receive any prokinetics this calendar date?
3022	antiemetics_12	Num	8		Did patient receive any anti-emetics this calendar date?
3023	antiemeticsc_12	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
3024	antidiarrheals_12	Num	8		Did patient receive any anti-diarrheals this calendar date?
3025	antidiarrhealsc_12	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
3026	laxatives_12	Num	8		Did patient receive any laxatives this calendar date?
3027	laxativesc_12	Char	3	$3.	Did patient receive any laxatives this calendar date?
3028	narcoticsx_12	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
3029	paralyticsx_12	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)

Num	Variable	Type	Len	Format	Label
3030	prokineticsx_12	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
3031	antiemeticsx_12	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
3032	antidiarrhealsx_12	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
3033	laxativesx_12	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
3034	brussdt0	Num	8	BEST12.	Day 0 Date (Day)
3035	systbp0	Num	8		Day 0 Systolic BP
3036	pf0	Num	8		Day 0 PaO2/FiO2
3037	plate0	Num	8		Day 0 Platelets x1000
3038	creat0	Num	8		Day 0 Creatinine
3039	bili0	Num	8		Day 0 Bilirubin
3040	vaso0	Num	8		Day 0 Vasopressor
3041	vaso0c	Char	3	$3.	Day 0 Vasopressor
3042	brussdtX0	Char	64	$64.	Day 0 Date (Not Done)
3043	brussX0	Char	64	$64.	Day 0 Brussels (Not Done)
3044	brussdt1	Num	8	BEST12.	Day 1 Date (Day)
3045	systbp1	Num	8		Day 1 Systolic BP
3046	pf1	Num	8		Day 1 PaO2/FiO2
3047	plate1	Num	8		Day 1 Platelets x1000
3048	creat1	Num	8		Day 1 Creatinine
3049	bili1	Num	8		Day 1 Bilirubin
3050	vaso1	Num	8		Day 1 Vasopressor
3051	vaso1c	Char	3	$3.	Day 1 Vasopressor
3052	brussdtX1	Char	64	$64.	Day 1 Date (Not Done)
3053	brussX1	Char	64	$64.	Day 1 Brussels (Not Done)
3054	brussdt2	Num	8	BEST12.	Day 2 Date (Day)
3055	systbp2	Num	8		Day 2 Systolic BP
3056	pf2	Num	8		Day 2 PaO2/FiO2
3057	plate2	Num	8		Day 2 Platelets x1000
3058	creat2	Num	8		Day 2 Creatinine
3059	bili2	Num	8		Day 2 Bilirubin
3060	vaso2	Num	8		Day 2 Vasopressor
3061	vaso2c	Char	3	$3.	Day 2 Vasopressor
3062	brussdtX2	Char	64	$64.	Day 2 Date (Not Done)
3063	brussX2	Char	64	$64.	Day 2 Brussels (Not Done)
3064	brussdt3	Num	8	BEST12.	Day 3 Date (Day)
3065	systbp3	Num	8		Day 3 Systolic BP
3066	pf3	Num	8		Day 3 PaO2/FiO2

Num	Variable	Type	Len	Format	Label
3067	plate3	Num	8		Day 3 Platelets x1000
3068	creat3	Num	8		Day 3 Creatinine
3069	bili3	Num	8		Day 3 Bilirubin
3070	vaso3	Num	8		Day 3 Vasopressor
3071	vaso3c	Char	3	$3.	Day 3 Vasopressor
3072	brussdtX3	Char	64	$64.	Day 3 Date (Not Done)
3073	brussX3	Char	64	$64.	Day 3 Brussels (Not Done)
3074	brussdt4	Num	8	BEST12.	Day 4 Date (Day)
3075	systbp4	Num	8		Day 4 Systolic BP
3076	pf4	Num	8		Day 4 PaO2/FiO2
3077	plate4	Num	8		Day 4 Platelets x1000
3078	creat4	Num	8		Day 4 Creatinine
3079	bili4	Num	8		Day 4 Bilirubin
3080	vaso4	Num	8		Day 4 Vasopressor
3081	vaso4c	Char	3	$3.	Day 4 Vasopressor
3082	brussdtX4	Char	64	$64.	Day 4 Date (Not Done)
3083	brussX4	Char	64	$64.	Day 4 Brussels (Not Done)
3084	brussdt5	Num	8	BEST12.	Day 5 Date (Day)
3085	systbp5	Num	8		Day 5 Systolic BP
3086	pf5	Num	8		Day 5 PaO2/FiO2
3087	plate5	Num	8		Day 5 Platelets x1000
3088	creat5	Num	8		Day 5 Creatinine
3089	bili5	Num	8		Day 5 Bilirubin
3090	vaso5	Num	8		Day 5 Vasopressor
3091	vaso5c	Char	3	$3.	Day 5 Vasopressor
3092	brussdtX5	Char	64	$64.	Day 5 Date (Not Done)
3093	brussX5	Char	64	$64.	Day 5 Brussels (Not Done)
3094	brussdt6	Num	8	BEST12.	Day 6 Date (Day)
3095	systbp6	Num	8		Day 6 Systolic BP
3096	pf6	Num	8		Day 6 PaO2/FiO2
3097	plate6	Num	8		Day 6 Platelets x1000
3098	creat6	Num	8		Day 6 Creatinine
3099	bili6	Num	8		Day 6 Bilirubin
3100	vaso6	Num	8		Day 6 Vasopressor
3101	vaso6c	Char	3	$3.	Day 6 Vasopressor
3102	brussdtX6	Char	64	$64.	Day 6 Date (Not Done)
3103	brussX6	Char	64	$64.	Day 6 Brussels (Not Done)
3104	brussdt7	Num	8	BEST12.	Day 7 Date (Day)
3105	systbp7	Num	8		Day 7 Systolic BP

Num	Variable	Type	Len	Format	Label
3106	pf7	Num	8		Day 7 PaO2/FiO2
3107	plate7	Num	8		Day 7 Platelets x1000
3108	creat7	Num	8		Day 7 Creatinine
3109	bili7	Num	8		Day 7 Bilirubin
3110	vaso7	Num	8		Day 7 Vasopressor
3111	vaso7c	Char	3	$3.	Day 7 Vasopressor
3112	brussdtX7	Char	64	$64.	Day 7 Date (Not Done)
3113	brussX7	Char	64	$64.	Day 7 Brussels (Not Done)
3114	brussdt8	Num	8	BEST12.	Day 8 Date (Day)
3115	systbp8	Num	8		Day 8 Systolic BP
3116	pf8	Num	8		Day 8 PaO2/FiO2
3117	plate8	Num	8		Day 8 Platelets x1000
3118	creat8	Num	8		Day 8 Creatinine
3119	bili8	Num	8		Day 8 Bilirubin
3120	vaso8	Num	8		Day 8 Vasopressor
3121	vaso8c	Char	3	$3.	Day 8 Vasopressor
3122	brussdtX8	Char	64	$64.	Day 8 Date (Not Done)
3123	brussX8	Char	64	$64.	Day 8 Brussels (Not Done)
3124	brussdt9	Num	8	BEST12.	Day 9 Date (Day)
3125	systbp9	Num	8		Day 9 Systolic BP
3126	pf9	Num	8		Day 9 PaO2/FiO2
3127	plate9	Num	8		Day 9 Platelets x1000
3128	creat9	Num	8		Day 9 Creatinine
3129	bili9	Num	8		Day 9 Bilirubin
3130	vaso9	Num	8		Day 9 Vasopressor
3131	vaso9c	Char	3	$3.	Day 9 Vasopressor
3132	brussdtX9	Char	64	$64.	Day 9 Date (Not Done)
3133	brussX9	Char	64	$64.	Day 9 Brussels (Not Done)
3134	brussdt10	Num	8	BEST12.	Day 10 Date (Day)
3135	systbp10	Num	8		Day 10 Systolic BP
3136	pf10	Num	8		Day 10 PaO2/FiO2
3137	plate10	Num	8		Day 10 Platelets x1000
3138	creat10	Num	8		Day 10 Creatinine
3139	bili10	Num	8		Day 10 Bilirubin
3140	vaso10	Num	8		Day 10 Vasopressor
3141	vaso10c	Char	3	$3.	Day 10 Vasopressor
3142	brussdtX10	Char	64	$64.	Day 10 Date (Not Done)
3143	brussX10	Char	64	$64.	Day 10 Brussels (Not Done)
3144	brussdt11	Num	8	BEST12.	Day 11 Date (Day)

Num	Variable	Type	Len	Format	Label
3145	systbp11	Num	8		Day 11 Systolic BP
3146	pf11	Num	8		Day 11 PaO2/FiO2
3147	plate11	Num	8		Day 11 Platelets x1000
3148	creat11	Num	8		Day 11 Creatinine
3149	bili11	Num	8		Day 11 Bilirubin
3150	vaso11	Num	8		Day 11 Vasopressor
3151	brussdtX11	Char	64	$64.	Day 11 Date (Not Done)
3152	brussX11	Char	64	$64.	Day 11 Brussels (Not Done)
3153	vaso11c	Char	3	$3.	Day 11 Vasopressor
3154	brussdt12	Num	8	BEST12.	Day 12 Date (Day)
3155	systbp12	Num	8		Day 12 Systolic BP
3156	pf12	Num	8		Day 12 PaO2/FiO2
3157	plate12	Num	8		Day 12 Platelets x1000
3158	creat12	Num	8		Day 12 Creatinine
3159	bili12	Num	8		Day 12 Bilirubin
3160	vaso12	Num	8		Day 12 Vasopressor
3161	vaso12c	Char	3	$3.	Day 12 Vasopressor
3162	brussdtX12	Char	64	$64.	Day 12 Date (Not Done)
3163	brussX12	Char	64	$64.	Day 12 Brussels (Not Done)
3164	brussdt13	Num	8	BEST12.	Day 13 Date (Day)
3165	systbp13	Num	8		Day 13 Systolic BP
3166	pf13	Num	8		Day 13 PaO2/FiO2
3167	plate13	Num	8		Day 13 Platelets x1000
3168	creat13	Num	8		Day 13 Creatinine
3169	bili13	Num	8		Day 13 Bilirubin
3170	vaso13	Num	8		Day 13 Vasopressor
3171	vaso13c	Char	3	$3.	Day 13 Vasopressor
3172	brussdtX13	Char	64	$64.	Day 13 Date (Not Done)
3173	brussX13	Char	64	$64.	Day 13 Brussels (Not Done)
3174	brussdt14	Num	8	BEST12.	Day 14 Date (Day)
3175	systbp14	Num	8		Day 14 Systolic BP
3176	pf14	Num	8		Day 14 PaO2/FiO2
3177	plate14	Num	8		Day 14 Platelets x1000
3178	creat14	Num	8		Day 14 Creatinine
3179	bili14	Num	8		Day 14 Bilirubin
3180	vaso14	Num	8		Day 14 Vasopressor
3181	vaso14c	Char	3	$3.	Day 14 Vasopressor
3182	brussdtX14	Char	64	$64.	Day 14 Date (Not Done)
3183	brussX14	Char	64	$64.	Day 14 Brussels (Not Done)

Num	Variable	Type	Len	Format	Label
3184	brussdt15	Num	8	BEST12.	Day 15 Date (Day)
3185	systbp15	Num	8		Day 15 Systolic BP
3186	pf15	Num	8		Day 15 PaO2/FiO2
3187	plate15	Num	8		Day 15 Platelets x1000
3188	creat15	Num	8		Day 15 Creatinine
3189	bili15	Num	8		Day 15 Bilirubin
3190	vaso15	Num	8		Day 15 Vasopressor
3191	vaso15c	Char	3	$3.	Day 15 Vasopressor
3192	brussdtX15	Char	64	$64.	Day 15 Date (Not Done)
3193	brussX15	Char	64	$64.	Day 15 Brussels (Not Done)
3194	brussdt16	Num	8	BEST12.	Day 16 Date (Day)
3195	systbp16	Num	8		Day 16 Systolic BP
3196	pf16	Num	8		Day 16 PaO2/FiO2
3197	plate16	Num	8		Day 16 Platelets x1000
3198	creat16	Num	8		Day 16 Creatinine
3199	bili16	Num	8		Day 16 Bilirubin
3200	vaso16	Num	8		Day 16 Vasopressor
3201	vaso16c	Char	3	$3.	Day 16 Vasopressor
3202	brussdtX16	Char	64	$64.	Day 16 Date (Not Done)
3203	brussX16	Char	64	$64.	Day 16 Brussels (Not Done)
3204	brussdt17	Num	8	BEST12.	Day 17 Date (Day)
3205	systbp17	Num	8		Day 17 Systolic BP
3206	pf17	Num	8		Day 17 PaO2/FiO2
3207	plate17	Num	8		Day 17 Platelets x1000
3208	creat17	Num	8		Day 17 Creatinine
3209	bili17	Num	8		Day 17 Bilirubin
3210	vaso17	Num	8		Day 17 Vasopressor
3211	vaso17c	Char	3	$3.	Day 17 Vasopressor
3212	brussdtX17	Char	64	$64.	Day 17 Date (Not Done)
3213	brussX17	Char	64	$64.	Day 17 Brussels (Not Done)
3214	brussdt18	Num	8	BEST12.	Day 18 Date (Day)
3215	systbp18	Num	8		Day 18 Systolic BP
3216	pf18	Num	8		Day 18 PaO2/FiO2
3217	plate18	Num	8		Day 18 Platelets x1000
3218	creat18	Num	8		Day 18 Creatinine
3219	bili18	Num	8		Day 18 Bilirubin
3220	vaso18	Num	8		Day 18 Vasopressor
3221	vaso18c	Char	3	$3.	Day 18 Vasopressor
3222	brussdtX18	Char	64	$64.	Day 18 Date (Not Done)

Num	Variable	Type	Len	Format	Label
3223	brussX18	Char	64	$64.	Day 18 Brussels (Not Done)
3224	brussdt19	Num	8	BEST12.	Day 19 Date (Day)
3225	systbp19	Num	8		Day 19 Systolic BP
3226	pf19	Num	8		Day 19 PaO2/FiO2
3227	plate19	Num	8		Day 19 Platelets x1000
3228	creat19	Num	8		Day 19 Creatinine
3229	bili19	Num	8		Day 19 Bilirubin
3230	vaso19	Num	8		Day 19 Vasopressor
3231	vaso19c	Char	3	$3.	Day 19 Vasopressor
3232	brussdtX19	Char	64	$64.	Day 19 Date (Not Done)
3233	brussX19	Char	64	$64.	Day 19 Brussels (Not Done)
3234	brussdt20	Num	8	BEST12.	Day 20 Date (Day)
3235	systbp20	Num	8		Day 20 Systolic BP
3236	pf20	Num	8		Day 20 PaO2/FiO2
3237	plate20	Num	8		Day 20 Platelets x1000
3238	creat20	Num	8		Day 20 Creatinine
3239	bili20	Num	8		Day 20 Bilirubin
3240	vaso20	Num	8		Day 20 Vasopressor
3241	vaso20c	Char	3	$3.	Day 20 Vasopressor
3242	brussdtX20	Char	64	$64.	Day 20 Date (Not Done)
3243	brussX20	Char	64	$64.	Day 20 Brussels (Not Done)
3244	brussdt21	Num	8	BEST12.	Day 21 Date (Day)
3245	systbp21	Num	8		Day 21 Systolic BP
3246	pf21	Num	8		Day 21 PaO2/FiO2
3247	plate21	Num	8		Day 21 Platelets x1000
3248	creat21	Num	8		Day 21 Creatinine
3249	bili21	Num	8		Day 21 Bilirubin
3250	vaso21	Num	8		Day 21 Vasopressor
3251	vaso21c	Char	3	$3.	Day 21 Vasopressor
3252	brussdtX21	Char	64	$64.	Day 21 Date (Not Done)
3253	brussX21	Char	64	$64.	Day 21 Brussels (Not Done)
3254	brussdt22	Num	8	BEST12.	Day 22 Date (Day)
3255	systbp22	Num	8		Day 22 Systolic BP
3256	pf22	Num	8		Day 22 PaO2/FiO2
3257	plate22	Num	8		Day 22 Platelets x1000
3258	creat22	Num	8		Day 22 Creatinine
3259	bili22	Num	8		Day 22 Bilirubin
3260	vaso22	Num	8		Day 22 Vasopressor
3261	vaso22c	Char	3	$3.	Day 22 Vasopressor

Num	Variable	Type	Len	Format	Label
3262	brussdtX22	Char	64	$64.	Day 22 Date (Not Done)
3263	brussX22	Char	64	$64.	Day 22 Brussels (Not Done)
3264	brussdt23	Num	8	BEST12.	Day 23 Date (Day)
3265	systbp23	Num	8		Day 23 Systolic BP
3266	pf23	Num	8		Day 23 PaO2/FiO2
3267	plate23	Num	8		Day 23 Platelets x1000
3268	creat23	Num	8		Day 23 Creatinine
3269	bili23	Num	8		Day 23 Bilirubin
3270	vaso23	Num	8		Day 23 Vasopressor
3271	vaso23c	Char	3	$3.	Day 23 Vasopressor
3272	brussdtX23	Char	64	$64.	Day 23 Date (Not Done)
3273	brussX23	Char	64	$64.	Day 23 Brussels (Not Done)
3274	brussdt24	Num	8	BEST12.	Day 24 Date (Day)
3275	systbp24	Num	8		Day 24 Systolic BP
3276	pf24	Num	8		Day 24 PaO2/FiO2
3277	plate24	Num	8		Day 24 Platelets x1000
3278	creat24	Num	8		Day 24 Creatinine
3279	bili24	Num	8		Day 24 Bilirubin
3280	vaso24	Num	8		Day 24 Vasopressor
3281	vaso24c	Char	3	$3.	Day 24 Vasopressor
3282	brussdtX24	Char	64	$64.	Day 24 Date (Not Done)
3283	brussX24	Char	64	$64.	Day 24 Brussels (Not Done)
3284	brussdt25	Num	8	BEST12.	Day 25 Date (Day)
3285	systbp25	Num	8		Day 25 Systolic BP
3286	pf25	Num	8		Day 25 PaO2/FiO2
3287	plate25	Num	8		Day 25 Platelets x1000
3288	creat25	Num	8		Day 25 Creatinine
3289	bili25	Num	8		Day 25 Bilirubin
3290	vaso25	Num	8		Day 25 Vasopressor
3291	vaso25c	Char	3	$3.	Day 25 Vasopressor
3292	brussdtX25	Char	64	$64.	Day 25 Date (Not Done)
3293	brussX25	Char	64	$64.	Day 25 Brussels (Not Done)
3294	brussdt26	Num	8	BEST12.	Day 26 Date (Day)
3295	systbp26	Num	8		Day 26 Systolic BP
3296	pf26	Num	8		Day 26 PaO2/FiO2
3297	plate26	Num	8		Day 26 Platelets x1000
3298	creat26	Num	8		Day 26 Creatinine
3299	bili26	Num	8		Day 26 Bilirubin
3300	vaso26	Num	8		Day 26 Vasopressor

Num	Variable	Type	Len	Format	Label
3301	vaso26c	Char	3	$3.	Day 26 Vasopressor
3302	brussdtX26	Char	64	$64.	Day 26 Date (Not Done)
3303	brussX26	Char	64	$64.	Day 26 Brussels (Not Done)
3304	brussdt27	Num	8	BEST12.	Day 27 Date (Day)
3305	systbp27	Num	8		Day 27 Systolic BP
3306	pf27	Num	8		Day 27 PaO2/FiO2
3307	plate27	Num	8		Day 27 Platelets x1000
3308	creat27	Num	8		Day 27 Creatinine
3309	bili27	Num	8		Day 27 Bilirubin
3310	vaso27	Num	8		Day 27 Vasopressor
3311	vaso27c	Char	3	$3.	Day 27 Vasopressor
3312	brussdtX27	Char	64	$64.	Day 27 Date (Not Done)
3313	brussX27	Char	64	$64.	Day 27 Brussels (Not Done)
3314	brussdt28	Num	8	BEST12.	Day 28 Date (Day)
3315	systbp28	Num	8		Day 28 Systolic BP
3316	pf28	Num	8		Day 28 PaO2/FiO2
3317	plate28	Num	8		Day 28 Platelets x1000
3318	creat28	Num	8		Day 28 Creatinine
3319	bili28	Num	8		Day 28 Bilirubin
3320	vaso28	Num	8		Day 28 Vasopressor
3321	vaso28c	Char	3	$3.	Day 28 Vasopressor
3322	brussdtX28	Char	64	$64.	Day 28 Date (Not Done)
3323	brussX28	Char	64	$64.	Day 28 Brussels (Not Done)
3324	bal0	Num	8		Mini-BAL completed?
3325	bal0c	Char	20	$20.	Mini-BAL completed?
3326	baldt0	Num	8	BEST12.	Date Mini-BAL completed (Day)
3327	balnotreas0	Char	255	$255.	Reason Mini-BAL not completed
3328	balvolin0	Num	8		Volume instilled
3329	balvolout0	Num	8		Volume returned
3330	balinr0	Num	8		INR value obtained within the 36 hours prior to BAL?
3331	balinr0c	Char	24	$24.	INR value obtained within the 36 hours prior to BAL?
3332	balinrle2_0	Num	8		Was INR value <= 2.0?
3333	balinrle2_0c	Char	23	$23.	Was INR value <= 2.0?
3334	balplate0	Num	8		Platelet value obtained in the 36 hours prior to BAL?
3335	balplate0c	Char	53	$53.	Platelet value obtained in the 36 hours prior to BAL?
3336	balplatege5_0	Num	8		Was platelet value >= 50*10^3/mm^3?
3337	balplatege5_0c	Char	23	$23.	Was platelet value >= 50*10^3/mm^3?
3338	bal3	Num	8		Mini-BAL completed?
3339	bal3c	Char	20	$20.	Mini-BAL completed?

Num	Variable	Type	Len	Format	Label
3340	baldt3	Num	8	BEST12.	Date Mini-BAL completed (Day)
3341	balnotreas3	Char	255	$255.	Reason Mini-BAL not completed
3342	balvolin3	Num	8		Volume instilled
3343	balvolout3	Num	8		Volume returned
3344	balinr3	Num	8		INR value obtained within the 36 hours prior to BAL?
3345	balinr3c	Char	24	$24.	INR value obtained within the 36 hours prior to BAL?
3346	balinrle2_3	Num	8		Was INR value <= 2.0?
3347	balinrle2_3c	Char	23	$23.	Was INR value <= 2.0?
3348	balplate3	Num	8		Platelet value obtained in the 36 hours prior to BAL?
3349	balplate3c	Char	53	$53.	Platelet value obtained in the 36 hours prior to BAL?
3350	balplatege5_3	Num	8		Was platelet value >= $50*10^3/mm^3$?
3351	balplatege5_3c	Char	23	$23.	Was platelet value >= $50*10^3/mm^3$?
3352	status	Num	8		Patient status (through Day 90):
3353	statusc	Char	69	$69.	Patient status (through Day 90):
3354	homedt	Num	8	BEST12.	Home with UAB, date: (Day)
3355	deathdt	Num	8	BEST12.	Dead prior to home with UAB, date: (Day)
3356	othstatdt	Num	8	BEST12.	Other, date of last known patient status: (Day)
3357	altapt	Num	8		ALTA patient?
3358	altaptc	Char	12	$12.	ALTA patient?
3359	altawdraw	Num	8		Was this patient permanently withdrawn from ALTA (through Day 28)?
3360	altawdrawc	Char	13	$13.	Was this patient permanently withdrawn from ALTA (through Day 28)?
3361	altawdrawdt	Num	8	BEST12.	Patient withdrawn from ALTA: Date (Day)
3362	altawdrawreas	Char	255	$255.	Patient withdrawn from ALTA: Reason
3363	eopt	Num	8		EDEN/Omega Patient?
3364	eoptc	Char	18	$18.	EDEN/Omega Patient?
3365	eowdraw	Num	8		Was this patient permanently withdrawn from EDEN/Omega (through Day 28)?
3366	eowdrawc	Char	13	$13.	Was this patient permanently withdrawn from EDEN/Omega (through Day 28)?
3367	eowdrawdt	Num	8	BEST12.	Patient withdrawn from EDEN/Omega: Date (Day)
3368	eowdrawreas	Char	255	$255.	Patient withdrawn from EDEN/Omega: Reason
3369	eoenroll	Num	8		If the patient was enrolled in EDEN/OMEGA study or Co-Enrolled
3370	eoenrollc	Char	25	$25.	If the patient was enrolled in EDEN/OMEGA study or Co-Enrolled
3371	eofullcal	Num	8		Did patient reach full-calorie enteral feeding rate?
3372	eofullcalc	Char	51	$51.	Did patient reach full-calorie enteral feeding rate?
3373	eofullcaldt	Num	8	BEST12.	Patient reach full-calorie enteral feeding rate: Date (Day)
3374	eofullcaltm	Num	8	TIME5.	Patient reach full-calorie enteral feeding rate: Date (Time)

Num	Variable	Type	Len	Format	Label
3375	hospdc	Num	8		Was patient discharged alive from study hospital (through Day 90)?
3376	hospdcc	Char	10	$10.	Was patient discharged alive from study hospital (through Day 90)?
3377	hospdcdt	Num	8	BEST12.	If yes, give date: (Day)
3378	sbtcrit	Num	8		Did patient meet criteria for spontaneous breathing trial (SBT) before day 29?
3379	sbtcritc	Char	10	$10.	Did patient meet criteria for spontaneous breathing trial (SBT) before day 29?
3380	sbtcritdt	Num	8	BEST12.	If yes, enter date FIRST met criteria (Day)
3381	sbttol	Num	8		Did patient tolerate SBT?
3382	sbttolc	Char	10	$10.	Did patient tolerate SBT?
3383	sbttoldt	Num	8	BEST12.	Patient tolerated SBT, date & time (Day)
3384	uab	Num	8		Did patient reach 48 hour UAB before day 29?
3385	uabc	Char	10	$10.	Did patient reach 48 hour UAB before day 29?
3386	uabdt	Num	8	BEST12.	Patient reached 48 hour UAB before day 29: Date (Day)
3387	extub	Num	8		Was patient extubated before day 29?
3388	extubc	Char	10	$10.	Was patient extubated before day 29?
3389	extubdt	Num	8	BEST12.	Patient extubated before day 29: Date (Day)
3390	trach	Num	8		Did Subject undergo tracheostomy prior to day 29?
3391	trachc	Char	10	$10.	Did Subject undergo tracheostomy prior to day 29?
3392	trachdt	Num	8	BEST12.	Subject underwent tracheostomy prior to day 29: Date (Day)
3393	discharge1	Num	8		Discharged from ICU?
3394	discharge1c	Char	20	$20.	Discharged from ICU?
3395	dischargedt1	Num	8	BEST12.	If yes, date of ICU DC: (Day)
3396	readmit1	Num	8		Readmitted to ICU?
3397	readmit1c	Char	29	$29.	Readmitted to ICU?
3398	readmitdt1	Num	8	BEST12.	If yes, date of ICU readmission: (Day)
3399	discharge2	Num	8		Discharged from ICU?
3400	discharge2c	Char	20	$20.	Discharged from ICU?
3401	dischargedt2	Num	8	BEST12.	If yes, date of ICU DC: (Day)
3402	readmit2	Num	8		Readmitted to ICU?
3403	readmit2c	Char	29	$29.	Readmitted to ICU?
3404	readmitdt2	Num	8	BEST12.	If yes, date of ICU readmission: (Day)
3405	discharge3	Num	8		Discharged from ICU?
3406	discharge3c	Char	20	$20.	Discharged from ICU?
3407	dischargedt3	Num	8	BEST12.	If yes, date of ICU DC: (Day)
3408	readmit3	Num	8		Readmitted to ICU?
3409	readmit3c	Char	29	$29.	Readmitted to ICU?
3410	readmitdt3	Num	8	BEST12.	If yes, date of ICU readmission: (Day)

Num	Variable	Type	Len	Format	Label
3411	discharge4	Num	8		Discharged from ICU?
3412	discharge4c	Char	20	$20.	Discharged from ICU?
3413	dischargedt4	Num	8	BEST12.	If yes, date of ICU DC: (Day)
3414	readmit4	Num	8		Readmitted to ICU?
3415	readmit4c	Char	29	$29.	Readmitted to ICU?
3416	readmitdt4	Num	8	BEST12.	If yes, date of ICU readmission: (Day)
3417	discharge5	Num	8		Discharged from ICU?
3418	discharge5c	Char	20	$20.	Discharged from ICU?
3419	dischargedt5	Num	8	BEST12.	If yes, date of ICU DC: (Day)
3420	uab1	Num	8		Patient achieved unassisted breathing:
3421	uab1c	Char	69	$69.	Patient achieved unassisted breathing:
3422	uabdt1	Num	8	BEST12.	If yes, date of UAB (first date with no AB): (Day)
3423	retab1	Num	8		Patient returned to assisted breathing?
3424	retab1c	Char	26	$26.	Patient returned to assisted breathing?
3425	retabdt1	Num	8	BEST12.	If yes, date of return to AB: (Day)
3426	uab2	Num	8		Patient achieved unassisted breathing again:
3427	uab2c	Char	61	$61.	Patient achieved unassisted breathing again:
3428	uabdt2	Num	8	BEST12.	If yes, date of UAB (2nd date with no AB): (Day)
3429	retab2	Num	8		Patient returned to assisted breathing?
3430	retab2c	Char	26	$26.	Patient returned to assisted breathing?
3431	retabdt2	Num	8	BEST12.	If yes, date of return to AB: (Day)
3432	uab3	Num	8		Patient achieved unassisted breathing again:
3433	uab3c	Char	61	$61.	Patient achieved unassisted breathing again:
3434	uabdt3	Num	8	BEST12.	If yes, date of UAB (3rd date with no AB): (Day)
3435	retab3	Num	8		Patient returned to assisted breathing?
3436	retab3c	Char	26	$26.	Patient returned to assisted breathing?
3437	retabdt3	Num	8	BEST12.	If yes, date of return to AB: (Day)
3438	uab4	Num	8		Patient achieved unassisted breathing again:
3439	uab4c	Char	61	$61.	Patient achieved unassisted breathing again:
3440	uabdt4	Num	8	BEST12.	If yes, date of UAB (4th date with no AB): (Day)
3441	dnr	Num	8		End of Life Decision-making (for all patients, alive or dead)
3442	dnrc	Char	59	$59.	End of Life Decision-making (for all patients, alive or dead)
3443	wconsent	Num	8		Was written consent obtained from subject during study hospitalization?
3444	wconsentc	Char	11	$11.	Was written consent obtained from subject during study hospitalization?
3445	wconsentreas	Num	8		Written consent not obtained: Reason
3446	wconsentreasc	Char	47	$47.	Written consent not obtained: Reason
3447	wconsentreasoth	Char	255	$255.	Written consent not obtained: Reason = Other

Num	Variable	Type	Len	Format	Label
3448	dialysis	Num	8		Did patient require dialysis during study hospitalization?
3449	dialysisc	Char	3	$3.	Did patient require dialysis during study hospitalization?
3450	dialfirstdt	Num	8	BEST12.	Date of first dialysis: (Day)
3451	diallastdt	Num	8	BEST12.	Date of last dialysis during study hospitalization (Day)
3452	tpn	Num	8		Did the subject receive TPN during the EDEN Omega Study?
3453	tpnc	Char	3	$3.	Did the subject receive TPN during the EDEN Omega Study?
3454	statusx	Char	64	$64.	Patient Status (Not done)
3455	withdrawnX	Char	64	$64.	Patient Withdrawn (Not done)
3456	eoenrollX	Char	64	$64.	Did patient reach full-calorie enteral feeding rate? (Not Done)
3457	sbtcritx	Char	64	$64.	Did patient meet criteria for spontaneous breathing trial? (Not Done)
3458	sbttolx	Char	64	$64.	Patient tolerated SBT (Not Done)
3459	uabx	Char	64	$64.	Did patient reach 48 hour UAB before day 29? (Not Done)
3460	extubX	Char	64	$64.	Patient extubated before day 29 (Not Done)
3461	trachX	Char	64	$64.	Was patient extubated before day 29? (Not Done)
3462	arrhyth	Num	8		Arrhythmias requiring treatment while on study drug?
3463	arrhythc	Char	3	$3.	Arrhythmias requiring treatment while on study drug?
3464	bowel	Num	8		Clinical evidence of bowel ischemia while on study drug?
3465	bowelc	Char	3	$3.	Clinical evidence of bowel ischemia while on study drug?
3466	mi	Num	8		Clinical evidence of MI while on study drug?
3467	mic	Char	3	$3.	Clinical evidence of MI while on study drug?
3468	myo	Num	8		Evidence in the medical record of myopathy?
3469	myoc	Char	3	$3.	Evidence in the medical record of myopathy?
3470	stroke	Num	8		Clinical evidence of ischemic stroke while on study drug?
3471	strokec	Char	3	$3.	Clinical evidence of ischemic stroke while on study drug?
3472	vte	Num	8		Clinical evidence of VTE while on study drug?
3473	vtec	Char	3	$3.	Clinical evidence of VTE while on study drug?
3474	highcreatdt	Num	8	BEST12.	Date of the highest creatinine from day 15 through day 28 (Day)
3475	highcreat	Char	255	$255.	value of the highest creatinine from day 15 through day 28
3476	cytocolldt0	Num	8	BEST12.	Day 0 Cytokine and coagulation parameters sample collected (Plasma) Date (Day)
3477	cytofrozdt0	Num	8	BEST12.	Day 0 Cytokine and coagulation parameters sample frozen (Plasma) Date (Day)
3478	cytoprocdt0	Num	8	BEST12.	Day 0 Cytokine and coagulation parameters sample processing initiated (Plasma) Date (Day)
3479	urinecolldt0	Num	8	BEST12.	Day 0 Urine sample Collected Date? (Day)
3480	urinefrozdt0	Num	8	BEST12.	Day 0 Urine sample Frozen Date? (Day)
3481	unrineprocdt0	Num	8	BEST12.	Day 0 Urine sample Processing Initiated Date? (Day)
3482	cyto0	Num	8		Day 0 Cytokine and coagulation parameters sample collected (Plasma)?

Num	Variable	Type	Len	Format	Label
3483	cyto0c	Char	11	$11.	Day 0 Cytokine and coagulation parameters sample collected (Plasma)?
3484	cytoreas0	Char	255	$255.	Day 0 Cytokine not collected: Reason
3485	fattyacid0	Num	8		Day 0 Plasma fatty acids sample collected (Plasma)?
3486	fattyacid0c	Char	26	$26.	Day 0 Plasma fatty acids sample collected (Plasma)?
3487	fattyacidreas0	Char	255	$255.	Day 0 Plasma fatty acids not collected: Reason
3488	epi0	Num	8		Day 0 Plasma epinephrine level sample collected (Plasma)?
3489	epi0c	Char	20	$20.	Day 0 Plasma epinephrine level sample collected (Plasma)?
3490	epireas0	Char	255	$255.	Day 0 Plasma epinephrine not collected: Reason
3491	urine0	Num	8		Day 0 Urine sample collected?
3492	urine0c	Char	11	$11.	Day 0 Urine sample collected?
3493	urinereas0	Char	255	$255.	Day 0 Urine not collected: Reason
3494	bloodcolldt0	Num	8	BEST12.	Day 0 Whole blood sample collected (Genetics) Date (Day)
3495	bloodfrozendt0	Num	8	BEST12.	Day 0 Whole blood sample collected (Genetics) frozen Date (Day)
3496	blood0	Num	8		Day 0 Whole blood sample collected (Genetics)?
3497	blood0c	Char	20	$20.	Day 0 Whole blood sample collected (Genetics)?
3498	bloodreas0	Char	255	$255.	Day 0 Whole blood sample not collected: Reason
3499	colldt1	Num	8	BEST12.	Date Day 1 Specimens Collected (Day)
3500	alb1	Num	8		Day 1 Plasma Albuterol level sample collected (Plasma)?
3501	alb1c	Char	20	$20.	Day 1 Plasma Albuterol level sample collected (Plasma)?
3502	albreas1	Char	255	$255.	Day 1 Plasma Albuterol level sample not collected: Reason
3503	epi1	Num	8		Day 1 Plasma epinephrine level sample collected (Plasma)?
3504	epi1c	Char	20	$20.	Day 1 Plasma epinephrine level sample collected (Plasma)?
3505	epireas1	Char	255	$255.	Day 1 Plasma epinephrine level sample not collected: Reason
3506	cytocolldt3	Num	8	BEST12.	Day 3 Cytokine and coagulation parameters sample collected (Plasma) Date (Day)
3507	cytofrozdt3	Num	8	BEST12.	Day 3 Cytokine and coagulation parameters sample frozen (Plasma) Date (Day)
3508	cytoprocdt3	Num	8	BEST12.	Day 3 Cytokine and coagulation parameters sample processing initiated (Plasma) Date (Day)
3509	cyto3	Num	8		Day 3 Cytokine and coagulation parameters sample collected (Plasma)?
3510	cyto3c	Char	20	$20.	Day 3 Cytokine and coagulation parameters sample collected (Plasma)?
3511	cytoreas3n	Char	255	$255.	Day 3 Cytokine not collected: Reason
3512	fattyacid3	Num	8		Day 3 Plasma fatty acids sample collected (Plasma)?
3513	fattyacid3c	Char	26	$26.	Day 3 Plasma fatty acids sample collected (Plasma)?
3514	fattyaciddt3	Num	8	BEST12.	Day 3 Plasma fatty acids: Date (Day)
3515	fattyacidreas3	Char	255	$255.	Day 3 Plasma fatty acids not collected: Reason
3516	unrinecolldt3	Num	8	BEST12.	Day 3 Urine sample Collected Date (Day)

Num	Variable	Type	Len	Format	Label
3517	urinefrozdt3	Num	8	BEST12.	Day 3 Urine sample Frozen Date? (Day)
3518	urineprocdt3	Num	8	BEST12.	Day 3 Urine sample Processing Initiated Date (Day)
3519	urine3	Num	8		Day 3 Urine sample collected?
3520	urine3c	Char	20	$20.	Day 3 Urine sample collected?
3521	urinereas3	Char	255	$255.	Day 3 Urine sample not collected: Reason
3522	cytocolldt6	Num	8	BEST12.	Day 6 Cytokine and coagulation parameters sample collected (Plasma) Date (Day)
3523	cytofrozdt6	Num	8	BEST12.	Day 6 Cytokine and coagulation parameters sample frozen (Plasma) Date (Day)
3524	cytoprocdt6	Num	8	BEST12.	Day 6 Cytokine and coagulation parameters sample processing initiated (Plasma) Date (Day)
3525	cyto6	Num	8		Day 6 Cytokine and coagulation parameters sample collected (Plasma)?
3526	cyto6c	Char	20	$20.	Day 6 Cytokine and coagulation parameters sample collected (Plasma)?
3527	cytoreas6	Char	255	$255.	Day 6 Cytokine not collected: Reason
3528	fattyacid6	Num	8		Day 6 Plasma fatty acids sample collected (Plasma)?
3529	fattyacid6c	Char	26	$26.	Day 6 Plasma fatty acids sample collected (Plasma)?
3530	fattyaciddt6	Num	8	BEST12.	Day 6 Plasma fatty acids: Date (Day)
3531	fattyacidreas6	Char	255	$255.	Day 6 Plasma fatty acids not collected: Reason
3532	urinecolldt6	Num	8	BEST12.	Day 6 Urine sample Collected Date (Day)
3533	urinefrozdt6	Num	8	BEST12.	Day 6 Urine sample Frozen Date (Day)
3534	urineprocdt6	Num	8	BEST12.	Day 6 Urine sample Processing Initiated Date (Day)
3535	urine6	Num	8		Day 6 Urine sample collected?
3536	urine6c	Char	20	$20.	Day 6 Urine sample collected?
3537	urinereas6	Char	255	$255.	Day 6 Urine sample not collected: Reason
3538	cytocolldt12	Num	8	BEST12.	Day 12 Cytokine and coagulation parameters sample collected (Plasma) Date (Day)
3539	cytoprocdt12	Num	8	BEST12.	Day 12 Cytokine and coagulation parameters sample processing initiated (Plasma) Date (Day)
3540	cytofrozdt12	Num	8	BEST12.	Day 12 Cytokine and coagulation parameters sample frozen (Plasma) Date (Day)
3541	cyto12	Num	8		Day 12 Cytokine and coagulation parameters sample collected (Plasma)?
3542	cyto12c	Char	20	$20.	Day 12 Cytokine and coagulation parameters sample collected (Plasma)?
3543	cytoreas12	Char	255	$255.	Day 12 Cytokine not collected: Reason
3544	fattyacid12	Num	8		Day 12 Plasma fatty acids sample collected (Plasma)?
3545	fattyacid12c	Char	26	$26.	Day 12 Plasma fatty acids sample collected (Plasma)?
3546	fattyaciddt12	Num	8	BEST12.	Day 12 Plasma fatty acids: Date (Day)
3547	fattyacidreas12	Char	255	$255.	Day 12 Plasma fatty acids not collected: Reason
3548	peakdt6	Num	8	BEST12.	Day 6 Peak level collected Date (Day)

Num	Variable	Type	Len	Format	Label
3549	ptshipdt6	Num	8	BEST12.	Day 6 P&T samples shipped to Assay Lab Date (Day)
3550	troughdt6	Num	8	BEST12.	Day 6 Trough level collected Date (Day)
3551	bloodstor0	Num	8		Day 0 Storage Temperature at -70 C or lower (+/- 10 degrees)?
3552	bloodstor0c	Char	11	$11.	Day 0 Storage Temperature at -70 C or lower (+/- 10 degrees)?
3553	bloodstorreas0	Char	255	$255.	Day 0 Storage Temperature at -70 C or lower : no reason
3554	bloodtube0	Num	8		Day 0 Tube Type:
3555	bloodtube0c	Char	13	$13.	Day 0 Tube Type:
3556	bloodtubeoth0	Char	255	$255.	Day 0 Tube Type Other:
3557	peakcollreas6	Char	255	$255.	Day 6 Peak level not collected reason?
3558	ptship6	Num	8		Day 6 P&T samples shipped to Assay Lab?
3559	ptship6c	Char	18	$18.	Day 6 P&T samples shipped to Assay Lab?
3560	ptshipreas6	Char	255	$255.	Day 6 P&T samples not shipped to Assay Lab Reason?
3561	colldt0x	Char	64	$64.	Day 0 Date (Not Done)
3562	cyto0x	Char	64	$64.	Day 0 Cytokine and coagulation parameters sample collected (Plasma) (Not Done)?
3563	fattyacid0x	Char	64	$64.	Day 0 Plasma fatty acids sample collected (Plasma)? (Not Done)
3564	urine0x	Char	64	$64.	Day 0 Urine sample collected? (Not Done)
3565	blood0x	Char	64	$64.	Day 0 Whole blood sample collected (Genetics)? (Not Done)
3566	cytocoll0x	Char	64	$64.	Day 0 Cytokine and coagulation parameters sample collected (Plasma) (Not Done)
3567	urinecoll0x	Char	64	$64.	Day 0 Urine sample Collected (Not Done)
3568	ND_SPEC_COLL_DAY0_BLOOD	Char	64	$64.	ND_SPEC_COLL_DAY0_BLOOD
3569	cyto3x	Char	64	$64.	Day 3 Cytokine and coagulation parameters sample processing initiated (Plasma) (Not Done)
3570	urine3x	Char	64	$64.	Day 3 Urine sample collected? (Not Done)
3571	cyto6x	Char	64	$64.	Day 6 Cytokine and coagulation parameters sample collected (Plasma) (Not Done)
3572	urine6x	Char	64	$64.	Day 6 Urine sample Collected (Not Done)
3573	cyto12x	Char	64	$64.	Day 12 Cytokine and coagulation parameters sample collected (Plasma) (Not Done)
3574	shock	Num	8		
3575	cumfl_0	Num	8		
3576	cumfl_1	Num	8		
3577	cumfl_2	Num	8		
3578	cumfl_3	Num	8		
3579	cumfl_4	Num	8		
3580	cumfl_5	Num	8		
3581	cumfl_6	Num	8		
3582	cumfl_7	Num	8		
3583	cumfl_8	Num	8		

Num	Variable	Type	Len	Format	Label
3584	flbal_0	Num	8		
3585	flbal_1	Num	8		
3586	flbal_2	Num	8		
3587	flbal_3	Num	8		
3588	flbal_4	Num	8		
3589	flbal_5	Num	8		
3590	flbal_6	Num	8		
3591	flbal_7	Num	8		
3592	flbal_8	Num	8		
3593	hasdata0	Num	8		
3594	hasdata1	Num	8		
3595	hasdata2	Num	8		
3596	hasdata3	Num	8		
3597	hasdata4	Num	8		
3598	hasdata5	Num	8		
3599	hasdata6	Num	8		
3600	hasdata7	Num	8		
3601	hasdata8	Num	8		
3602	hasdata9	Num	8		
3603	hasdata10	Num	8		
3604	hasdata11	Num	8		
3605	hasdata12	Num	8		
3606	hasdata13	Num	8		
3607	hasdata14	Num	8		
3608	hasdata15	Num	8		
3609	hasdata16	Num	8		
3610	hasdata17	Num	8		
3611	hasdata18	Num	8		
3612	hasdata19	Num	8		
3613	hasdata20	Num	8		
3614	hasdata21	Num	8		
3615	hasdata22	Num	8		
3616	hasdata23	Num	8		
3617	hasdata24	Num	8		
3618	hasdata25	Num	8		
3619	hasdata26	Num	8		
3620	hasdata27	Num	8		
3621	hasdata28	Num	8		
3622	max_brussels_day	Num	8		

Num	Variable	Type	Len	Format	Label
3623	fustatus	Num	8		Follow up status
3624	days2dth	Num	8		Days from randomization to death or last follow-up to day 90
3625	death60	Num	8		Death during 60-day follow-up
3626	pli	Char	25		Primary Lung Injury
3627	race_dsmb	Char	10		
3628	bal03	Num	8		
3629	minpotas	Num	8		
3630	minmg	Num	8		
3631	minphos	Num	8		
3632	hypok25	Num	8		Hypokalemia: Potassium<=2.5
3633	hypok30	Num	8		Hypokalemia: Potassium<=3.0
3634	hypoMg	Num	8		Hypomagnesemia: Magnesium<=1.5
3635	hypophos	Num	8		Hypophosphatemia: Phosphorus<=2.3
3636	deltacvp_1	Num	8		
3637	deltacvp_2	Num	8		
3638	deltacvp_3	Num	8		
3639	deltacvp_4	Num	8		
3640	deltacvp_5	Num	8		
3641	deltacvp_6	Num	8		
3642	deltacvp_7	Num	8		
3643	tidalvol_0	Num	8		
3644	tidalvol_1	Num	8		
3645	tidalvol_2	Num	8		
3646	tidalvol_3	Num	8		
3647	tidalvol_4	Num	8		
3648	tidalvol_7	Num	8		
3649	tidalvol_12	Num	8		
3650	tidalvol_21	Num	8		
3651	tidalvol_28	Num	8		
3652	proprateNZ	Num	8		
3653	totalvol_0	Num	8		
3654	totalvol_1	Num	8		
3655	totalvol_2	Num	8		
3656	totalvol_3	Num	8		
3657	totalvol_4	Num	8		
3658	totalvol_5	Num	8		
3659	totalvol_6	Num	8		
3660	totalvol_7	Num	8		
3661	totalvol_8	Num	8		

Num	Variable	Type	Len	Format	Label
3662	totalvol_9	Num	8		
3663	totalvol_10	Num	8		
3664	totalvol_11	Num	8		
3665	totalvol_12	Num	8		
3666	gastricpos_0	Num	8		
3667	gastricpos_1	Num	8		
3668	gastricpos_2	Num	8		
3669	gastricpos_3	Num	8		
3670	gastricpos_4	Num	8		
3671	gastricpos_5	Num	8		
3672	gastricpos_6	Num	8		
3673	gastricpos_7	Num	8		
3674	gastricpos_8	Num	8		
3675	gastricpos_9	Num	8		
3676	gastricpos_10	Num	8		
3677	gastricpos_11	Num	8		
3678	gastricpos_12	Num	8		
3679	apache	Num	8		
3680	vfd	Num	8		Vent Free Days
3681	vfd_status	Num	8		
3682	icufd	Num	8		ICU Free Days
3683	icu_query	Char	49		
3684	cardio_0	Num	8		
3685	cardio_1	Num	8		
3686	cardio_2	Num	8		
3687	cardio_3	Num	8		
3688	cardio_4	Num	8		
3689	cardio_5	Num	8		
3690	cardio_6	Num	8		
3691	cardio_7	Num	8		
3692	cardio_8	Num	8		
3693	cardio_9	Num	8		
3694	cardio_10	Num	8		
3695	cardio_11	Num	8		
3696	cardio_12	Num	8		
3697	cardio_13	Num	8		
3698	cardio_14	Num	8		
3699	cardio_15	Num	8		
3700	cardio_16	Num	8		

Num	Variable	Type	Len	Format	Label
3701	cardio_17	Num	8		
3702	cardio_18	Num	8		
3703	cardio_19	Num	8		
3704	cardio_20	Num	8		
3705	cardio_21	Num	8		
3706	cardio_22	Num	8		
3707	cardio_23	Num	8		
3708	cardio_24	Num	8		
3709	cardio_25	Num	8		
3710	cardio_26	Num	8		
3711	cardio_27	Num	8		
3712	cardio_28	Num	8		
3713	pulmon_0	Num	8		
3714	pulmon_1	Num	8		
3715	pulmon_2	Num	8		
3716	pulmon_3	Num	8		
3717	pulmon_4	Num	8		
3718	pulmon_5	Num	8		
3719	pulmon_6	Num	8		
3720	pulmon_7	Num	8		
3721	pulmon_8	Num	8		
3722	pulmon_9	Num	8		
3723	pulmon_10	Num	8		
3724	pulmon_11	Num	8		
3725	pulmon_12	Num	8		
3726	pulmon_13	Num	8		
3727	pulmon_14	Num	8		
3728	pulmon_15	Num	8		
3729	pulmon_16	Num	8		
3730	pulmon_17	Num	8		
3731	pulmon_18	Num	8		
3732	pulmon_19	Num	8		
3733	pulmon_20	Num	8		
3734	pulmon_21	Num	8		
3735	pulmon_22	Num	8		
3736	pulmon_23	Num	8		
3737	pulmon_24	Num	8		
3738	pulmon_25	Num	8		
3739	pulmon_26	Num	8		

Num	Variable	Type	Len	Format	Label
3740	pulmon_27	Num	8		
3741	pulmon_28	Num	8		
3742	cns_0	Num	8		
3743	cns_1	Num	8		
3744	cns_2	Num	8		
3745	cns_3	Num	8		
3746	cns_4	Num	8		
3747	cns_5	Num	8		
3748	cns_6	Num	8		
3749	cns_7	Num	8		
3750	cns_8	Num	8		
3751	cns_9	Num	8		
3752	cns_10	Num	8		
3753	cns_11	Num	8		
3754	cns_12	Num	8		
3755	cns_13	Num	8		
3756	cns_14	Num	8		
3757	cns_15	Num	8		
3758	cns_16	Num	8		
3759	cns_17	Num	8		
3760	cns_18	Num	8		
3761	cns_19	Num	8		
3762	cns_20	Num	8		
3763	cns_21	Num	8		
3764	cns_22	Num	8		
3765	cns_23	Num	8		
3766	cns_24	Num	8		
3767	cns_25	Num	8		
3768	cns_26	Num	8		
3769	cns_27	Num	8		
3770	cns_28	Num	8		
3771	coag_0	Num	8		
3772	coag_1	Num	8		
3773	coag_2	Num	8		
3774	coag_3	Num	8		
3775	coag_4	Num	8		
3776	coag_5	Num	8		
3777	coag_6	Num	8		
3778	coag_7	Num	8		

Num	Variable	Type	Len	Format	Label
3779	coag_8	Num	8		
3780	coag_9	Num	8		
3781	coag_10	Num	8		
3782	coag_11	Num	8		
3783	coag_12	Num	8		
3784	coag_13	Num	8		
3785	coag_14	Num	8		
3786	coag_15	Num	8		
3787	coag_16	Num	8		
3788	coag_17	Num	8		
3789	coag_18	Num	8		
3790	coag_19	Num	8		
3791	coag_20	Num	8		
3792	coag_21	Num	8		
3793	coag_22	Num	8		
3794	coag_23	Num	8		
3795	coag_24	Num	8		
3796	coag_25	Num	8		
3797	coag_26	Num	8		
3798	coag_27	Num	8		
3799	coag_28	Num	8		
3800	renal_0	Num	8		
3801	renal_1	Num	8		
3802	renal_2	Num	8		
3803	renal_3	Num	8		
3804	renal_4	Num	8		
3805	renal_5	Num	8		
3806	renal_6	Num	8		
3807	renal_7	Num	8		
3808	renal_8	Num	8		
3809	renal_9	Num	8		
3810	renal_10	Num	8		
3811	renal_11	Num	8		
3812	renal_12	Num	8		
3813	renal_13	Num	8		
3814	renal_14	Num	8		
3815	renal_15	Num	8		
3816	renal_16	Num	8		
3817	renal_17	Num	8		

Num	Variable	Type	Len	Format	Label
3818	renal_18	Num	8		
3819	renal_19	Num	8		
3820	renal_20	Num	8		
3821	renal_21	Num	8		
3822	renal_22	Num	8		
3823	renal_23	Num	8		
3824	renal_24	Num	8		
3825	renal_25	Num	8		
3826	renal_26	Num	8		
3827	renal_27	Num	8		
3828	renal_28	Num	8		
3829	hepatic_0	Num	8		
3830	hepatic_1	Num	8		
3831	hepatic_2	Num	8		
3832	hepatic_3	Num	8		
3833	hepatic_4	Num	8		
3834	hepatic_5	Num	8		
3835	hepatic_6	Num	8		
3836	hepatic_7	Num	8		
3837	hepatic_8	Num	8		
3838	hepatic_9	Num	8		
3839	hepatic_10	Num	8		
3840	hepatic_11	Num	8		
3841	hepatic_12	Num	8		
3842	hepatic_13	Num	8		
3843	hepatic_14	Num	8		
3844	hepatic_15	Num	8		
3845	hepatic_16	Num	8		
3846	hepatic_17	Num	8		
3847	hepatic_18	Num	8		
3848	hepatic_19	Num	8		
3849	hepatic_20	Num	8		
3850	hepatic_21	Num	8		
3851	hepatic_22	Num	8		
3852	hepatic_23	Num	8		
3853	hepatic_24	Num	8		
3854	hepatic_25	Num	8		
3855	hepatic_26	Num	8		
3856	hepatic_27	Num	8		

Num	Variable	Type	Len	Format	Label
3857	hepatic_28	Num	8		
3858	orgfree_0	Num	8		
3859	orgfree_1	Num	8		
3860	orgfree_2	Num	8		
3861	orgfree_3	Num	8		
3862	orgfree_4	Num	8		
3863	orgfree_5	Num	8		
3864	orgfree_6	Num	8		
3865	orgfree_7	Num	8		
3866	orgfree_8	Num	8		
3867	orgfree_9	Num	8		
3868	orgfree_10	Num	8		
3869	orgfree_11	Num	8		
3870	orgfree_12	Num	8		
3871	orgfree_13	Num	8		
3872	orgfree_14	Num	8		
3873	orgfree_15	Num	8		
3874	orgfree_16	Num	8		
3875	orgfree_17	Num	8		
3876	orgfree_18	Num	8		
3877	orgfree_19	Num	8		
3878	orgfree_20	Num	8		
3879	orgfree_21	Num	8		
3880	orgfree_22	Num	8		
3881	orgfree_23	Num	8		
3882	orgfree_24	Num	8		
3883	orgfree_25	Num	8		
3884	orgfree_26	Num	8		
3885	orgfree_27	Num	8		
3886	orgfree_28	Num	8		
3887	cardio7	Num	8		
3888	cardio28	Num	8		
3889	pulmon7	Num	8		
3890	pulmon28	Num	8		
3891	cns7	Num	8		
3892	cns28	Num	8		
3893	coag7	Num	8		
3894	coag28	Num	8		
3895	renal7	Num	8		

Num	Variable	Type	Len	Format	Label
3896	renal28	Num	8		
3897	hepatic7	Num	8		
3898	hepatic28	Num	8		
3899	orgfree7	Num	8		
3900	orgfree28	Num	8		
3901	orgfail	Num	8		
3902	micu	Num	8		
3903	fio2abg_0	Num	8		
3904	pao2abg_0	Num	8		
3905	paco2abg_0	Num	8		
3906	phabg_0	Num	8		
3907	posvap	Num	8		Presence of Ventilator Associated Pneumonia
3908	posblcult	Num	8		Positive Blood Culture
3909	poscdif	Num	8		Positive Clostridium Dificile Culture
3910	oi_0	Num	8		
3911	oi_1	Num	8		
3912	oi_2	Num	8		
3913	oi_3	Num	8		
3914	oi_4	Num	8		
3915	oi_7	Num	8		
3916	oi_12	Num	8		
3917	oi_21	Num	8		
3918	oi_28	Num	8		
3919	cstat_0	Num	8		
3920	cstat_1	Num	8		
3921	cstat_2	Num	8		
3922	cstat_3	Num	8		
3923	cstat_4	Num	8		
3924	cstat_7	Num	8		
3925	cstat_12	Num	8		
3926	cstat_21	Num	8		
3927	cstat_28	Num	8		
3928	i	Num	8		
3929	intub_to_rand	Num	8		
3930	ali_to_rand	Num	8		
3931	intub_to_rand_cat	Num	8		
3932	ali_to_rand_cat	Num	8		
3933	bmi	Num	8		
3934	bmi_cat	Num	8	BMI_CAT.	

Num	Variable	Type	Len	Format	Label
3935	fustatus90	Num	8	FUSTA90F.	
3936	edenchar	Char	20		
3937	dummy_subject	Num	8		
3938	death90	Num	8		Death during 90-day follow-up

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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	nocardiac	Num	8		None
14	nocardiacc	Char	4	$4.	None
15	vfib	Num	8		Ventricular fibrillation
16	vfibc	Char	24	$24.	Ventricular fibrillation
17	vtachdc	Num	8		Ventricular tachycardia requiring DC cardioversion
18	vtachdcc	Char	50	$50.	Ventricular tachycardia requiring DC cardioversion
19	vtachmi	Num	8		Ventricular tachycardia requiring medical intervention
20	vtachmic	Char	54	$54.	Ventricular tachycardia requiring medical intervention
21	svtdc	Num	8		SVT requiring DC cardioversion
22	svtdcc	Char	30	$30.	SVT requiring DC cardioversion
23	svtmi	Num	8		SVT requiring medical intervention
24	svtmic	Char	34	$34.	SVT requiring medical intervention
25	afibnt	Num	8		New onset atrial fibrillation (no treatment required)
26	afibntc	Char	53	$53.	New onset atrial fibrillation (no treatment required)
27	afibdc	Num	8		New onset atrial fibrillation requiring DC cardioversion
28	afibdcc	Char	56	$56.	New onset atrial fibrillation requiring DC cardioversion
29	afibmi	Num	8		New onset atrial fibrillation requiring medical intervention
30	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	alta	Char	20		
6	omega	Char	20		
7	omegachar	Char	12		
8	eden	Char	20		
9	altapatient	Num	8		
10	omegapatient	Num	8		
11	edenpatient	Num	8		
12	visit	Num	8		
13	visitname	Char	1024	$1024.	Visit Name
14	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	index	Num	8		Form index
13	visitname	Char	1024	$1024.	Visit Name
14	narcotics	Num	8		Did patient receive any narcotics this calendar date?
15	narcoticsc	Char	3	$3.	Did patient receive any narcotics this calendar date?
16	paralytics	Num	8		Did patient receive any paralytics this calendar date?
17	paralyticsc	Char	3	$3.	Did patient receive any paralytics this calendar date?
18	prokinetics	Num	8		Did patient receive any prokinetics this calendar date?
19	prokineticsc	Char	3	$3.	Did patient receive any prokinetics this calendar date?
20	antiemetics	Num	8		Did patient receive any anti-emetics this calendar date?
21	antiemeticsc	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
22	antidiarrheals	Num	8		Did patient receive any anti-diarrheals this calendar date?
23	antidiarrhealsc	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
24	laxatives	Num	8		Did patient receive any laxatives this calendar date?
25	laxativesc	Char	3	$3.	Did patient receive any laxatives this calendar date?
26	narcoticsx	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
27	paralyticsx	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
28	prokineticsx	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
29	antiemeticsx	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
30	antidiarrhealsx	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
31	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	index	Num	8		
12	narcotics_1	Num	8		Did patient receive any narcotics this calendar date?
13	narcoticsc_1	Char	3	$3.	Did patient receive any narcotics this calendar date?
14	paralytics_1	Num	8		Did patient receive any paralytics this calendar date?
15	paralyticsc_1	Char	3	$3.	Did patient receive any paralytics this calendar date?
16	prokinetics_1	Num	8		Did patient receive any prokinetics this calendar date?
17	prokineticsc_1	Char	3	$3.	Did patient receive any prokinetics this calendar date?
18	antiemetics_1	Num	8		Did patient receive any anti-emetics this calendar date?
19	antiemeticsc_1	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
20	antidiarrheals_1	Num	8		Did patient receive any anti-diarrheals this calendar date?
21	antidiarrhealsc_1	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
22	laxatives_1	Num	8		Did patient receive any laxatives this calendar date?
23	laxativesc_1	Char	3	$3.	Did patient receive any laxatives this calendar date?
24	narcoticsx_1	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
25	paralyticsx_1	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
26	prokineticsx_1	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
27	antiemeticsx_1	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
28	antidiarrhealsx_1	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
29	laxativesx_1	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
30	narcotics_2	Num	8		Did patient receive any narcotics this calendar date?
31	narcoticsc_2	Char	3	$3.	Did patient receive any narcotics this calendar date?
32	paralytics_2	Num	8		Did patient receive any paralytics this calendar date?
33	paralyticsc_2	Char	3	$3.	Did patient receive any paralytics this calendar date?
34	prokinetics_2	Num	8		Did patient receive any prokinetics this calendar date?
35	prokineticsc_2	Char	3	$3.	Did patient receive any prokinetics this calendar date?
36	antiemetics_2	Num	8		Did patient receive any anti-emetics this calendar date?

Num	Variable	Type	Len	Format	Label
37	antiemeticsc_2	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
38	antidiarrheals_2	Num	8		Did patient receive any anti-diarrheals this calendar date?
39	antidiarrhealsc_2	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
40	laxatives_2	Num	8		Did patient receive any laxatives this calendar date?
41	laxativesc_2	Char	3	$3.	Did patient receive any laxatives this calendar date?
42	narcoticsx_2	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
43	paralyticsx_2	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
44	prokineticsx_2	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
45	antiemeticsx_2	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
46	antidiarrhealsx_2	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
47	laxativesx_2	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
48	narcotics_3	Num	8		Did patient receive any narcotics this calendar date?
49	narcoticsc_3	Char	3	$3.	Did patient receive any narcotics this calendar date?
50	paralytics_3	Num	8		Did patient receive any paralytics this calendar date?
51	paralyticsc_3	Char	3	$3.	Did patient receive any paralytics this calendar date?
52	prokinetics_3	Num	8		Did patient receive any prokinetics this calendar date?
53	prokineticsc_3	Char	3	$3.	Did patient receive any prokinetics this calendar date?
54	antiemetics_3	Num	8		Did patient receive any anti-emetics this calendar date?
55	antiemeticsc_3	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
56	antidiarrheals_3	Num	8		Did patient receive any anti-diarrheals this calendar date?
57	antidiarrhealsc_3	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
58	laxatives_3	Num	8		Did patient receive any laxatives this calendar date?
59	laxativesc_3	Char	3	$3.	Did patient receive any laxatives this calendar date?
60	narcoticsx_3	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
61	paralyticsx_3	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
62	prokineticsx_3	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
63	antiemeticsx_3	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
64	antidiarrhealsx_3	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
65	laxativesx_3	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
66	narcotics_4	Num	8		Did patient receive any narcotics this calendar date?
67	narcoticsc_4	Char	3	$3.	Did patient receive any narcotics this calendar date?
68	paralytics_4	Num	8		Did patient receive any paralytics this calendar date?
69	paralyticsc_4	Char	3	$3.	Did patient receive any paralytics this calendar date?
70	prokinetics_4	Num	8		Did patient receive any prokinetics this calendar date?
71	prokineticsc_4	Char	3	$3.	Did patient receive any prokinetics this calendar date?
72	antiemetics_4	Num	8		Did patient receive any anti-emetics this calendar date?
73	antiemeticsc_4	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
74	antidiarrheals_4	Num	8		Did patient receive any anti-diarrheals this calendar date?
75	antidiarrhealsc_4	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?

Num	Variable	Type	Len	Format	Label
76	laxatives_4	Num	8		Did patient receive any laxatives this calendar date?
77	laxativesc_4	Char	3	$3.	Did patient receive any laxatives this calendar date?
78	narcoticsx_4	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
79	paralyticsx_4	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
80	prokineticsx_4	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
81	antiemeticsx_4	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
82	antidiarrhealsx_4	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
83	laxativesx_4	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
84	narcotics_5	Num	8		Did patient receive any narcotics this calendar date?
85	narcoticsc_5	Char	3	$3.	Did patient receive any narcotics this calendar date?
86	paralytics_5	Num	8		Did patient receive any paralytics this calendar date?
87	paralyticsc_5	Char	3	$3.	Did patient receive any paralytics this calendar date?
88	prokinetics_5	Num	8		Did patient receive any prokinetics this calendar date?
89	prokineticsc_5	Char	3	$3.	Did patient receive any prokinetics this calendar date?
90	antiemetics_5	Num	8		Did patient receive any anti-emetics this calendar date?
91	antiemeticsc_5	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
92	antidiarrheals_5	Num	8		Did patient receive any anti-diarrheals this calendar date?
93	antidiarrhealsc_5	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
94	laxatives_5	Num	8		Did patient receive any laxatives this calendar date?
95	laxativesc_5	Char	3	$3.	Did patient receive any laxatives this calendar date?
96	narcoticsx_5	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
97	paralyticsx_5	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
98	prokineticsx_5	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
99	antiemeticsx_5	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
100	antidiarrhealsx_5	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
101	laxativesx_5	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
102	narcotics_6	Num	8		Did patient receive any narcotics this calendar date?
103	narcoticsc_6	Char	3	$3.	Did patient receive any narcotics this calendar date?
104	paralytics_6	Num	8		Did patient receive any paralytics this calendar date?
105	paralyticsc_6	Char	3	$3.	Did patient receive any paralytics this calendar date?
106	prokinetics_6	Num	8		Did patient receive any prokinetics this calendar date?
107	prokineticsc_6	Char	3	$3.	Did patient receive any prokinetics this calendar date?
108	antiemetics_6	Num	8		Did patient receive any anti-emetics this calendar date?
109	antiemeticsc_6	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
110	antidiarrheals_6	Num	8		Did patient receive any anti-diarrheals this calendar date?
111	antidiarrhealsc_6	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
112	laxatives_6	Num	8		Did patient receive any laxatives this calendar date?
113	laxativesc_6	Char	3	$3.	Did patient receive any laxatives this calendar date?
114	narcoticsx_6	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)

Num	Variable	Type	Len	Format	Label
115	paralyticsx_6	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
116	prokineticsx_6	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
117	antiemeticsx_6	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
118	antidiarrhealsx_6	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
119	laxativesx_6	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
120	narcotics_7	Num	8		Did patient receive any narcotics this calendar date?
121	narcoticsc_7	Char	3	$3.	Did patient receive any narcotics this calendar date?
122	paralytics_7	Num	8		Did patient receive any paralytics this calendar date?
123	paralyticsc_7	Char	3	$3.	Did patient receive any paralytics this calendar date?
124	prokinetics_7	Num	8		Did patient receive any prokinetics this calendar date?
125	prokineticsc_7	Char	3	$3.	Did patient receive any prokinetics this calendar date?
126	antiemetics_7	Num	8		Did patient receive any anti-emetics this calendar date?
127	antiemeticsc_7	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
128	antidiarrheals_7	Num	8		Did patient receive any anti-diarrheals this calendar date?
129	antidiarrhealsc_7	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
130	laxatives_7	Num	8		Did patient receive any laxatives this calendar date?
131	laxativesc_7	Char	3	$3.	Did patient receive any laxatives this calendar date?
132	narcoticsx_7	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
133	paralyticsx_7	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
134	prokineticsx_7	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
135	antiemeticsx_7	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
136	antidiarrhealsx_7	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
137	laxativesx_7	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
138	narcotics_8	Num	8		Did patient receive any narcotics this calendar date?
139	narcoticsc_8	Char	3	$3.	Did patient receive any narcotics this calendar date?
140	paralytics_8	Num	8		Did patient receive any paralytics this calendar date?
141	paralyticsc_8	Char	3	$3.	Did patient receive any paralytics this calendar date?
142	prokinetics_8	Num	8		Did patient receive any prokinetics this calendar date?
143	prokineticsc_8	Char	3	$3.	Did patient receive any prokinetics this calendar date?
144	antiemetics_8	Num	8		Did patient receive any anti-emetics this calendar date?
145	antiemeticsc_8	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
146	antidiarrheals_8	Num	8		Did patient receive any anti-diarrheals this calendar date?
147	antidiarrhealsc_8	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
148	laxatives_8	Num	8		Did patient receive any laxatives this calendar date?
149	laxativesc_8	Char	3	$3.	Did patient receive any laxatives this calendar date?
150	narcoticsx_8	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
151	paralyticsx_8	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
152	prokineticsx_8	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
153	antiemeticsx_8	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)

Num	Variable	Type	Len	Format	Label
154	antidiarrhealsx_8	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
155	laxativesx_8	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
156	narcotics_9	Num	8		Did patient receive any narcotics this calendar date?
157	narcoticsc_9	Char	3	$3.	Did patient receive any narcotics this calendar date?
158	paralytics_9	Num	8		Did patient receive any paralytics this calendar date?
159	paralyticsc_9	Char	3	$3.	Did patient receive any paralytics this calendar date?
160	prokinetics_9	Num	8		Did patient receive any prokinetics this calendar date?
161	prokineticsc_9	Char	3	$3.	Did patient receive any prokinetics this calendar date?
162	antiemetics_9	Num	8		Did patient receive any anti-emetics this calendar date?
163	antiemeticsc_9	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
164	antidiarrheals_9	Num	8		Did patient receive any anti-diarrheals this calendar date?
165	antidiarrhealsc_9	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
166	laxatives_9	Num	8		Did patient receive any laxatives this calendar date?
167	laxativesc_9	Char	3	$3.	Did patient receive any laxatives this calendar date?
168	narcoticsx_9	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
169	paralyticsx_9	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
170	prokineticsx_9	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
171	antiemeticsx_9	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
172	antidiarrhealsx_9	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
173	laxativesx_9	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
174	narcotics_10	Num	8		Did patient receive any narcotics this calendar date?
175	narcoticsc_10	Char	3	$3.	Did patient receive any narcotics this calendar date?
176	paralytics_10	Num	8		Did patient receive any paralytics this calendar date?
177	paralyticsc_10	Char	3	$3.	Did patient receive any paralytics this calendar date?
178	prokinetics_10	Num	8		Did patient receive any prokinetics this calendar date?
179	prokineticsc_10	Char	3	$3.	Did patient receive any prokinetics this calendar date?
180	antiemetics_10	Num	8		Did patient receive any anti-emetics this calendar date?
181	antiemeticsc_10	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
182	antidiarrheals_10	Num	8		Did patient receive any anti-diarrheals this calendar date?
183	antidiarrhealsc_10	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
184	laxatives_10	Num	8		Did patient receive any laxatives this calendar date?
185	laxativesc_10	Char	3	$3.	Did patient receive any laxatives this calendar date?
186	narcoticsx_10	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
187	paralyticsx_10	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
188	prokineticsx_10	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
189	antiemeticsx_10	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
190	antidiarrhealsx_10	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
191	laxativesx_10	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
192	narcotics_11	Num	8		Did patient receive any narcotics this calendar date?

Num	Variable	Type	Len	Format	Label
193	narcoticsc_11	Char	3	$3.	Did patient receive any narcotics this calendar date?
194	paralytics_11	Num	8		Did patient receive any paralytics this calendar date?
195	paralyticsc_11	Char	3	$3.	Did patient receive any paralytics this calendar date?
196	prokinetics_11	Num	8		Did patient receive any prokinetics this calendar date?
197	prokineticsc_11	Char	3	$3.	Did patient receive any prokinetics this calendar date?
198	antiemetics_11	Num	8		Did patient receive any anti-emetics this calendar date?
199	antiemeticsc_11	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
200	antidiarrheals_11	Num	8		Did patient receive any anti-diarrheals this calendar date?
201	antidiarrhealsc_11	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
202	laxatives_11	Num	8		Did patient receive any laxatives this calendar date?
203	laxativesc_11	Char	3	$3.	Did patient receive any laxatives this calendar date?
204	narcoticsx_11	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
205	paralyticsx_11	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
206	prokineticsx_11	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
207	antiemeticsx_11	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
208	antidiarrhealsx_11	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
209	laxativesx_11	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
210	narcotics_12	Num	8		Did patient receive any narcotics this calendar date?
211	narcoticsc_12	Char	3	$3.	Did patient receive any narcotics this calendar date?
212	paralytics_12	Num	8		Did patient receive any paralytics this calendar date?
213	paralyticsc_12	Char	3	$3.	Did patient receive any paralytics this calendar date?
214	prokinetics_12	Num	8		Did patient receive any prokinetics this calendar date?
215	prokineticsc_12	Char	3	$3.	Did patient receive any prokinetics this calendar date?
216	antiemetics_12	Num	8		Did patient receive any anti-emetics this calendar date?
217	antiemeticsc_12	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
218	antidiarrheals_12	Num	8		Did patient receive any anti-diarrheals this calendar date?
219	antidiarrhealsc_12	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
220	laxatives_12	Num	8		Did patient receive any laxatives this calendar date?
221	laxativesc_12	Char	3	$3.	Did patient receive any laxatives this calendar date?
222	narcoticsx_12	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
223	paralyticsx_12	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
224	prokineticsx_12	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
225	antiemeticsx_12	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
226	antidiarrhealsx_12	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
227	laxativesx_12	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
228	narcotics_0	Num	8		
229	paralytics_0	Num	8		
230	prokinetics_0	Num	8		
231	antiemetics_0	Num	8		

Num	Variable	Type	Len	Format	Label
232	antidiarrheals_0	Num	8		
233	laxatives_0	Num	8		
234	n_days	Num	8		N days
235	n_narc	Num	8		Narcotics
236	n_paral	Num	8		Paralytics
237	n_prok	Num	8		Prokinetics
238	n_antie	Num	8		Antiemetics
239	n_antid	Num	8		Antidiarrheals
240	n_lax	Num	8		Laxatives
241	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	index	Num	8		
12	narcotics_1	Num	8		Did patient receive any narcotics this calendar date?
13	narcoticsc_1	Char	3	$3.	Did patient receive any narcotics this calendar date?
14	paralytics_1	Num	8		Did patient receive any paralytics this calendar date?
15	paralyticsc_1	Char	3	$3.	Did patient receive any paralytics this calendar date?
16	prokinetics_1	Num	8		Did patient receive any prokinetics this calendar date?
17	prokineticsc_1	Char	3	$3.	Did patient receive any prokinetics this calendar date?
18	antiemetics_1	Num	8		Did patient receive any anti-emetics this calendar date?
19	antiemeticsc_1	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
20	antidiarrheals_1	Num	8		Did patient receive any anti-diarrheals this calendar date?
21	antidiarrhealsc_1	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
22	laxatives_1	Num	8		Did patient receive any laxatives this calendar date?
23	laxativesc_1	Char	3	$3.	Did patient receive any laxatives this calendar date?
24	narcoticsx_1	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
25	paralyticsx_1	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
26	prokineticsx_1	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
27	antiemeticsx_1	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
28	antidiarrhealsx_1	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
29	laxativesx_1	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
30	narcotics_2	Num	8		Did patient receive any narcotics this calendar date?
31	narcoticsc_2	Char	3	$3.	Did patient receive any narcotics this calendar date?
32	paralytics_2	Num	8		Did patient receive any paralytics this calendar date?
33	paralyticsc_2	Char	3	$3.	Did patient receive any paralytics this calendar date?
34	prokinetics_2	Num	8		Did patient receive any prokinetics this calendar date?
35	prokineticsc_2	Char	3	$3.	Did patient receive any prokinetics this calendar date?
36	antiemetics_2	Num	8		Did patient receive any anti-emetics this calendar date?

Num	Variable	Type	Len	Format	Label
37	antiemeticsc_2	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
38	antidiarrheals_2	Num	8		Did patient receive any anti-diarrheals this calendar date?
39	antidiarrhealsc_2	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
40	laxatives_2	Num	8		Did patient receive any laxatives this calendar date?
41	laxativesc_2	Char	3	$3.	Did patient receive any laxatives this calendar date?
42	narcoticsx_2	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
43	paralyticsx_2	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
44	prokineticsx_2	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
45	antiemeticsx_2	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
46	antidiarrhealsx_2	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
47	laxativesx_2	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
48	narcotics_3	Num	8		Did patient receive any narcotics this calendar date?
49	narcoticsc_3	Char	3	$3.	Did patient receive any narcotics this calendar date?
50	paralytics_3	Num	8		Did patient receive any paralytics this calendar date?
51	paralyticsc_3	Char	3	$3.	Did patient receive any paralytics this calendar date?
52	prokinetics_3	Num	8		Did patient receive any prokinetics this calendar date?
53	prokineticsc_3	Char	3	$3.	Did patient receive any prokinetics this calendar date?
54	antiemetics_3	Num	8		Did patient receive any anti-emetics this calendar date?
55	antiemeticsc_3	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
56	antidiarrheals_3	Num	8		Did patient receive any anti-diarrheals this calendar date?
57	antidiarrhealsc_3	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
58	laxatives_3	Num	8		Did patient receive any laxatives this calendar date?
59	laxativesc_3	Char	3	$3.	Did patient receive any laxatives this calendar date?
60	narcoticsx_3	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
61	paralyticsx_3	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
62	prokineticsx_3	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
63	antiemeticsx_3	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
64	antidiarrhealsx_3	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
65	laxativesx_3	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
66	narcotics_4	Num	8		Did patient receive any narcotics this calendar date?
67	narcoticsc_4	Char	3	$3.	Did patient receive any narcotics this calendar date?
68	paralytics_4	Num	8		Did patient receive any paralytics this calendar date?
69	paralyticsc_4	Char	3	$3.	Did patient receive any paralytics this calendar date?
70	prokinetics_4	Num	8		Did patient receive any prokinetics this calendar date?
71	prokineticsc_4	Char	3	$3.	Did patient receive any prokinetics this calendar date?
72	antiemetics_4	Num	8		Did patient receive any anti-emetics this calendar date?
73	antiemeticsc_4	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
74	antidiarrheals_4	Num	8		Did patient receive any anti-diarrheals this calendar date?
75	antidiarrhealsc_4	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?

Num	Variable	Type	Len	Format	Label
76	laxatives_4	Num	8		Did patient receive any laxatives this calendar date?
77	laxativesc_4	Char	3	$3.	Did patient receive any laxatives this calendar date?
78	narcoticsx_4	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
79	paralyticsx_4	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
80	prokineticsx_4	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
81	antiemeticsx_4	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
82	antidiarrhealsx_4	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
83	laxativesx_4	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
84	narcotics_5	Num	8		Did patient receive any narcotics this calendar date?
85	narcoticsc_5	Char	3	$3.	Did patient receive any narcotics this calendar date?
86	paralytics_5	Num	8		Did patient receive any paralytics this calendar date?
87	paralyticsc_5	Char	3	$3.	Did patient receive any paralytics this calendar date?
88	prokinetics_5	Num	8		Did patient receive any prokinetics this calendar date?
89	prokineticsc_5	Char	3	$3.	Did patient receive any prokinetics this calendar date?
90	antiemetics_5	Num	8		Did patient receive any anti-emetics this calendar date?
91	antiemeticsc_5	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
92	antidiarrheals_5	Num	8		Did patient receive any anti-diarrheals this calendar date?
93	antidiarrhealsc_5	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
94	laxatives_5	Num	8		Did patient receive any laxatives this calendar date?
95	laxativesc_5	Char	3	$3.	Did patient receive any laxatives this calendar date?
96	narcoticsx_5	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
97	paralyticsx_5	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
98	prokineticsx_5	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
99	antiemeticsx_5	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
100	antidiarrhealsx_5	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
101	laxativesx_5	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
102	narcotics_6	Num	8		Did patient receive any narcotics this calendar date?
103	narcoticsc_6	Char	3	$3.	Did patient receive any narcotics this calendar date?
104	paralytics_6	Num	8		Did patient receive any paralytics this calendar date?
105	paralyticsc_6	Char	3	$3.	Did patient receive any paralytics this calendar date?
106	prokinetics_6	Num	8		Did patient receive any prokinetics this calendar date?
107	prokineticsc_6	Char	3	$3.	Did patient receive any prokinetics this calendar date?
108	antiemetics_6	Num	8		Did patient receive any anti-emetics this calendar date?
109	antiemeticsc_6	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
110	antidiarrheals_6	Num	8		Did patient receive any anti-diarrheals this calendar date?
111	antidiarrhealsc_6	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
112	laxatives_6	Num	8		Did patient receive any laxatives this calendar date?
113	laxativesc_6	Char	3	$3.	Did patient receive any laxatives this calendar date?
114	narcoticsx_6	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)

Num	Variable	Type	Len	Format	Label
115	paralyticsx_6	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
116	prokineticsx_6	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
117	antiemeticsx_6	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
118	antidiarrhealsx_6	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
119	laxativesx_6	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
120	narcotics_7	Num	8		Did patient receive any narcotics this calendar date?
121	narcoticsc_7	Char	3	$3.	Did patient receive any narcotics this calendar date?
122	paralytics_7	Num	8		Did patient receive any paralytics this calendar date?
123	paralyticsc_7	Char	3	$3.	Did patient receive any paralytics this calendar date?
124	prokinetics_7	Num	8		Did patient receive any prokinetics this calendar date?
125	prokineticsc_7	Char	3	$3.	Did patient receive any prokinetics this calendar date?
126	antiemetics_7	Num	8		Did patient receive any anti-emetics this calendar date?
127	antiemeticsc_7	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
128	antidiarrheals_7	Num	8		Did patient receive any anti-diarrheals this calendar date?
129	antidiarrhealsc_7	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
130	laxatives_7	Num	8		Did patient receive any laxatives this calendar date?
131	laxativesc_7	Char	3	$3.	Did patient receive any laxatives this calendar date?
132	narcoticsx_7	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
133	paralyticsx_7	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
134	prokineticsx_7	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
135	antiemeticsx_7	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
136	antidiarrhealsx_7	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
137	laxativesx_7	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
138	narcotics_8	Num	8		Did patient receive any narcotics this calendar date?
139	narcoticsc_8	Char	3	$3.	Did patient receive any narcotics this calendar date?
140	paralytics_8	Num	8		Did patient receive any paralytics this calendar date?
141	paralyticsc_8	Char	3	$3.	Did patient receive any paralytics this calendar date?
142	prokinetics_8	Num	8		Did patient receive any prokinetics this calendar date?
143	prokineticsc_8	Char	3	$3.	Did patient receive any prokinetics this calendar date?
144	antiemetics_8	Num	8		Did patient receive any anti-emetics this calendar date?
145	antiemeticsc_8	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
146	antidiarrheals_8	Num	8		Did patient receive any anti-diarrheals this calendar date?
147	antidiarrhealsc_8	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
148	laxatives_8	Num	8		Did patient receive any laxatives this calendar date?
149	laxativesc_8	Char	3	$3.	Did patient receive any laxatives this calendar date?
150	narcoticsx_8	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
151	paralyticsx_8	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
152	prokineticsx_8	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
153	antiemeticsx_8	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)

Num	Variable	Type	Len	Format	Label
154	antidiarrhealsx_8	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
155	laxativesx_8	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
156	narcotics_9	Num	8		Did patient receive any narcotics this calendar date?
157	narcoticsc_9	Char	3	$3.	Did patient receive any narcotics this calendar date?
158	paralytics_9	Num	8		Did patient receive any paralytics this calendar date?
159	paralyticsc_9	Char	3	$3.	Did patient receive any paralytics this calendar date?
160	prokinetics_9	Num	8		Did patient receive any prokinetics this calendar date?
161	prokineticsc_9	Char	3	$3.	Did patient receive any prokinetics this calendar date?
162	antiemetics_9	Num	8		Did patient receive any anti-emetics this calendar date?
163	antiemeticsc_9	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
164	antidiarrheals_9	Num	8		Did patient receive any anti-diarrheals this calendar date?
165	antidiarrhealsc_9	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
166	laxatives_9	Num	8		Did patient receive any laxatives this calendar date?
167	laxativesc_9	Char	3	$3.	Did patient receive any laxatives this calendar date?
168	narcoticsx_9	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
169	paralyticsx_9	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
170	prokineticsx_9	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
171	antiemeticsx_9	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
172	antidiarrhealsx_9	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
173	laxativesx_9	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
174	narcotics_10	Num	8		Did patient receive any narcotics this calendar date?
175	narcoticsc_10	Char	3	$3.	Did patient receive any narcotics this calendar date?
176	paralytics_10	Num	8		Did patient receive any paralytics this calendar date?
177	paralyticsc_10	Char	3	$3.	Did patient receive any paralytics this calendar date?
178	prokinetics_10	Num	8		Did patient receive any prokinetics this calendar date?
179	prokineticsc_10	Char	3	$3.	Did patient receive any prokinetics this calendar date?
180	antiemetics_10	Num	8		Did patient receive any anti-emetics this calendar date?
181	antiemeticsc_10	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
182	antidiarrheals_10	Num	8		Did patient receive any anti-diarrheals this calendar date?
183	antidiarrhealsc_10	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
184	laxatives_10	Num	8		Did patient receive any laxatives this calendar date?
185	laxativesc_10	Char	3	$3.	Did patient receive any laxatives this calendar date?
186	narcoticsx_10	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
187	paralyticsx_10	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
188	prokineticsx_10	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
189	antiemeticsx_10	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
190	antidiarrhealsx_10	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
191	laxativesx_10	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
192	narcotics_11	Num	8		Did patient receive any narcotics this calendar date?

Num	Variable	Type	Len	Format	Label
193	narcoticsc_11	Char	3	$3.	Did patient receive any narcotics this calendar date?
194	paralytics_11	Num	8		Did patient receive any paralytics this calendar date?
195	paralyticsc_11	Char	3	$3.	Did patient receive any paralytics this calendar date?
196	prokinetics_11	Num	8		Did patient receive any prokinetics this calendar date?
197	prokineticsc_11	Char	3	$3.	Did patient receive any prokinetics this calendar date?
198	antiemetics_11	Num	8		Did patient receive any anti-emetics this calendar date?
199	antiemeticsc_11	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
200	antidiarrheals_11	Num	8		Did patient receive any anti-diarrheals this calendar date?
201	antidiarrhealsc_11	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
202	laxatives_11	Num	8		Did patient receive any laxatives this calendar date?
203	laxativesc_11	Char	3	$3.	Did patient receive any laxatives this calendar date?
204	narcoticsx_11	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
205	paralyticsx_11	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
206	prokineticsx_11	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
207	antiemeticsx_11	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
208	antidiarrhealsx_11	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
209	laxativesx_11	Char	64	$64.	Did patient receive any laxatives this calendar date? (Not Done)
210	narcotics_12	Num	8		Did patient receive any narcotics this calendar date?
211	narcoticsc_12	Char	3	$3.	Did patient receive any narcotics this calendar date?
212	paralytics_12	Num	8		Did patient receive any paralytics this calendar date?
213	paralyticsc_12	Char	3	$3.	Did patient receive any paralytics this calendar date?
214	prokinetics_12	Num	8		Did patient receive any prokinetics this calendar date?
215	prokineticsc_12	Char	3	$3.	Did patient receive any prokinetics this calendar date?
216	antiemetics_12	Num	8		Did patient receive any anti-emetics this calendar date?
217	antiemeticsc_12	Char	3	$3.	Did patient receive any anti-emetics this calendar date?
218	antidiarrheals_12	Num	8		Did patient receive any anti-diarrheals this calendar date?
219	antidiarrhealsc_12	Char	3	$3.	Did patient receive any anti-diarrheals this calendar date?
220	laxatives_12	Num	8		Did patient receive any laxatives this calendar date?
221	laxativesc_12	Char	3	$3.	Did patient receive any laxatives this calendar date?
222	narcoticsx_12	Char	64	$64.	Did patient receive any narcotics this calendar date? (Not Done)
223	paralyticsx_12	Char	64	$64.	Did patient receive any paralytics this calendar date? (Not Done)
224	prokineticsx_12	Char	64	$64.	Did patient receive any prokinetics this calendar date? (Not Done)
225	antiemeticsx_12	Char	64	$64.	Did patient receive any anti-emetics this calendar date? (Not Done)
226	antidiarrhealsx_12	Char	64	$64.	Did patient receive any anti-diarrheals this calendar date? (Not Done)
227	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
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	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
22	recfeedc	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
23	goalrate	Num	8		Tube feeding goal rate
24	goalchange	Num	8		Did the goal rate change during the 24 hour period?
25	goalchangec	Char	19	$19.	Did the goal rate change during the 24 hour period?
26	newgoal	Num	8		New goal rate
27	brand1	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
28	brand1vol	Num	8		Total volume of enteral formula 1 infused for 24 hour period
29	brand2	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
30	brand2vol	Num	8		Total volume of enteral formula 2 infused for 24 hour period
31	feedhrs	Num	8		Number of hours enteral tube feeds on for this 24 hour period
32	feedoff	Num	8		Feeds turned off for > 30 minutes within 24 hour period
33	feedoffc	Char	61	$61.	Feeds turned off for > 30 minutes within 24 hour period
34	planext	Num	8		Planned Extubation
35	planextc	Char	18	$18.	Planned Extubation
36	giint	Num	8		GI Intolerance

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

Num	Variable	Type	Len	Format	Label
74	distalconfc	Char	19	$19.	Was distal position confirmed during this 24 hour period?
75	distalhow	Num	8		How distal position confirmed
76	distalhowc	Char	15	$15.	How distal position confirmed
77	distaloth	Char	40	$40.	How distal position confirmed: other
78	fullcal	Num	8		Was rate advanced to full-calorie rate during this calendar day?
79	fullcalc	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
80	fullcaltm	Num	8	TIMEAMPM.	time full calorie reached
81	pronevent	Num	8		Prone ventilation between randomization and midnight?
82	proneventc	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	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
88	goalratex	Char	64	$64.	Tube feeding goal rate (Not Done)
89	goalchangex	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
90	brand1x	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period (Not Done)
91	feedhrsx	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	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	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
98	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	dsmeasure	Num	8		Was the deadspace measurement conducted?
14	dsmeasurec	Char	3	$3.	Was the deadspace measurement conducted?
15	dsmeasuretm	Num	8	TIMEAMPM.	Time of Measurement
16	simv_ds	Num	8		SIMV
17	simv_dsc	Char	4	$4.	SIMV
18	prvc_ds	Num	8		PRVC (pressure regulated volume control) or equivalent
19	prvc_dsc	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
20	pressup_ds	Num	8		Pressure Support
21	pressup_dsc	Char	16	$16.	Pressure Support
22	pressupcmh2o_ds	Num	8		Pressure Support cmH2O
23	volassist_ds	Num	8		Volume Assist/Control
24	volassist_dsc	Char	21	$21.	Volume Assist/Control
25	presassist_ds	Num	8		Pressure Assist
26	presassist_dsc	Char	15	$15.	Pressure Assist
27	presascmh2o_ds	Num	8		Pressure Assist cmH2O
28	pcirv_ds	Num	8		PC IRV
29	pcirv_dsc	Char	6	$6.	PC IRV
30	aprv_ds	Num	8		Airway Pressure Release Ventilation (APRV)
31	aprv_dsc	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
32	ventoth_ds	Num	8		Other
33	ventoth_dsc	Char	5	$5.	Other
34	fio2_ds	Num	8		FiO2
35	peep_ds	Num	8		PEEP
36	resprate_ds	Num	8		Total Respiratory Rate

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

Data Set Name: derive.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	alta	Char	20		
3	omega	Char	20		
4	eden	Char	20		
5	altapatient	Num	8		
6	edenpatient	Num	8		
7	omegapatient	Num	8		
8	shock	Num	8		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	apache	Num	8		
30	vfd	Num	8		Vent Free Days to Day 28
31	icufd	Num	8		ICU Free Days to Day 28
32	cardio28	Num	8		Cardiovascular Failure-Free Days to Day 28
33	cns28	Num	8		CNS Failure-Free Days to Day 28
34	coag28	Num	8		Coagulation Failure-Free Days to Day 28
35	renal28	Num	8		Renal Failure-Free Days to Day 28
36	hepatic28	Num	8		Hepatic Failure-Free Days to Day 28

Num	Variable	Type	Len	Format	Label
37	orgfree28	Num	8		No. of days without failure of circulatory, coagulation, hepatic, or renal organs from Day 1 to Day 28
38	death90	Num	8		Death during 90-day follow-up

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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	index	Num	8		Dose index
13	visitname	Char	1024	$1024.	Visit Name
14	cdifdt	Num	8	BEST12.	Date and time of new positive C. dificile culture after enrollment (Day)
15	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	allcrit	Num	8		Met all three criteria?
14	allcritc	Char	3	$3.	Met all three criteria?
15	qualdt	Num	8	BEST12.	Date and time of qualifying CXR: (Day)
16	qualtm	Num	8	TIME5.	Date and time of qualifying CXR: (Time)
17	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?
18	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?
19	sirswbc	Num	8		White blood cell count > 12000 or > 4000 or > 10% band forms
20	sirswbcc	Char	60	$60.	White blood cell count > 12000 or > 4000 or > 10% band forms
21	sirstemp38	Num	8		Body Temperature > 38C (any route) or < 36C (by core temperatures only: indwelling catheter, esophageal, rectal)
22	sirstemp38c	Char	112	$112.	Body Temperature > 38C (any route) or < 36C (by core temperatures only: indwelling catheter, esophageal, rectal)
23	sirshr90	Num	8		Heart rate (> 90 beats/min) or receiving medications that slow heart rate or paced rhythm
24	sirshr90c	Char	89	$89.	Heart rate (> 90 beats/min) or receiving medications that slow heart rate or paced rhythm
25	inf	Num	8		Patient has suspected or proven infection?
26	infc	Char	23	$23.	Patient has suspected or proven infection?
27	infthorax	Num	8		Site of infection: Thorax
28	infthoraxc	Char	6	$6.	Site of infection: Thorax
29	infabdomen	Num	8		Site of infection: Abdomen
30	infabdomenc	Char	7	$7.	Site of infection: Abdomen
31	infskin	Num	8		Site of infection: Skin or soft tissue
32	infskinc	Char	19	$19.	Site of infection: Skin or soft tissue

Num	Variable	Type	Len	Format	Label
33	infmenin	Num	8		Site of infection: Bacterial meningitis
34	infmeninc	Char	20	$20.	Site of infection: Bacterial meningitis
35	inftract	Num	8		Site of infection: Urinary tract
36	inftractc	Char	13	$13.	Site of infection: Urinary tract
37	infcent	Num	8		Site of infection: Central line
38	infcentc	Char	12	$12.	Site of infection: Central line
39	infsinus	Num	8		Site of infection: Sinuses
40	infsinusc	Char	7	$7.	Site of infection: Sinuses
41	infosteo	Num	8		Site of infection: Osteomyelitis
42	infosteoc	Char	13	$13.	Site of infection: Osteomyelitis
43	infh1n1	Num	8		Site of infection: Confirmed Swine Influenza A (H1N1)
44	infh1n1c	Char	34	$34.	Site of infection: Confirmed Swine Influenza A (H1N1)
45	infother	Char	255	$255.	Other site of infection
46	quads	Num	8		Number of quadrants with opacities (2-4):
47	intubdt	Num	8	BEST12.	Date and time of current intubation (Day)
48	intubtm	Num	8	TIME5.	Date and time of current intubation (Time)
49	intfeed	Num	8		Intent to begin/continue enteral feedings?
50	intfeedc	Char	3	$3.	Intent to begin/continue enteral feedings?
51	pao2screen	Num	8		Pa02
52	fio2screen	Num	8		FiO2
53	qualpfdt	Num	8	BEST12.	Date and time of qualifying P/F (Day)
54	qualpftm	Num	8	TIME5.	Date and time of qualifying P/F (Time)
55	critdt	Num	8	BEST12.	First date that all these criteria exist simultaneously (Day)
56	gender	Num	8		Gender
57	genderc	Char	6	$6.	Gender
58	ethnic	Num	8		Hispanic or Not Hispanic?
59	ethnicc	Char	22	$22.	Hispanic or Not Hispanic?
60	norace	Num	8		Race Not Reported
61	noracec	Char	12	$12.	Race Not Reported
62	white	Num	8		White?
63	whitec	Char	5	$5.	White
64	afamer	Num	8		Black or African American?
65	afamerc	Char	25	$25.	Black or African American?
66	othrace	Num	8		Other Race Category
67	othracec	Char	41	$41.	Other Race Category
68	age	Num	8		Age as appears on screening form (in years):
69	agegt89	Num	8		Is true age greater than 89?
70	agegt89c	Char	54	$54.	Is true age greater than 89?
71	locat	Num	8		Location

Num	Variable	Type	Len	Format	Label
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?
109	malnutrc	Char	101	$101.	Severe malnutrition in last 6 months?
110	lap	Num	8		Laparotomy expected?

Num	Variable	Type	Len	Format	Label
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?
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	36	$36.	MD refusal for EDEN/Omega?

Num	Variable	Type	Len	Format	Label
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?
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?

Num	Variable	Type	Len	Format	Label
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
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)

Num	Variable	Type	Len	Format	Label
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?

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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	altaconsent	Num	8		Has informed consent been obtained for the participation in ALTA?
14	altaconsentc	Char	3	$3.	Has informed consent been obtained for the participation in ALTA?
15	eoconsent	Num	8		Has informed consent been obtained for the participation in EDEN/Omega?
16	eoconsentc	Char	3	$3.	Has informed consent been obtained for the participation in EDEN/Omega?
17	genconsent	Num	8		Has informed consent been obtained for genetic testing testing in this study?
18	genconsentc	Char	3	$3.	Has informed consent been obtained for genetic testing testing in this study?
19	futconsenta	Num	8		Has informed consent been obtained for future genetic reasearch in ARDS?
20	futconsentac	Char	3	$3.	Has informed consent been obtained for future genetic reasearch in ARDS?
21	futconsento	Num	8		Has informed consent been obtained for Future Genetic Research involved with other medical conditions?
22	futconsentoc	Char	3	$3.	Has informed consent been obtained for Future Genetic Research involved with other medical conditions?
23	contconsent	Num	8		Has informed consent been obtained to CONTACT subject in the future for other studies?
24	contconsentc	Char	3	$3.	Has informed consent been obtained to CONTACT subject in the future for other studies?
25	altaconsentX	Char	64	$64.	Has informed consent been obtained for the participation in ALTA? (Not Done)
26	eoconsentX	Char	64	$64.	Has informed consent been obtained for the participation in EDEN/Omega? (Not Done)
27	genconsentX	Char	64	$64.	Has informed consent been obtained for genetic testing testing in this study? (Not Done)
28	futconsentaX	Char	64	$64.	Has informed consent been obtained for future genetic reasearch in ARDS? (Not Done)
29	futconsentoX	Char	64	$64.	Has informed consent been obtained for Future Genetic Research involved with other medical conditions? (Not Done)
30	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	proprate	Num	8		Propofol infusion rate at time of randomization
12	feedgrp	Num	8		Enteral Feeding Group
13	feedgrpc	Char	12	$12.	Enteral Feeding Group
14	prebasefeed	Num	8		In the 12 hours prior to enrollment, did patient receive any enteral feedings?
15	prebasefeedc	Char	72	$72.	In the 12 hours prior to enrollment, did patient receive any enteral feedings?
16	prebasevol	Num	8		Yes, enter total volume of enteral feeds in 12 hours prior to enrollment
17	feedinitdt	Num	8	BEST12.	Date and time of initiation of protocol specified enteral feeds (Day)
18	feedinittm	Num	8	TIME5.	Date and time of initiation of protocol specified enteral feeds (Time)
19	recfeed_0	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
20	recfeedc_0	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
21	goalrate_0	Num	8		Tube feeding goal rate
22	goalchange_0	Num	8		Did the goal rate change during the 24 hour period?
23	goalchangec_0	Char	19	$19.	Did the goal rate change during the 24 hour period?
24	newgoal_0	Num	8		New goal rate
25	brand1_0	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
26	brand1vol_0	Num	8		Total volume of enteral formula 1 infused for 24 hour period
27	brand2_0	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
28	brand2vol_0	Num	8		Total volume of enteral formula 2 infused for 24 hour period
29	feedhrs_0	Num	8		Number of hours enteral tube feeds on for this 24 hour period
30	feedoff_0	Num	8		Feeds turned off for > 30 minutes within 24 hour period
31	feedoffc_0	Char	61	$61.	Feeds turned off for > 30 minutes within 24 hour period
32	planext_0	Num	8		Planned Extubation
33	planextc_0	Char	18	$18.	Planned Extubation
34	giint_0	Num	8		GI Intolerance
35	giintc_0	Char	14	$14.	GI Intolerance
36	invbside_0	Num	8		Invasive bedside procedure

Num	Variable	Type	Len	Format	Label
37	invbsidec_0	Char	26	$26.	Invasive bedside procedure
38	surgery	Num	8		Surgery
39	surgeryc	Char	7	$7.	Surgery
40	leftfloor_0	Num	8		Patient left the floor
41	leftfloorc_0	Char	22	$22.	Patient left the floor
42	care_0	Num	8		Nursing Care(ie bathing, HOB down)
43	carec_0	Char	34	$34.	Nursing Care(ie bathing, HOB down)
44	medadm_0	Num	8		Medical Administration
45	medadmc_0	Char	22	$22.	Medical Administration
46	feedoffoth_0	Num	8		Other reason feed turned off:
47	feedoffothc_0	Char	5	$5.	Other reason feed turned off:
48	feedoffreas_0	Char	255	$255.	Other reason feed turned off: Reason
49	giintoleden_0	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
50	giintoledenc_0	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
51	diarrhea_0	Num	8		Diarrhea
52	diarrheac_0	Char	8	$8.	Diarrhea
53	vomiting_0	Num	8		Vomiting
54	vomitingc_0	Char	8	$8.	Vomiting
55	aspiration_0	Num	8		Aspiration
56	aspirationc_0	Char	10	$10.	Aspiration
57	elevresid	Num	8		Elevated Residuals
58	elevresidc	Char	18	$18.	Elevated Residuals
59	regurg_0	Num	8		Regurgitation
60	regurgc_0	Char	13	$13.	Regurgitation
61	constipation	Num	8		Constipation
62	constipationc	Char	12	$12.	Constipation
63	cramping	Num	8		Abdominal distention or cramping
64	crampingc	Char	32	$32.	Abdominal distention or cramping
65	feedsite_0	Num	8		Insertion site of feeding tube:
66	feedsitec_0	Char	12	$12.	Insertion site of feeding tube:
67	tubesize_0	Num	8		Feeding tube size
68	tubesizec_0	Char	10	$10.	Feeding tube size
69	distalpos_0	Num	8		Distal position of feeding tube
70	distalposc_0	Char	12	$12.	Distal position of feeding tube
71	distalconf_0	Num	8		Was distal position confirmed during this 24 hour period?
72	distalconfc_0	Char	19	$19.	Was distal position confirmed during this 24 hour period?
73	distalhow_0	Num	8		How distal position confirmed

Num	Variable	Type	Len	Format	Label
74	distalhowc_0	Char	15	$15.	How distal position confirmed
75	distaloth_0	Char	40	$40.	How distal position confirmed: other
76	fullcal_0	Num	8		Was rate advanced to full-calorie rate during this calendar day?
77	fullcalc_0	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
78	fullcaltm_0	Num	8	TIMEAMPM.	time full calorie reached
79	pronevent_0	Num	8		Prone ventilation between randomization and midnight?
80	proneventc_0	Char	3	$3.	Prone ventilation between randomization and midnight?
81	propratex	Char	64	$64.	Propofol infusion rate at time of randomization (Not Done)
82	feedgrpx	Char	64	$64.	Enteral Feeding Group (Not Done)
83	prebasefeedx	Char	64	$64.	In the 12 hours prior to enrollment, did patient receive any enteral feedings? (Not Done)
84	feedinitdtmx	Char	64	$64.	Date and time of initiation of protocol specified enteral feeds (Not Done)
85	recfeedx_0	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
86	goalratex_0	Char	64	$64.	Tube feeding goal rate (Not Done)
87	goalchangex_0	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
88	brand1x_0	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period (Not Done)
89	feedhrsx_0	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
90	feedoffX	Char	64	$64.	Feeds turned off for > 30 minutes within 24 hour period (Not Done)
91	giintoledenx_0	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
92	feedsiteX	Char	64	$64.	Insertion site of feeding tube: (Not Done)
93	tubesizeX	Char	64	$64.	Feeding tube size (Not Done)
94	distalposX	Char	64	$64.	Distal position of feeding tube (Not Done)
95	distalconfx_0	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
96	fullcalx_0	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
97	surg_1	Num	8		Surgery
98	surgc_1	Char	7	$7.	Surgery
99	residual_1	Num	8		Elevated Residuals
100	residualc_1	Char	18	$18.	Elevated Residuals
101	const_1	Num	8		Constipation
102	constc_1	Char	12	$12.	Constipation
103	cramp_1	Num	8		Abdominal distention or cramping
104	crampc_1	Char	32	$32.	Abdominal distention or cramping
105	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)
106	feedsitex_1	Char	64	$64.	Insertion site of feeding tube (Not Done)
107	tubesizex_1	Char	64	$64.	Feeding tube size (Not Done)
108	distalposx_1	Char	64	$64.	Distal position of feeding tube (Not Done)
109	proneventx_1	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)

Num	Variable	Type	Len	Format	Label
110	recfeed_1	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
111	recfeedc_1	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
112	goalrate_1	Num	8		Tube feeding goal rate
113	goalchange_1	Num	8		Did the goal rate change during the 24 hour period?
114	goalchangec_1	Char	19	$19.	Did the goal rate change during the 24 hour period?
115	newgoal_1	Num	8		Yes, new goal rate
116	brand1_1	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
117	brand1vol_1	Num	8		Total volume of enteral formula 1 infused for 24 hour period
118	brand2_1	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
119	brand2vol_1	Num	8		Total volume of enteral formula 2 infused for 24 hour period
120	feedhrs_1	Num	8		Number of hours enteral tube feeds on for this 24 hour period
121	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?
122	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?
123	planext_1	Num	8		Planned Extubation
124	planextc_1	Char	18	$18.	Planned Extubation
125	giint_1	Num	8		GI Intolerance
126	giintc_1	Char	14	$14.	GI Intolerance
127	invbside_1	Num	8		Invasive bedside procedure
128	invbsidec_1	Char	26	$26.	Invasive bedside procedure
129	leftfloor_1	Num	8		Patient left the floor
130	leftfloorc_1	Char	22	$22.	Patient left the floor
131	care_1	Num	8		Nursing Care (i.e. bathing, HOB down)
132	carec_1	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
133	medadm_1	Num	8		Medical Administration
134	medadmc_1	Char	22	$22.	Medical Administration
135	feedoffoth_1	Num	8		Other reason feed turned off:
136	feedoffothc_1	Char	5	$5.	Other reason feed turned off:
137	feedoffreas_1	Char	255	$255.	Other reason feed turned off: Reason
138	giintoleden_1	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
139	giintoledenc_1	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
140	diarrhea_1	Num	8		Diarrhea
141	diarrheac_1	Char	8	$8.	Diarrhea
142	vomiting_1	Num	8		Vomiting
143	vomitingc_1	Char	8	$8.	Vomiting
144	aspiration_1	Num	8		Aspiration
145	aspirationc_1	Char	10	$10.	Aspiration

Num	Variable	Type	Len	Format	Label
146	regurg_1	Num	8		Regurgitation
147	regurgc_1	Char	13	$13.	Regurgitation
148	feedsite_1	Num	8		Insertion site of feeding tube
149	feedsitec_1	Char	12	$12.	Insertion site of feeding tube
150	tubesize_1	Num	8		Feeding tube size
151	tubesizec_1	Char	10	$10.	Feeding tube size
152	distalpos_1	Num	8		Distal position of feeding tube
153	distalposc_1	Char	12	$12.	Distal position of feeding tube
154	distalconf_1	Num	8		Was distal position confirmed during this 24 hour period?
155	distalconfc_1	Char	19	$19.	Was distal position confirmed during this 24 hour period?
156	distalhow_1	Num	8		Yes, how confirmed:
157	distalhowc_1	Char	15	$15.	Yes, how confirmed:
158	distaloth_1	Char	40	$40.	Yes, how confirmed: Other
159	fullcal_1	Num	8		Was rate advanced to full-calorie rate during this calendar day?
160	fullcalc_1	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
161	fullcaltm_1	Num	8	TIMEAMPM.	Yes, time full calorie reached:
162	pronevent_1	Num	8		Prone ventilation this 24 hour period?
163	proneventc_1	Char	3	$3.	Prone ventilation this 24 hour period?
164	recfeedx_1	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
165	goalratex_1	Char	64	$64.	Tube feeding goal rate (Not Done)
166	goalchangex_1	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
167	brand1x_1	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
168	feedhrsx_1	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
169	giintoledenx_1	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
170	distalconfx_1	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
171	fullcalx_1	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
172	surg_2	Num	8		Surgery
173	surgc_2	Char	7	$7.	Surgery
174	residual_2	Num	8		Elevated Residuals
175	residualc_2	Char	18	$18.	Elevated Residuals
176	const_2	Num	8		Constipation
177	constc_2	Char	12	$12.	Constipation
178	cramp_2	Num	8		Abdominal distention or cramping
179	crampc_2	Char	32	$32.	Abdominal distention or cramping
180	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)
181	feedsitex_2	Char	64	$64.	Insertion site of feeding tube (Not Done)
182	tubesizex_2	Char	64	$64.	Feeding tube size (Not Done)

Num	Variable	Type	Len	Format	Label
183	distalposx_2	Char	64	$64.	Distal position of feeding tube (Not Done)
184	proneventx_2	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
185	recfeed_2	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
186	recfeedc_2	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
187	goalrate_2	Num	8		Tube feeding goal rate
188	goalchange_2	Num	8		Did the goal rate change during the 24 hour period?
189	goalchangec_2	Char	19	$19.	Did the goal rate change during the 24 hour period?
190	newgoal_2	Num	8		Yes, new goal rate
191	brand1_2	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
192	brand1vol_2	Num	8		Total volume of enteral formula 1 infused for 24 hour period
193	brand2_2	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
194	brand2vol_2	Num	8		Total volume of enteral formula 2 infused for 24 hour period
195	feedhrs_2	Num	8		Number of hours enteral tube feeds on for this 24 hour period
196	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?
197	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?
198	planext_2	Num	8		Planned Extubation
199	planextc_2	Char	18	$18.	Planned Extubation
200	giint_2	Num	8		GI Intolerance
201	giintc_2	Char	14	$14.	GI Intolerance
202	invbside_2	Num	8		Invasive bedside procedure
203	invbsidec_2	Char	26	$26.	Invasive bedside procedure
204	leftfloor_2	Num	8		Patient left the floor
205	leftfloorc_2	Char	22	$22.	Patient left the floor
206	care_2	Num	8		Nursing Care (i.e. bathing, HOB down)
207	carec_2	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
208	medadm_2	Num	8		Medical Administration
209	medadmc_2	Char	22	$22.	Medical Administration
210	feedoffoth_2	Num	8		Other reason feed turned off:
211	feedoffothc_2	Char	5	$5.	Other reason feed turned off:
212	feedoffreas_2	Char	255	$255.	Other reason feed turned off: Reason
213	giintoleden_2	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
214	giintoledenc_2	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
215	diarrhea_2	Num	8		Diarrhea
216	diarrheac_2	Char	8	$8.	Diarrhea
217	vomiting_2	Num	8		Vomiting
218	vomitingc_2	Char	8	$8.	Vomiting

Num	Variable	Type	Len	Format	Label
219	aspiration_2	Num	8		Aspiration
220	aspirationc_2	Char	10	$10.	Aspiration
221	regurg_2	Num	8		Regurgitation
222	regurgc_2	Char	13	$13.	Regurgitation
223	feedsite_2	Num	8		Insertion site of feeding tube
224	feedsitec_2	Char	12	$12.	Insertion site of feeding tube
225	tubesize_2	Num	8		Feeding tube size
226	tubesizec_2	Char	10	$10.	Feeding tube size
227	distalpos_2	Num	8		Distal position of feeding tube
228	distalposc_2	Char	12	$12.	Distal position of feeding tube
229	distalconf_2	Num	8		Was distal position confirmed during this 24 hour period?
230	distalconfc_2	Char	19	$19.	Was distal position confirmed during this 24 hour period?
231	distalhow_2	Num	8		Yes, how confirmed:
232	distalhowc_2	Char	15	$15.	Yes, how confirmed:
233	distaloth_2	Char	40	$40.	Yes, how confirmed: Other
234	fullcal_2	Num	8		Was rate advanced to full-calorie rate during this calendar day?
235	fullcalc_2	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
236	fullcaltm_2	Num	8	TIMEAMPM.	Yes, time full calorie reached:
237	pronevent_2	Num	8		Prone ventilation this 24 hour period?
238	proneventc_2	Char	3	$3.	Prone ventilation this 24 hour period?
239	recfeedx_2	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
240	goalratex_2	Char	64	$64.	Tube feeding goal rate (Not Done)
241	goalchangex_2	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
242	brand1x_2	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
243	feedhrsx_2	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
244	giintoledenx_2	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
245	distalconfx_2	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
246	fullcalx_2	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
247	surg_3	Num	8		Surgery
248	surgc_3	Char	7	$7.	Surgery
249	residual_3	Num	8		Elevated Residuals
250	residualc_3	Char	18	$18.	Elevated Residuals
251	const_3	Num	8		Constipation
252	constc_3	Char	12	$12.	Constipation
253	cramp_3	Num	8		Abdominal distention or cramping
254	crampc_3	Char	32	$32.	Abdominal distention or cramping
255	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)

Num	Variable	Type	Len	Format	Label
256	feedsitex_3	Char	64	$64.	Insertion site of feeding tube (Not Done)
257	tubesizex_3	Char	64	$64.	Feeding tube size (Not Done)
258	distalposx_3	Char	64	$64.	Distal position of feeding tube (Not Done)
259	proneventx_3	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
260	recfeed_3	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
261	recfeedc_3	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
262	goalrate_3	Num	8		Tube feeding goal rate
263	goalchange_3	Num	8		Did the goal rate change during the 24 hour period?
264	goalchangec_3	Char	19	$19.	Did the goal rate change during the 24 hour period?
265	newgoal_3	Num	8		Yes, new goal rate
266	brand1_3	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
267	brand1vol_3	Num	8		Total volume of enteral formula 1 infused for 24 hour period
268	brand2_3	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
269	brand2vol_3	Num	8		Total volume of enteral formula 2 infused for 24 hour period
270	feedhrs_3	Num	8		Number of hours enteral tube feeds on for this 24 hour period
271	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?
272	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?
273	planext_3	Num	8		Planned Extubation
274	planextc_3	Char	18	$18.	Planned Extubation
275	giint_3	Num	8		GI Intolerance
276	giintc_3	Char	14	$14.	GI Intolerance
277	invbside_3	Num	8		Invasive bedside procedure
278	invbsidec_3	Char	26	$26.	Invasive bedside procedure
279	leftfloor_3	Num	8		Patient left the floor
280	leftfloorc_3	Char	22	$22.	Patient left the floor
281	care_3	Num	8		Nursing Care (i.e. bathing, HOB down)
282	carec_3	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
283	medadm_3	Num	8		Medical Administration
284	medadmc_3	Char	22	$22.	Medical Administration
285	feedoffoth_3	Num	8		Other reason feed turned off:
286	feedoffothc_3	Char	5	$5.	Other reason feed turned off:
287	feedoffreas_3	Char	255	$255.	Other reason feed turned off: Reason
288	giintoleden_3	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
289	giintoledenc_3	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
290	diarrhea_3	Num	8		Diarrhea
291	diarrheac_3	Char	8	$8.	Diarrhea

Num	Variable	Type	Len	Format	Label
292	vomiting_3	Num	8		Vomiting
293	vomitingc_3	Char	8	$8.	Vomiting
294	aspiration_3	Num	8		Aspiration
295	aspirationc_3	Char	10	$10.	Aspiration
296	regurg_3	Num	8		Regurgitation
297	regurgc_3	Char	13	$13.	Regurgitation
298	feedsite_3	Num	8		Insertion site of feeding tube
299	feedsitec_3	Char	12	$12.	Insertion site of feeding tube
300	tubesize_3	Num	8		Feeding tube size
301	tubesizec_3	Char	10	$10.	Feeding tube size
302	distalpos_3	Num	8		Distal position of feeding tube
303	distalposc_3	Char	12	$12.	Distal position of feeding tube
304	distalconf_3	Num	8		Was distal position confirmed during this 24 hour period?
305	distalconfc_3	Char	19	$19.	Was distal position confirmed during this 24 hour period?
306	distalhow_3	Num	8		Yes, how confirmed:
307	distalhowc_3	Char	15	$15.	Yes, how confirmed:
308	distaloth_3	Char	40	$40.	Yes, how confirmed: Other
309	fullcal_3	Num	8		Was rate advanced to full-calorie rate during this calendar day?
310	fullcalc_3	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
311	fullcaltm_3	Num	8	TIMEAMPM.	Yes, time full calorie reached:
312	pronevent_3	Num	8		Prone ventilation this 24 hour period?
313	proneventc_3	Char	3	$3.	Prone ventilation this 24 hour period?
314	recfeedx_3	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
315	goalratex_3	Char	64	$64.	Tube feeding goal rate (Not Done)
316	goalchangex_3	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
317	brand1x_3	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
318	feedhrsx_3	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
319	giintoledenx_3	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
320	distalconfx_3	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
321	fullcalx_3	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
322	surg_4	Num	8		Surgery
323	surgc_4	Char	7	$7.	Surgery
324	residual_4	Num	8		Elevated Residuals
325	residualc_4	Char	18	$18.	Elevated Residuals
326	const_4	Num	8		Constipation
327	constc_4	Char	12	$12.	Constipation
328	cramp_4	Num	8		Abdominal distention or cramping

Num	Variable	Type	Len	Format	Label
329	crampc_4	Char	32	$32.	Abdominal distention or cramping
330	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)
331	feedsitex_4	Char	64	$64.	Insertion site of feeding tube (Not Done)
332	tubesizex_4	Char	64	$64.	Feeding tube size (Not Done)
333	distalposx_4	Char	64	$64.	Distal position of feeding tube (Not Done)
334	proneventx_4	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
335	recfeed_4	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
336	recfeedc_4	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
337	goalrate_4	Num	8		Tube feeding goal rate
338	goalchange_4	Num	8		Did the goal rate change during the 24 hour period?
339	goalchangec_4	Char	19	$19.	Did the goal rate change during the 24 hour period?
340	newgoal_4	Num	8		Yes, new goal rate
341	brand1_4	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
342	brand1vol_4	Num	8		Total volume of enteral formula 1 infused for 24 hour period
343	brand2_4	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
344	brand2vol_4	Num	8		Total volume of enteral formula 2 infused for 24 hour period
345	feedhrs_4	Num	8		Number of hours enteral tube feeds on for this 24 hour period
346	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?
347	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?
348	planext_4	Num	8		Planned Extubation
349	planextc_4	Char	18	$18.	Planned Extubation
350	giint_4	Num	8		GI Intolerance
351	giintc_4	Char	14	$14.	GI Intolerance
352	invbside_4	Num	8		Invasive bedside procedure
353	invbsidec_4	Char	26	$26.	Invasive bedside procedure
354	leftfloor_4	Num	8		Patient left the floor
355	leftfloorc_4	Char	22	$22.	Patient left the floor
356	care_4	Num	8		Nursing Care (i.e. bathing, HOB down)
357	carec_4	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
358	medadm_4	Num	8		Medical Administration
359	medadmc_4	Char	22	$22.	Medical Administration
360	feedoffoth_4	Num	8		Other reason feed turned off:
361	feedoffothc_4	Char	5	$5.	Other reason feed turned off:
362	feedoffreas_4	Char	255	$255.	Other reason feed turned off: Reason
363	giintoleden_4	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
364	giintoledenc_4	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
365	diarrhea_4	Num	8		Diarrhea
366	diarrheac_4	Char	8	$8.	Diarrhea
367	vomiting_4	Num	8		Vomiting
368	vomitingc_4	Char	8	$8.	Vomiting
369	aspiration_4	Num	8		Aspiration
370	aspirationc_4	Char	10	$10.	Aspiration
371	regurg_4	Num	8		Regurgitation
372	regurgc_4	Char	13	$13.	Regurgitation
373	feedsite_4	Num	8		Insertion site of feeding tube
374	feedsitec_4	Char	12	$12.	Insertion site of feeding tube
375	tubesize_4	Num	8		Feeding tube size
376	tubesizec_4	Char	10	$10.	Feeding tube size
377	distalpos_4	Num	8		Distal position of feeding tube
378	distalposc_4	Char	12	$12.	Distal position of feeding tube
379	distalconf_4	Num	8		Was distal position confirmed during this 24 hour period?
380	distalconfc_4	Char	19	$19.	Was distal position confirmed during this 24 hour period?
381	distalhow_4	Num	8		Yes, how confirmed:
382	distalhowc_4	Char	15	$15.	Yes, how confirmed:
383	distaloth_4	Char	40	$40.	Yes, how confirmed: Other
384	fullcal_4	Num	8		Was rate advanced to full-calorie rate during this calendar day?
385	fullcalc_4	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
386	fullcaltm_4	Num	8	TIMEAMPM.	Yes, time full calorie reached:
387	pronevent_4	Num	8		Prone ventilation this 24 hour period?
388	proneventc_4	Char	3	$3.	Prone ventilation this 24 hour period?
389	recfeedx_4	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
390	goalratex_4	Char	64	$64.	Tube feeding goal rate (Not Done)
391	goalchangex_4	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
392	brand1x_4	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
393	feedhrsx_4	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
394	giintoledenx_4	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
395	distalconfx_4	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
396	fullcalx_4	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
397	surg_5	Num	8		Surgery
398	surgc_5	Char	7	$7.	Surgery
399	residual_5	Num	8		Elevated Residuals
400	residualc_5	Char	18	$18.	Elevated Residuals

Num	Variable	Type	Len	Format	Label
401	const_5	Num	8		Constipation
402	constc_5	Char	12	$12.	Constipation
403	cramp_5	Num	8		Abdominal distention or cramping
404	crampc_5	Char	32	$32.	Abdominal distention or cramping
405	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)
406	feedsitex_5	Char	64	$64.	Insertion site of feeding tube (Not Done)
407	tubesizex_5	Char	64	$64.	Feeding tube size (Not Done)
408	distalposx_5	Char	64	$64.	Distal position of feeding tube (Not Done)
409	proneventx_5	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
410	recfeed_5	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
411	recfeedc_5	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
412	goalrate_5	Num	8		Tube feeding goal rate
413	goalchange_5	Num	8		Did the goal rate change during the 24 hour period?
414	goalchangec_5	Char	19	$19.	Did the goal rate change during the 24 hour period?
415	newgoal_5	Num	8		Yes, new goal rate
416	brand1_5	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
417	brand1vol_5	Num	8		Total volume of enteral formula 1 infused for 24 hour period
418	brand2_5	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
419	brand2vol_5	Num	8		Total volume of enteral formula 2 infused for 24 hour period
420	feedhrs_5	Num	8		Number of hours enteral tube feeds on for this 24 hour period
421	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?
422	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?
423	planext_5	Num	8		Planned Extubation
424	planextc_5	Char	18	$18.	Planned Extubation
425	giint_5	Num	8		GI Intolerance
426	giintc_5	Char	14	$14.	GI Intolerance
427	invbside_5	Num	8		Invasive bedside procedure
428	invbsidec_5	Char	26	$26.	Invasive bedside procedure
429	leftfloor_5	Num	8		Patient left the floor
430	leftfloorc_5	Char	22	$22.	Patient left the floor
431	care_5	Num	8		Nursing Care (i.e. bathing, HOB down)
432	carec_5	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
433	medadm_5	Num	8		Medical Administration
434	medadmc_5	Char	22	$22.	Medical Administration
435	feedoffoth_5	Num	8		Other reason feed turned off:
436	feedoffothc_5	Char	5	$5.	Other reason feed turned off:
437	feedoffreas_5	Char	255	$255.	Other reason feed turned off: Reason

Num	Variable	Type	Len	Format	Label
438	giintoleden_5	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
439	giintoledenc_5	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
440	diarrhea_5	Num	8		Diarrhea
441	diarrheac_5	Char	8	$8.	Diarrhea
442	vomiting_5	Num	8		Vomiting
443	vomitingc_5	Char	8	$8.	Vomiting
444	aspiration_5	Num	8		Aspiration
445	aspirationc_5	Char	10	$10.	Aspiration
446	regurg_5	Num	8		Regurgitation
447	regurgc_5	Char	13	$13.	Regurgitation
448	feedsite_5	Num	8		Insertion site of feeding tube
449	feedsitec_5	Char	12	$12.	Insertion site of feeding tube
450	tubesize_5	Num	8		Feeding tube size
451	tubesizec_5	Char	10	$10.	Feeding tube size
452	distalpos_5	Num	8		Distal position of feeding tube
453	distalposc_5	Char	12	$12.	Distal position of feeding tube
454	distalconf_5	Num	8		Was distal position confirmed during this 24 hour period?
455	distalconfc_5	Char	19	$19.	Was distal position confirmed during this 24 hour period?
456	distalhow_5	Num	8		Yes, how confirmed:
457	distalhowc_5	Char	15	$15.	Yes, how confirmed:
458	distaloth_5	Char	40	$40.	Yes, how confirmed: Other
459	fullcal_5	Num	8		Was rate advanced to full-calorie rate during this calendar day?
460	fullcalc_5	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
461	fullcaltm_5	Num	8	TIMEAMPM.	Yes, time full calorie reached:
462	pronevent_5	Num	8		Prone ventilation this 24 hour period?
463	proneventc_5	Char	3	$3.	Prone ventilation this 24 hour period?
464	recfeedx_5	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
465	goalratex_5	Char	64	$64.	Tube feeding goal rate (Not Done)
466	goalchangex_5	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
467	brand1x_5	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
468	feedhrsx_5	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
469	giintoledenx_5	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
470	distalconfx_5	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
471	fullcalx_5	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
472	surg_6	Num	8		Surgery
473	surgc_6	Char	7	$7.	Surgery

Num	Variable	Type	Len	Format	Label
474	residual_6	Num	8		Elevated Residuals
475	residualc_6	Char	18	$18.	Elevated Residuals
476	const_6	Num	8		Constipation
477	constc_6	Char	12	$12.	Constipation
478	cramp_6	Num	8		Abdominal distention or cramping
479	crampc_6	Char	32	$32.	Abdominal distention or cramping
480	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)
481	feedsitex_6	Char	64	$64.	Insertion site of feeding tube (Not Done)
482	tubesizex_6	Char	64	$64.	Feeding tube size (Not Done)
483	distalposx_6	Char	64	$64.	Distal position of feeding tube (Not Done)
484	proneventx_6	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
485	recfeed_6	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
486	recfeedc_6	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
487	goalrate_6	Num	8		Tube feeding goal rate
488	goalchange_6	Num	8		Did the goal rate change during the 24 hour period?
489	goalchangec_6	Char	19	$19.	Did the goal rate change during the 24 hour period?
490	newgoal_6	Num	8		Yes, new goal rate
491	brand1_6	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
492	brand1vol_6	Num	8		Total volume of enteral formula 1 infused for 24 hour period
493	brand2_6	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
494	brand2vol_6	Num	8		Total volume of enteral formula 2 infused for 24 hour period
495	feedhrs_6	Num	8		Number of hours enteral tube feeds on for this 24 hour period
496	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?
497	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?
498	planext_6	Num	8		Planned Extubation
499	planextc_6	Char	18	$18.	Planned Extubation
500	giint_6	Num	8		GI Intolerance
501	giintc_6	Char	14	$14.	GI Intolerance
502	invbside_6	Num	8		Invasive bedside procedure
503	invbsidec_6	Char	26	$26.	Invasive bedside procedure
504	leftfloor_6	Num	8		Patient left the floor
505	leftfloorc_6	Char	22	$22.	Patient left the floor
506	care_6	Num	8		Nursing Care (i.e. bathing, HOB down)
507	carec_6	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
508	medadm_6	Num	8		Medical Administration
509	medadmc_6	Char	22	$22.	Medical Administration
510	feedoffoth_6	Num	8		Other reason feed turned off:

Num	Variable	Type	Len	Format	Label
511	feedoffothc_6	Char	5	$5.	Other reason feed turned off:
512	feedoffreas_6	Char	255	$255.	Other reason feed turned off: Reason
513	giintoleden_6	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
514	giintoledenc_6	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
515	diarrhea_6	Num	8		Diarrhea
516	diarrheac_6	Char	8	$8.	Diarrhea
517	vomiting_6	Num	8		Vomiting
518	vomitingc_6	Char	8	$8.	Vomiting
519	aspiration_6	Num	8		Aspiration
520	aspirationc_6	Char	10	$10.	Aspiration
521	regurg_6	Num	8		Regurgitation
522	regurgc_6	Char	13	$13.	Regurgitation
523	feedsite_6	Num	8		Insertion site of feeding tube
524	feedsitec_6	Char	12	$12.	Insertion site of feeding tube
525	tubesize_6	Num	8		Feeding tube size
526	tubesizec_6	Char	10	$10.	Feeding tube size
527	distalpos_6	Num	8		Distal position of feeding tube
528	distalposc_6	Char	12	$12.	Distal position of feeding tube
529	distalconf_6	Num	8		Was distal position confirmed during this 24 hour period?
530	distalconfc_6	Char	19	$19.	Was distal position confirmed during this 24 hour period?
531	distalhow_6	Num	8		Yes, how confirmed:
532	distalhowc_6	Char	15	$15.	Yes, how confirmed:
533	distaloth_6	Char	40	$40.	Yes, how confirmed: Other
534	fullcal_6	Num	8		Was rate advanced to full-calorie rate during this calendar day?
535	fullcalc_6	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
536	fullcaltm_6	Num	8	TIMEAMPM.	Yes, time full calorie reached:
537	pronevent_6	Num	8		Prone ventilation this 24 hour period?
538	proneventc_6	Char	3	$3.	Prone ventilation this 24 hour period?
539	recfeedx_6	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
540	goalratex_6	Char	64	$64.	Tube feeding goal rate (Not Done)
541	goalchangex_6	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
542	brand1x_6	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
543	feedhrsx_6	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
544	giintoledenx_6	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
545	distalconfx_6	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
546	fullcalx_6	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)

Num	Variable	Type	Len	Format	Label
547	surg_7	Num	8		Surgery
548	surgc_7	Char	7	$7.	Surgery
549	residual_7	Num	8		Elevated Residuals
550	residualc_7	Char	18	$18.	Elevated Residuals
551	const_7	Num	8		Constipation
552	constc_7	Char	12	$12.	Constipation
553	cramp_7	Num	8		Abdominal distention or cramping
554	crampc_7	Char	32	$32.	Abdominal distention or cramping
555	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)
556	feedsitex_7	Char	64	$64.	Insertion site of feeding tube (Not Done)
557	tubesizex_7	Char	64	$64.	Feeding tube size (Not Done)
558	distalposx_7	Char	64	$64.	Distal position of feeding tube (Not Done)
559	proneventx_7	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
560	recfeed_7	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
561	recfeedc_7	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
562	goalrate_7	Num	8		Tube feeding goal rate
563	goalchange_7	Num	8		Did the goal rate change during the 24 hour period?
564	goalchangec_7	Char	19	$19.	Did the goal rate change during the 24 hour period?
565	newgoal_7	Num	8		Yes, new goal rate
566	brand1_7	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
567	brand1vol_7	Num	8		Total volume of enteral formula 1 infused for 24 hour period
568	brand2_7	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
569	brand2vol_7	Num	8		Total volume of enteral formula 2 infused for 24 hour period
570	feedhrs_7	Num	8		Number of hours enteral tube feeds on for this 24 hour period
571	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?
572	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?
573	planext_7	Num	8		Planned Extubation
574	planextc_7	Char	18	$18.	Planned Extubation
575	giint_7	Num	8		GI Intolerance
576	giintc_7	Char	14	$14.	GI Intolerance
577	invbside_7	Num	8		Invasive bedside procedure
578	invbsidec_7	Char	26	$26.	Invasive bedside procedure
579	leftfloor_7	Num	8		Patient left the floor
580	leftfloorc_7	Char	22	$22.	Patient left the floor
581	care_7	Num	8		Nursing Care (i.e. bathing, HOB down)
582	carec_7	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
583	medadm_7	Num	8		Medical Administration

Num	Variable	Type	Len	Format	Label
584	medadmc_7	Char	22	$22.	Medical Administration
585	feedoffoth_7	Num	8		Other reason feed turned off:
586	feedoffothc_7	Char	5	$5.	Other reason feed turned off:
587	feedoffreas_7	Char	255	$255.	Other reason feed turned off: Reason
588	giintoleden_7	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
589	giintoledenc_7	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
590	diarrhea_7	Num	8		Diarrhea
591	diarrheac_7	Char	8	$8.	Diarrhea
592	vomiting_7	Num	8		Vomiting
593	vomitingc_7	Char	8	$8.	Vomiting
594	aspiration_7	Num	8		Aspiration
595	aspirationc_7	Char	10	$10.	Aspiration
596	regurg_7	Num	8		Regurgitation
597	regurgc_7	Char	13	$13.	Regurgitation
598	feedsite_7	Num	8		Insertion site of feeding tube
599	feedsitec_7	Char	12	$12.	Insertion site of feeding tube
600	tubesize_7	Num	8		Feeding tube size
601	tubesizec_7	Char	10	$10.	Feeding tube size
602	distalpos_7	Num	8		Distal position of feeding tube
603	distalposc_7	Char	12	$12.	Distal position of feeding tube
604	distalconf_7	Num	8		Was distal position confirmed during this 24 hour period?
605	distalconfc_7	Char	19	$19.	Was distal position confirmed during this 24 hour period?
606	distalhow_7	Num	8		Yes, how confirmed:
607	distalhowc_7	Char	15	$15.	Yes, how confirmed:
608	distaloth_7	Char	40	$40.	Yes, how confirmed: Other
609	fullcal_7	Num	8		Was rate advanced to full-calorie rate during this calendar day?
610	fullcalc_7	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
611	fullcaltm_7	Num	8	TIMEAMPM.	Yes, time full calorie reached:
612	pronevent_7	Num	8		Prone ventilation this 24 hour period?
613	proneventc_7	Char	3	$3.	Prone ventilation this 24 hour period?
614	recfeedx_7	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
615	goalratex_7	Char	64	$64.	Tube feeding goal rate (Not Done)
616	goalchangex_7	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
617	brand1x_7	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
618	feedhrsx_7	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
619	giintoledenx_7	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)

Num	Variable	Type	Len	Format	Label
620	distalconfx_7	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
621	fullcalx_7	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
622	surg_8	Num	8		Surgery
623	surgc_8	Char	7	$7.	Surgery
624	residual_8	Num	8		Elevated Residuals
625	residualc_8	Char	18	$18.	Elevated Residuals
626	const_8	Num	8		Constipation
627	constc_8	Char	12	$12.	Constipation
628	cramp_8	Num	8		Abdominal distention or cramping
629	crampc_8	Char	32	$32.	Abdominal distention or cramping
630	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)
631	feedsitex_8	Char	64	$64.	Insertion site of feeding tube (Not Done)
632	tubesizex_8	Char	64	$64.	Feeding tube size (Not Done)
633	distalposx_8	Char	64	$64.	Distal position of feeding tube (Not Done)
634	proneventx_8	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
635	recfeed_8	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
636	recfeedc_8	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
637	goalrate_8	Num	8		Tube feeding goal rate
638	goalchange_8	Num	8		Did the goal rate change during the 24 hour period?
639	goalchangec_8	Char	19	$19.	Did the goal rate change during the 24 hour period?
640	newgoal_8	Num	8		Yes, new goal rate
641	brand1_8	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
642	brand1vol_8	Num	8		Total volume of enteral formula 1 infused for 24 hour period
643	brand2_8	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
644	brand2vol_8	Num	8		Total volume of enteral formula 2 infused for 24 hour period
645	feedhrs_8	Num	8		Number of hours enteral tube feeds on for this 24 hour period
646	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?
647	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?
648	planext_8	Num	8		Planned Extubation
649	planextc_8	Char	18	$18.	Planned Extubation
650	giint_8	Num	8		GI Intolerance
651	giintc_8	Char	14	$14.	GI Intolerance
652	invbside_8	Num	8		Invasive bedside procedure
653	invbsidec_8	Char	26	$26.	Invasive bedside procedure
654	leftfloor_8	Num	8		Patient left the floor
655	leftfloorc_8	Char	22	$22.	Patient left the floor
656	care_8	Num	8		Nursing Care (i.e. bathing, HOB down)

Num	Variable	Type	Len	Format	Label
657	carec_8	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
658	medadm_8	Num	8		Medical Administration
659	medadmc_8	Char	22	$22.	Medical Administration
660	feedoffoth_8	Num	8		Other reason feed turned off:
661	feedoffothc_8	Char	5	$5.	Other reason feed turned off:
662	feedoffreas_8	Char	255	$255.	Other reason feed turned off: Reason
663	giintoleden_8	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
664	giintoledenc_8	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
665	diarrhea_8	Num	8		Diarrhea
666	diarrheac_8	Char	8	$8.	Diarrhea
667	vomiting_8	Num	8		Vomiting
668	vomitingc_8	Char	8	$8.	Vomiting
669	aspiration_8	Num	8		Aspiration
670	aspirationc_8	Char	10	$10.	Aspiration
671	regurg_8	Num	8		Regurgitation
672	regurgc_8	Char	13	$13.	Regurgitation
673	feedsite_8	Num	8		Insertion site of feeding tube
674	feedsitec_8	Char	12	$12.	Insertion site of feeding tube
675	tubesize_8	Num	8		Feeding tube size
676	tubesizec_8	Char	10	$10.	Feeding tube size
677	distalpos_8	Num	8		Distal position of feeding tube
678	distalposc_8	Char	12	$12.	Distal position of feeding tube
679	distalconf_8	Num	8		Was distal position confirmed during this 24 hour period?
680	distalconfc_8	Char	19	$19.	Was distal position confirmed during this 24 hour period?
681	distalhow_8	Num	8		Yes, how confirmed:
682	distalhowc_8	Char	15	$15.	Yes, how confirmed:
683	distaloth_8	Char	40	$40.	Yes, how confirmed: Other
684	fullcal_8	Num	8		Was rate advanced to full-calorie rate during this calendar day?
685	fullcalc_8	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
686	fullcaltm_8	Num	8	TIMEAMPM.	Yes, time full calorie reached:
687	pronevent_8	Num	8		Prone ventilation this 24 hour period?
688	proneventc_8	Char	3	$3.	Prone ventilation this 24 hour period?
689	recfeedx_8	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
690	goalratex_8	Char	64	$64.	Tube feeding goal rate (Not Done)
691	goalchangex_8	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
692	brand1x_8	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
693	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
694	giintoledenx_8	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
695	distalconfx_8	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
696	fullcalx_8	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
697	surg_9	Num	8		Surgery
698	surgc_9	Char	7	$7.	Surgery
699	residual_9	Num	8		Elevated Residuals
700	residualc_9	Char	18	$18.	Elevated Residuals
701	const_9	Num	8		Constipation
702	constc_9	Char	12	$12.	Constipation
703	cramp_9	Num	8		Abdominal distention or cramping
704	crampc_9	Char	32	$32.	Abdominal distention or cramping
705	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)
706	feedsitex_9	Char	64	$64.	Insertion site of feeding tube (Not Done)
707	tubesizex_9	Char	64	$64.	Feeding tube size (Not Done)
708	distalposx_9	Char	64	$64.	Distal position of feeding tube (Not Done)
709	proneventx_9	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
710	recfeed_9	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
711	recfeedc_9	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
712	goalrate_9	Num	8		Tube feeding goal rate
713	goalchange_9	Num	8		Did the goal rate change during the 24 hour period?
714	goalchangec_9	Char	19	$19.	Did the goal rate change during the 24 hour period?
715	newgoal_9	Num	8		Yes, new goal rate
716	brand1_9	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
717	brand1vol_9	Num	8		Total volume of enteral formula 1 infused for 24 hour period
718	brand2_9	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
719	brand2vol_9	Num	8		Total volume of enteral formula 2 infused for 24 hour period
720	feedhrs_9	Num	8		Number of hours enteral tube feeds on for this 24 hour period
721	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?
722	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?
723	planext_9	Num	8		Planned Extubation
724	planextc_9	Char	18	$18.	Planned Extubation
725	giint_9	Num	8		GI Intolerance
726	giintc_9	Char	14	$14.	GI Intolerance
727	invbside_9	Num	8		Invasive bedside procedure
728	invbsidec_9	Char	26	$26.	Invasive bedside procedure
729	leftfloor_9	Num	8		Patient left the floor

Num	Variable	Type	Len	Format	Label
730	leftfloorc_9	Char	22	$22.	Patient left the floor
731	care_9	Num	8		Nursing Care (i.e. bathing, HOB down)
732	carec_9	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
733	medadm_9	Num	8		Medical Administration
734	medadmc_9	Char	22	$22.	Medical Administration
735	feedoffoth_9	Num	8		Other reason feed turned off:
736	feedoffothc_9	Char	5	$5.	Other reason feed turned off:
737	feedoffreas_9	Char	255	$255.	Other reason feed turned off: Reason
738	giintoleden_9	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
739	giintoledenc_9	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
740	diarrhea_9	Num	8		Diarrhea
741	diarrheac_9	Char	8	$8.	Diarrhea
742	vomiting_9	Num	8		Vomiting
743	vomitingc_9	Char	8	$8.	Vomiting
744	aspiration_9	Num	8		Aspiration
745	aspirationc_9	Char	10	$10.	Aspiration
746	regurg_9	Num	8		Regurgitation
747	regurgc_9	Char	13	$13.	Regurgitation
748	feedsite_9	Num	8		Insertion site of feeding tube
749	feedsitec_9	Char	12	$12.	Insertion site of feeding tube
750	tubesize_9	Num	8		Feeding tube size
751	tubesizec_9	Char	10	$10.	Feeding tube size
752	distalpos_9	Num	8		Distal position of feeding tube
753	distalposc_9	Char	12	$12.	Distal position of feeding tube
754	distalconf_9	Num	8		Was distal position confirmed during this 24 hour period?
755	distalconfc_9	Char	19	$19.	Was distal position confirmed during this 24 hour period?
756	distalhow_9	Num	8		Yes, how confirmed:
757	distalhowc_9	Char	15	$15.	Yes, how confirmed:
758	distaloth_9	Char	40	$40.	Yes, how confirmed: Other
759	fullcal_9	Num	8		Was rate advanced to full-calorie rate during this calendar day?
760	fullcalc_9	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
761	fullcaltm_9	Num	8	TIMEAMPM.	Yes, time full calorie reached:
762	pronevent_9	Num	8		Prone ventilation this 24 hour period?
763	proneventc_9	Char	3	$3.	Prone ventilation this 24 hour period?
764	recfeedx_9	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
765	goalratex_9	Char	64	$64.	Tube feeding goal rate (Not Done)
766	goalchangex_9	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)

Num	Variable	Type	Len	Format	Label
767	brand1x_9	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
768	feedhrsx_9	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
769	giintoledenx_9	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
770	distalconfx_9	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
771	fullcalx_9	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
772	surg_10	Num	8		Surgery
773	surgc_10	Char	7	$7.	Surgery
774	residual_10	Num	8		Elevated Residuals
775	residualc_10	Char	18	$18.	Elevated Residuals
776	const_10	Num	8		Constipation
777	constc_10	Char	12	$12.	Constipation
778	cramp_10	Num	8		Abdominal distention or cramping
779	crampc_10	Char	32	$32.	Abdominal distention or cramping
780	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)
781	feedsitex_10	Char	64	$64.	Insertion site of feeding tube (Not Done)
782	tubesizex_10	Char	64	$64.	Feeding tube size (Not Done)
783	distalposx_10	Char	64	$64.	Distal position of feeding tube (Not Done)
784	proneventx_10	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
785	recfeed_10	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
786	recfeedc_10	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
787	goalrate_10	Num	8		Tube feeding goal rate
788	goalchange_10	Num	8		Did the goal rate change during the 24 hour period?
789	goalchangec_10	Char	19	$19.	Did the goal rate change during the 24 hour period?
790	newgoal_10	Num	8		Yes, new goal rate
791	brand1_10	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
792	brand1vol_10	Num	8		Total volume of enteral formula 1 infused for 24 hour period
793	brand2_10	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
794	brand2vol_10	Num	8		Total volume of enteral formula 2 infused for 24 hour period
795	feedhrs_10	Num	8		Number of hours enteral tube feeds on for this 24 hour period
796	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?
797	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?
798	planext_10	Num	8		Planned Extubation
799	planextc_10	Char	18	$18.	Planned Extubation
800	giint_10	Num	8		GI Intolerance
801	giintc_10	Char	14	$14.	GI Intolerance
802	invbside_10	Num	8		Invasive bedside procedure

Num	Variable	Type	Len	Format	Label
803	invbsidec_10	Char	26	$26.	Invasive bedside procedure
804	leftfloor_10	Num	8		Patient left the floor
805	leftfloorc_10	Char	22	$22.	Patient left the floor
806	care_10	Num	8		Nursing Care (i.e. bathing, HOB down)
807	carec_10	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
808	medadm_10	Num	8		Medical Administration
809	medadmc_10	Char	22	$22.	Medical Administration
810	feedoffoth_10	Num	8		Other reason feed turned off:
811	feedoffothc_10	Char	5	$5.	Other reason feed turned off:
812	feedoffreas_10	Char	255	$255.	Other reason feed turned off: Reason
813	giintoleden_10	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
814	giintoledenc_10	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
815	diarrhea_10	Num	8		Diarrhea
816	diarrheac_10	Char	8	$8.	Diarrhea
817	vomiting_10	Num	8		Vomiting
818	vomitingc_10	Char	8	$8.	Vomiting
819	aspiration_10	Num	8		Aspiration
820	aspirationc_10	Char	10	$10.	Aspiration
821	regurg_10	Num	8		Regurgitation
822	regurgc_10	Char	13	$13.	Regurgitation
823	feedsite_10	Num	8		Insertion site of feeding tube
824	feedsitec_10	Char	12	$12.	Insertion site of feeding tube
825	tubesize_10	Num	8		Feeding tube size
826	tubesizec_10	Char	10	$10.	Feeding tube size
827	distalpos_10	Num	8		Distal position of feeding tube
828	distalposc_10	Char	12	$12.	Distal position of feeding tube
829	distalconf_10	Num	8		Was distal position confirmed during this 24 hour period?
830	distalconfc_10	Char	19	$19.	Was distal position confirmed during this 24 hour period?
831	distalhow_10	Num	8		Yes, how confirmed:
832	distalhowc_10	Char	15	$15.	Yes, how confirmed:
833	distaloth_10	Char	40	$40.	Yes, how confirmed: Other
834	fullcal_10	Num	8		Was rate advanced to full-calorie rate during this calendar day?
835	fullcalc_10	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
836	fullcaltm_10	Num	8	TIMEAMPM.	Yes, time full calorie reached:
837	pronevent_10	Num	8		Prone ventilation this 24 hour period?
838	proneventc_10	Char	3	$3.	Prone ventilation this 24 hour period?
839	recfeedx_10	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
840	goalratex_10	Char	64	$64.	Tube feeding goal rate (Not Done)
841	goalchangex_10	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
842	brand1x_10	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
843	feedhrsx_10	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
844	giintoledenx_10	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
845	distalconfx_10	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
846	fullcalx_10	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
847	surg_11	Num	8		Surgery
848	surgc_11	Char	7	$7.	Surgery
849	residual_11	Num	8		Elevated Residuals
850	residualc_11	Char	18	$18.	Elevated Residuals
851	const_11	Num	8		Constipation
852	constc_11	Char	12	$12.	Constipation
853	cramp_11	Num	8		Abdominal distention or cramping
854	crampc_11	Char	32	$32.	Abdominal distention or cramping
855	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)
856	feedsitex_11	Char	64	$64.	Insertion site of feeding tube (Not Done)
857	tubesizex_11	Char	64	$64.	Feeding tube size (Not Done)
858	distalposx_11	Char	64	$64.	Distal position of feeding tube (Not Done)
859	proneventx_11	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
860	recfeed_11	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
861	recfeedc_11	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
862	goalrate_11	Num	8		Tube feeding goal rate
863	goalchange_11	Num	8		Did the goal rate change during the 24 hour period?
864	goalchangec_11	Char	19	$19.	Did the goal rate change during the 24 hour period?
865	newgoal_11	Num	8		Yes, new goal rate
866	brand1_11	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
867	brand1vol_11	Num	8		Total volume of enteral formula 1 infused for 24 hour period
868	brand2_11	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
869	brand2vol_11	Num	8		Total volume of enteral formula 2 infused for 24 hour period
870	feedhrs_11	Num	8		Number of hours enteral tube feeds on for this 24 hour period
871	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?
872	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?
873	planext_11	Num	8		Planned Extubation
874	planextc_11	Char	18	$18.	Planned Extubation
875	giint_11	Num	8		GI Intolerance

Num	Variable	Type	Len	Format	Label
876	giintc_11	Char	14	$14.	GI Intolerance
877	invbside_11	Num	8		Invasive bedside procedure
878	invbsidec_11	Char	26	$26.	Invasive bedside procedure
879	leftfloor_11	Num	8		Patient left the floor
880	leftfloorc_11	Char	22	$22.	Patient left the floor
881	care_11	Num	8		Nursing Care (i.e. bathing, HOB down)
882	carec_11	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
883	medadm_11	Num	8		Medical Administration
884	medadmc_11	Char	22	$22.	Medical Administration
885	feedoffoth_11	Num	8		Other reason feed turned off:
886	feedoffothc_11	Char	5	$5.	Other reason feed turned off:
887	feedoffreas_11	Char	255	$255.	Other reason feed turned off: Reason
888	giintoleden_11	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
889	giintoledenc_11	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
890	diarrhea_11	Num	8		Diarrhea
891	diarrheac_11	Char	8	$8.	Diarrhea
892	vomiting_11	Num	8		Vomiting
893	vomitingc_11	Char	8	$8.	Vomiting
894	aspiration_11	Num	8		Aspiration
895	aspirationc_11	Char	10	$10.	Aspiration
896	regurg_11	Num	8		Regurgitation
897	regurgc_11	Char	13	$13.	Regurgitation
898	feedsite_11	Num	8		Insertion site of feeding tube
899	feedsitec_11	Char	12	$12.	Insertion site of feeding tube
900	tubesize_11	Num	8		Feeding tube size
901	tubesizec_11	Char	10	$10.	Feeding tube size
902	distalpos_11	Num	8		Distal position of feeding tube
903	distalposc_11	Char	12	$12.	Distal position of feeding tube
904	distalconf_11	Num	8		Was distal position confirmed during this 24 hour period?
905	distalconfc_11	Char	19	$19.	Was distal position confirmed during this 24 hour period?
906	distalhow_11	Num	8		Yes, how confirmed:
907	distalhowc_11	Char	15	$15.	Yes, how confirmed:
908	distaloth_11	Char	40	$40.	Yes, how confirmed: Other
909	fullcal_11	Num	8		Was rate advanced to full-calorie rate during this calendar day?
910	fullcalc_11	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
911	fullcaltm_11	Num	8	TIMEAMPM.	Yes, time full calorie reached:
912	pronevent_11	Num	8		Prone ventilation this 24 hour period?

Num	Variable	Type	Len	Format	Label
913	proneventc_11	Char	3	$3.	Prone ventilation this 24 hour period?
914	recfeedx_11	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
915	goalratex_11	Char	64	$64.	Tube feeding goal rate (Not Done)
916	goalchangex_11	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
917	brand1x_11	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
918	feedhrsx_11	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
919	giintoledenx_11	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
920	distalconfx_11	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
921	fullcalx_11	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
922	surg_12	Num	8		Surgery
923	surgc_12	Char	7	$7.	Surgery
924	residual_12	Num	8		Elevated Residuals
925	residualc_12	Char	18	$18.	Elevated Residuals
926	const_12	Num	8		Constipation
927	constc_12	Char	12	$12.	Constipation
928	cramp_12	Num	8		Abdominal distention or cramping
929	crampc_12	Char	32	$32.	Abdominal distention or cramping
930	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)
931	feedsitex_12	Char	64	$64.	Insertion site of feeding tube (Not Done)
932	tubesizex_12	Char	64	$64.	Feeding tube size (Not Done)
933	distalposx_12	Char	64	$64.	Distal position of feeding tube (Not Done)
934	proneventx_12	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
935	recfeed_12	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
936	recfeedc_12	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
937	goalrate_12	Num	8		Tube feeding goal rate
938	goalchange_12	Num	8		Did the goal rate change during the 24 hour period?
939	goalchangec_12	Char	19	$19.	Did the goal rate change during the 24 hour period?
940	newgoal_12	Num	8		Yes, new goal rate
941	brand1_12	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
942	brand1vol_12	Num	8		Total volume of enteral formula 1 infused for 24 hour period
943	brand2_12	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
944	brand2vol_12	Num	8		Total volume of enteral formula 2 infused for 24 hour period
945	feedhrs_12	Num	8		Number of hours enteral tube feeds on for this 24 hour period
946	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?
947	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?

Num	Variable	Type	Len	Format	Label
948	planext_12	Num	8		Planned Extubation
949	planextc_12	Char	18	$18.	Planned Extubation
950	giint_12	Num	8		GI Intolerance
951	giintc_12	Char	14	$14.	GI Intolerance
952	invbside_12	Num	8		Invasive bedside procedure
953	invbsidec_12	Char	26	$26.	Invasive bedside procedure
954	leftfloor_12	Num	8		Patient left the floor
955	leftfloorc_12	Char	22	$22.	Patient left the floor
956	care_12	Num	8		Nursing Care (i.e. bathing, HOB down)
957	carec_12	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
958	medadm_12	Num	8		Medical Administration
959	medadmc_12	Char	22	$22.	Medical Administration
960	feedoffoth_12	Num	8		Other reason feed turned off:
961	feedoffothc_12	Char	5	$5.	Other reason feed turned off:
962	feedoffreas_12	Char	255	$255.	Other reason feed turned off: Reason
963	giintoleden_12	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
964	giintoledenc_12	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
965	diarrhea_12	Num	8		Diarrhea
966	diarrheac_12	Char	8	$8.	Diarrhea
967	vomiting_12	Num	8		Vomiting
968	vomitingc_12	Char	8	$8.	Vomiting
969	aspiration_12	Num	8		Aspiration
970	aspirationc_12	Char	10	$10.	Aspiration
971	regurg_12	Num	8		Regurgitation
972	regurgc_12	Char	13	$13.	Regurgitation
973	feedsite_12	Num	8		Insertion site of feeding tube
974	feedsitec_12	Char	12	$12.	Insertion site of feeding tube
975	tubesize_12	Num	8		Feeding tube size
976	tubesizec_12	Char	10	$10.	Feeding tube size
977	distalpos_12	Num	8		Distal position of feeding tube
978	distalposc_12	Char	12	$12.	Distal position of feeding tube
979	distalconf_12	Num	8		Was distal position confirmed during this 24 hour period?
980	distalconfc_12	Char	19	$19.	Was distal position confirmed during this 24 hour period?
981	distalhow_12	Num	8		Yes, how confirmed:
982	distalhowc_12	Char	15	$15.	Yes, how confirmed:
983	distaloth_12	Char	40	$40.	Yes, how confirmed: Other
984	fullcal_12	Num	8		Was rate advanced to full-calorie rate during this calendar day?

Num	Variable	Type	Len	Format	Label
985	fullcalc_12	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
986	fullcaltm_12	Num	8	TIMEAMPM.	Yes, time full calorie reached:
987	pronevent_12	Num	8		Prone ventilation this 24 hour period?
988	proneventc_12	Char	3	$3.	Prone ventilation this 24 hour period?
989	recfeedx_12	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
990	goalratex_12	Char	64	$64.	Tube feeding goal rate (Not Done)
991	goalchangex_12	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
992	brand1x_12	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
993	feedhrsx_12	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
994	giintoledenx_12	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
995	distalconfx_12	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
996	fullcalx_12	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
997	alive12	Num	8		
998	home12	Num	8		
999	breathwoa12	Num	8		
1000	inicu12	Num	8		
1001	eligible	Num	8		
1002	fullfd_0	Num	8		
1003	fullfd_1	Num	8		
1004	fullfd_2	Num	8		
1005	fullfd_3	Num	8		
1006	fullfd_4	Num	8		
1007	fullfd_5	Num	8		
1008	fullfd_6	Num	8		
1009	fullfd_7	Num	8		
1010	fullfd_8	Num	8		
1011	fullfd_9	Num	8		
1012	fullfd_10	Num	8		
1013	fullfd_11	Num	8		
1014	fullfd_12	Num	8		
1015	i	Num	8		
1016	dayrchgoal	Num	8		
1017	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	proprate	Num	8		Propofol infusion rate at time of randomization
12	feedgrp	Num	8		Enteral Feeding Group
13	feedgrpc	Char	12	$12.	Enteral Feeding Group
14	prebasefeed	Num	8		In the 12 hours prior to enrollment, did patient receive any enteral feedings?
15	prebasefeedc	Char	72	$72.	In the 12 hours prior to enrollment, did patient receive any enteral feedings?
16	prebasevol	Num	8		Yes, enter total volume of enteral feeds in 12 hours prior to enrollment
17	feedinitdt	Num	8	BEST12.	Date and time of initiation of protocol specified enteral feeds (Day)
18	feedinittm	Num	8	TIME5.	Date and time of initiation of protocol specified enteral feeds (Time)
19	recfeed_0	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
20	recfeedc_0	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
21	goalrate_0	Num	8		Tube feeding goal rate
22	goalchange_0	Num	8		Did the goal rate change during the 24 hour period?
23	goalchangec_0	Char	19	$19.	Did the goal rate change during the 24 hour period?
24	newgoal_0	Num	8		New goal rate
25	brand1_0	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
26	brand1vol_0	Num	8		Total volume of enteral formula 1 infused for 24 hour period
27	brand2_0	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
28	brand2vol_0	Num	8		Total volume of enteral formula 2 infused for 24 hour period
29	feedhrs_0	Num	8		Number of hours enteral tube feeds on for this 24 hour period
30	feedoff_0	Num	8		Feeds turned off for > 30 minutes within 24 hour period
31	feedoffc_0	Char	61	$61.	Feeds turned off for > 30 minutes within 24 hour period
32	planext_0	Num	8		Planned Extubation
33	planextc_0	Char	18	$18.	Planned Extubation
34	giint_0	Num	8		GI Intolerance
35	giintc_0	Char	14	$14.	GI Intolerance
36	invbside_0	Num	8		Invasive bedside procedure

Num	Variable	Type	Len	Format	Label
37	invbsidec_0	Char	26	$26.	Invasive bedside procedure
38	surgery	Num	8		Surgery
39	surgeryc	Char	7	$7.	Surgery
40	leftfloor_0	Num	8		Patient left the floor
41	leftfloorc_0	Char	22	$22.	Patient left the floor
42	care_0	Num	8		Nursing Care(ie bathing, HOB down)
43	carec_0	Char	34	$34.	Nursing Care(ie bathing, HOB down)
44	medadm_0	Num	8		Medical Administration
45	medadmc_0	Char	22	$22.	Medical Administration
46	feedoffoth_0	Num	8		Other reason feed turned off:
47	feedoffothc_0	Char	5	$5.	Other reason feed turned off:
48	feedoffreas_0	Char	255	$255.	Other reason feed turned off: Reason
49	giintoleden_0	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
50	giintoledenc_0	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
51	diarrhea_0	Num	8		Diarrhea
52	diarrheac_0	Char	8	$8.	Diarrhea
53	vomiting_0	Num	8		Vomiting
54	vomitingc_0	Char	8	$8.	Vomiting
55	aspiration_0	Num	8		Aspiration
56	aspirationc_0	Char	10	$10.	Aspiration
57	elevresid	Num	8		Elevated Residuals
58	elevresidc	Char	18	$18.	Elevated Residuals
59	regurg_0	Num	8		Regurgitation
60	regurgc_0	Char	13	$13.	Regurgitation
61	constipation	Num	8		Constipation
62	constipationc	Char	12	$12.	Constipation
63	cramping	Num	8		Abdominal distention or cramping
64	crampingc	Char	32	$32.	Abdominal distention or cramping
65	feedsite_0	Num	8		Insertion site of feeding tube:
66	feedsitec_0	Char	12	$12.	Insertion site of feeding tube:
67	tubesize_0	Num	8		Feeding tube size
68	tubesizec_0	Char	10	$10.	Feeding tube size
69	distalpos_0	Num	8		Distal position of feeding tube
70	distalposc_0	Char	12	$12.	Distal position of feeding tube
71	distalconf_0	Num	8		Was distal position confirmed during this 24 hour period?
72	distalconfc_0	Char	19	$19.	Was distal position confirmed during this 24 hour period?
73	distalhow_0	Num	8		How distal position confirmed

Num	Variable	Type	Len	Format	Label
74	distalhowc_0	Char	15	$15.	How distal position confirmed
75	distaloth_0	Char	40	$40.	How distal position confirmed: other
76	fullcal_0	Num	8		Was rate advanced to full-calorie rate during this calendar day?
77	fullcalc_0	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
78	fullcaltm_0	Num	8	TIMEAMPM.	time full calorie reached
79	pronevent_0	Num	8		Prone ventilation between randomization and midnight?
80	proneventc_0	Char	3	$3.	Prone ventilation between randomization and midnight?
81	propratex	Char	64	$64.	Propofol infusion rate at time of randomization (Not Done)
82	feedgrpx	Char	64	$64.	Enteral Feeding Group (Not Done)
83	prebasefeedx	Char	64	$64.	In the 12 hours prior to enrollment, did patient receive any enteral feedings? (Not Done)
84	feedinitdtmx	Char	64	$64.	Date and time of initiation of protocol specified enteral feeds (Not Done)
85	recfeedx_0	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
86	goalratex_0	Char	64	$64.	Tube feeding goal rate (Not Done)
87	goalchangex_0	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
88	brand1x_0	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period (Not Done)
89	feedhrsx_0	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
90	feedoffX	Char	64	$64.	Feeds turned off for > 30 minutes within 24 hour period (Not Done)
91	giintoledenx_0	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
92	feedsiteX	Char	64	$64.	Insertion site of feeding tube: (Not Done)
93	tubesizeX	Char	64	$64.	Feeding tube size (Not Done)
94	distalposX	Char	64	$64.	Distal position of feeding tube (Not Done)
95	distalconfx_0	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
96	fullcalx_0	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
97	surg_1	Num	8		Surgery
98	surgc_1	Char	7	$7.	Surgery
99	residual_1	Num	8		Elevated Residuals
100	residualc_1	Char	18	$18.	Elevated Residuals
101	const_1	Num	8		Constipation
102	constc_1	Char	12	$12.	Constipation
103	cramp_1	Num	8		Abdominal distention or cramping
104	crampc_1	Char	32	$32.	Abdominal distention or cramping
105	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)
106	feedsitex_1	Char	64	$64.	Insertion site of feeding tube (Not Done)
107	tubesizex_1	Char	64	$64.	Feeding tube size (Not Done)
108	distalposx_1	Char	64	$64.	Distal position of feeding tube (Not Done)
109	proneventx_1	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)

Num	Variable	Type	Len	Format	Label
110	recfeed_1	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
111	recfeedc_1	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
112	goalrate_1	Num	8		Tube feeding goal rate
113	goalchange_1	Num	8		Did the goal rate change during the 24 hour period?
114	goalchangec_1	Char	19	$19.	Did the goal rate change during the 24 hour period?
115	newgoal_1	Num	8		Yes, new goal rate
116	brand1_1	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
117	brand1vol_1	Num	8		Total volume of enteral formula 1 infused for 24 hour period
118	brand2_1	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
119	brand2vol_1	Num	8		Total volume of enteral formula 2 infused for 24 hour period
120	feedhrs_1	Num	8		Number of hours enteral tube feeds on for this 24 hour period
121	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?
122	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?
123	planext_1	Num	8		Planned Extubation
124	planextc_1	Char	18	$18.	Planned Extubation
125	giint_1	Num	8		GI Intolerance
126	giintc_1	Char	14	$14.	GI Intolerance
127	invbside_1	Num	8		Invasive bedside procedure
128	invbsidec_1	Char	26	$26.	Invasive bedside procedure
129	leftfloor_1	Num	8		Patient left the floor
130	leftfloorc_1	Char	22	$22.	Patient left the floor
131	care_1	Num	8		Nursing Care (i.e. bathing, HOB down)
132	carec_1	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
133	medadm_1	Num	8		Medical Administration
134	medadmc_1	Char	22	$22.	Medical Administration
135	feedoffoth_1	Num	8		Other reason feed turned off:
136	feedoffothc_1	Char	5	$5.	Other reason feed turned off:
137	feedoffreas_1	Char	255	$255.	Other reason feed turned off: Reason
138	giintoleden_1	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
139	giintoledenc_1	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
140	diarrhea_1	Num	8		Diarrhea
141	diarrheac_1	Char	8	$8.	Diarrhea
142	vomiting_1	Num	8		Vomiting
143	vomitingc_1	Char	8	$8.	Vomiting
144	aspiration_1	Num	8		Aspiration
145	aspirationc_1	Char	10	$10.	Aspiration

Num	Variable	Type	Len	Format	Label
146	regurg_1	Num	8		Regurgitation
147	regurgc_1	Char	13	$13.	Regurgitation
148	feedsite_1	Num	8		Insertion site of feeding tube
149	feedsitec_1	Char	12	$12.	Insertion site of feeding tube
150	tubesize_1	Num	8		Feeding tube size
151	tubesizec_1	Char	10	$10.	Feeding tube size
152	distalpos_1	Num	8		Distal position of feeding tube
153	distalposc_1	Char	12	$12.	Distal position of feeding tube
154	distalconf_1	Num	8		Was distal position confirmed during this 24 hour period?
155	distalconfc_1	Char	19	$19.	Was distal position confirmed during this 24 hour period?
156	distalhow_1	Num	8		Yes, how confirmed:
157	distalhowc_1	Char	15	$15.	Yes, how confirmed:
158	distaloth_1	Char	40	$40.	Yes, how confirmed: Other
159	fullcal_1	Num	8		Was rate advanced to full-calorie rate during this calendar day?
160	fullcalc_1	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
161	fullcaltm_1	Num	8	TIMEAMPM.	Yes, time full calorie reached:
162	pronevent_1	Num	8		Prone ventilation this 24 hour period?
163	proneventc_1	Char	3	$3.	Prone ventilation this 24 hour period?
164	recfeedx_1	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
165	goalratex_1	Char	64	$64.	Tube feeding goal rate (Not Done)
166	goalchangex_1	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
167	brand1x_1	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
168	feedhrsx_1	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
169	giintoledenx_1	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
170	distalconfx_1	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
171	fullcalx_1	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
172	surg_2	Num	8		Surgery
173	surgc_2	Char	7	$7.	Surgery
174	residual_2	Num	8		Elevated Residuals
175	residualc_2	Char	18	$18.	Elevated Residuals
176	const_2	Num	8		Constipation
177	constc_2	Char	12	$12.	Constipation
178	cramp_2	Num	8		Abdominal distention or cramping
179	crampc_2	Char	32	$32.	Abdominal distention or cramping
180	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)
181	feedsitex_2	Char	64	$64.	Insertion site of feeding tube (Not Done)
182	tubesizex_2	Char	64	$64.	Feeding tube size (Not Done)

Num	Variable	Type	Len	Format	Label
183	distalposx_2	Char	64	$64.	Distal position of feeding tube (Not Done)
184	proneventx_2	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
185	recfeed_2	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
186	recfeedc_2	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
187	goalrate_2	Num	8		Tube feeding goal rate
188	goalchange_2	Num	8		Did the goal rate change during the 24 hour period?
189	goalchangec_2	Char	19	$19.	Did the goal rate change during the 24 hour period?
190	newgoal_2	Num	8		Yes, new goal rate
191	brand1_2	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
192	brand1vol_2	Num	8		Total volume of enteral formula 1 infused for 24 hour period
193	brand2_2	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
194	brand2vol_2	Num	8		Total volume of enteral formula 2 infused for 24 hour period
195	feedhrs_2	Num	8		Number of hours enteral tube feeds on for this 24 hour period
196	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?
197	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?
198	planext_2	Num	8		Planned Extubation
199	planextc_2	Char	18	$18.	Planned Extubation
200	giint_2	Num	8		GI Intolerance
201	giintc_2	Char	14	$14.	GI Intolerance
202	invbside_2	Num	8		Invasive bedside procedure
203	invbsidec_2	Char	26	$26.	Invasive bedside procedure
204	leftfloor_2	Num	8		Patient left the floor
205	leftfloorc_2	Char	22	$22.	Patient left the floor
206	care_2	Num	8		Nursing Care (i.e. bathing, HOB down)
207	carec_2	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
208	medadm_2	Num	8		Medical Administration
209	medadmc_2	Char	22	$22.	Medical Administration
210	feedoffoth_2	Num	8		Other reason feed turned off:
211	feedoffothc_2	Char	5	$5.	Other reason feed turned off:
212	feedoffreas_2	Char	255	$255.	Other reason feed turned off: Reason
213	giintoleden_2	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
214	giintoledenc_2	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
215	diarrhea_2	Num	8		Diarrhea
216	diarrheac_2	Char	8	$8.	Diarrhea
217	vomiting_2	Num	8		Vomiting
218	vomitingc_2	Char	8	$8.	Vomiting

Num	Variable	Type	Len	Format	Label
219	aspiration_2	Num	8		Aspiration
220	aspirationc_2	Char	10	$10.	Aspiration
221	regurg_2	Num	8		Regurgitation
222	regurgc_2	Char	13	$13.	Regurgitation
223	feedsite_2	Num	8		Insertion site of feeding tube
224	feedsitec_2	Char	12	$12.	Insertion site of feeding tube
225	tubesize_2	Num	8		Feeding tube size
226	tubesizec_2	Char	10	$10.	Feeding tube size
227	distalpos_2	Num	8		Distal position of feeding tube
228	distalposc_2	Char	12	$12.	Distal position of feeding tube
229	distalconf_2	Num	8		Was distal position confirmed during this 24 hour period?
230	distalconfc_2	Char	19	$19.	Was distal position confirmed during this 24 hour period?
231	distalhow_2	Num	8		Yes, how confirmed:
232	distalhowc_2	Char	15	$15.	Yes, how confirmed:
233	distaloth_2	Char	40	$40.	Yes, how confirmed: Other
234	fullcal_2	Num	8		Was rate advanced to full-calorie rate during this calendar day?
235	fullcalc_2	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
236	fullcaltm_2	Num	8	TIMEAMPM.	Yes, time full calorie reached:
237	pronevent_2	Num	8		Prone ventilation this 24 hour period?
238	proneventc_2	Char	3	$3.	Prone ventilation this 24 hour period?
239	recfeedx_2	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
240	goalratex_2	Char	64	$64.	Tube feeding goal rate (Not Done)
241	goalchangex_2	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
242	brand1x_2	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
243	feedhrsx_2	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
244	giintoledenx_2	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
245	distalconfx_2	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
246	fullcalx_2	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
247	surg_3	Num	8		Surgery
248	surgc_3	Char	7	$7.	Surgery
249	residual_3	Num	8		Elevated Residuals
250	residualc_3	Char	18	$18.	Elevated Residuals
251	const_3	Num	8		Constipation
252	constc_3	Char	12	$12.	Constipation
253	cramp_3	Num	8		Abdominal distention or cramping
254	crampc_3	Char	32	$32.	Abdominal distention or cramping
255	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)

Num	Variable	Type	Len	Format	Label
256	feedsitex_3	Char	64	$64.	Insertion site of feeding tube (Not Done)
257	tubesizex_3	Char	64	$64.	Feeding tube size (Not Done)
258	distalposx_3	Char	64	$64.	Distal position of feeding tube (Not Done)
259	proneventx_3	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
260	recfeed_3	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
261	recfeedc_3	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
262	goalrate_3	Num	8		Tube feeding goal rate
263	goalchange_3	Num	8		Did the goal rate change during the 24 hour period?
264	goalchangec_3	Char	19	$19.	Did the goal rate change during the 24 hour period?
265	newgoal_3	Num	8		Yes, new goal rate
266	brand1_3	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
267	brand1vol_3	Num	8		Total volume of enteral formula 1 infused for 24 hour period
268	brand2_3	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
269	brand2vol_3	Num	8		Total volume of enteral formula 2 infused for 24 hour period
270	feedhrs_3	Num	8		Number of hours enteral tube feeds on for this 24 hour period
271	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?
272	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?
273	planext_3	Num	8		Planned Extubation
274	planextc_3	Char	18	$18.	Planned Extubation
275	giint_3	Num	8		GI Intolerance
276	giintc_3	Char	14	$14.	GI Intolerance
277	invbside_3	Num	8		Invasive bedside procedure
278	invbsidec_3	Char	26	$26.	Invasive bedside procedure
279	leftfloor_3	Num	8		Patient left the floor
280	leftfloorc_3	Char	22	$22.	Patient left the floor
281	care_3	Num	8		Nursing Care (i.e. bathing, HOB down)
282	carec_3	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
283	medadm_3	Num	8		Medical Administration
284	medadmc_3	Char	22	$22.	Medical Administration
285	feedoffoth_3	Num	8		Other reason feed turned off:
286	feedoffothc_3	Char	5	$5.	Other reason feed turned off:
287	feedoffreas_3	Char	255	$255.	Other reason feed turned off: Reason
288	giintoleden_3	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
289	giintoledenc_3	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
290	diarrhea_3	Num	8		Diarrhea
291	diarrheac_3	Char	8	$8.	Diarrhea

Num	Variable	Type	Len	Format	Label
292	vomiting_3	Num	8		Vomiting
293	vomitingc_3	Char	8	$8.	Vomiting
294	aspiration_3	Num	8		Aspiration
295	aspirationc_3	Char	10	$10.	Aspiration
296	regurg_3	Num	8		Regurgitation
297	regurgc_3	Char	13	$13.	Regurgitation
298	feedsite_3	Num	8		Insertion site of feeding tube
299	feedsitec_3	Char	12	$12.	Insertion site of feeding tube
300	tubesize_3	Num	8		Feeding tube size
301	tubesizec_3	Char	10	$10.	Feeding tube size
302	distalpos_3	Num	8		Distal position of feeding tube
303	distalposc_3	Char	12	$12.	Distal position of feeding tube
304	distalconf_3	Num	8		Was distal position confirmed during this 24 hour period?
305	distalconfc_3	Char	19	$19.	Was distal position confirmed during this 24 hour period?
306	distalhow_3	Num	8		Yes, how confirmed:
307	distalhowc_3	Char	15	$15.	Yes, how confirmed:
308	distaloth_3	Char	40	$40.	Yes, how confirmed: Other
309	fullcal_3	Num	8		Was rate advanced to full-calorie rate during this calendar day?
310	fullcalc_3	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
311	fullcaltm_3	Num	8	TIMEAMPM.	Yes, time full calorie reached:
312	pronevent_3	Num	8		Prone ventilation this 24 hour period?
313	proneventc_3	Char	3	$3.	Prone ventilation this 24 hour period?
314	recfeedx_3	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
315	goalratex_3	Char	64	$64.	Tube feeding goal rate (Not Done)
316	goalchangex_3	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
317	brand1x_3	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
318	feedhrsx_3	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
319	giintoledenx_3	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
320	distalconfx_3	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
321	fullcalx_3	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
322	surg_4	Num	8		Surgery
323	surgc_4	Char	7	$7.	Surgery
324	residual_4	Num	8		Elevated Residuals
325	residualc_4	Char	18	$18.	Elevated Residuals
326	const_4	Num	8		Constipation
327	constc_4	Char	12	$12.	Constipation
328	cramp_4	Num	8		Abdominal distention or cramping

Num	Variable	Type	Len	Format	Label
329	crampc_4	Char	32	$32.	Abdominal distention or cramping
330	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)
331	feedsitex_4	Char	64	$64.	Insertion site of feeding tube (Not Done)
332	tubesizex_4	Char	64	$64.	Feeding tube size (Not Done)
333	distalposx_4	Char	64	$64.	Distal position of feeding tube (Not Done)
334	proneventx_4	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
335	recfeed_4	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
336	recfeedc_4	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
337	goalrate_4	Num	8		Tube feeding goal rate
338	goalchange_4	Num	8		Did the goal rate change during the 24 hour period?
339	goalchangec_4	Char	19	$19.	Did the goal rate change during the 24 hour period?
340	newgoal_4	Num	8		Yes, new goal rate
341	brand1_4	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
342	brand1vol_4	Num	8		Total volume of enteral formula 1 infused for 24 hour period
343	brand2_4	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
344	brand2vol_4	Num	8		Total volume of enteral formula 2 infused for 24 hour period
345	feedhrs_4	Num	8		Number of hours enteral tube feeds on for this 24 hour period
346	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?
347	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?
348	planext_4	Num	8		Planned Extubation
349	planextc_4	Char	18	$18.	Planned Extubation
350	giint_4	Num	8		GI Intolerance
351	giintc_4	Char	14	$14.	GI Intolerance
352	invbside_4	Num	8		Invasive bedside procedure
353	invbsidec_4	Char	26	$26.	Invasive bedside procedure
354	leftfloor_4	Num	8		Patient left the floor
355	leftfloorc_4	Char	22	$22.	Patient left the floor
356	care_4	Num	8		Nursing Care (i.e. bathing, HOB down)
357	carec_4	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
358	medadm_4	Num	8		Medical Administration
359	medadmc_4	Char	22	$22.	Medical Administration
360	feedoffoth_4	Num	8		Other reason feed turned off:
361	feedoffothc_4	Char	5	$5.	Other reason feed turned off:
362	feedoffreas_4	Char	255	$255.	Other reason feed turned off: Reason
363	giintoleden_4	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
364	giintoledenc_4	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
365	diarrhea_4	Num	8		Diarrhea
366	diarrheac_4	Char	8	$8.	Diarrhea
367	vomiting_4	Num	8		Vomiting
368	vomitingc_4	Char	8	$8.	Vomiting
369	aspiration_4	Num	8		Aspiration
370	aspirationc_4	Char	10	$10.	Aspiration
371	regurg_4	Num	8		Regurgitation
372	regurgc_4	Char	13	$13.	Regurgitation
373	feedsite_4	Num	8		Insertion site of feeding tube
374	feedsitec_4	Char	12	$12.	Insertion site of feeding tube
375	tubesize_4	Num	8		Feeding tube size
376	tubesizec_4	Char	10	$10.	Feeding tube size
377	distalpos_4	Num	8		Distal position of feeding tube
378	distalposc_4	Char	12	$12.	Distal position of feeding tube
379	distalconf_4	Num	8		Was distal position confirmed during this 24 hour period?
380	distalconfc_4	Char	19	$19.	Was distal position confirmed during this 24 hour period?
381	distalhow_4	Num	8		Yes, how confirmed:
382	distalhowc_4	Char	15	$15.	Yes, how confirmed:
383	distaloth_4	Char	40	$40.	Yes, how confirmed: Other
384	fullcal_4	Num	8		Was rate advanced to full-calorie rate during this calendar day?
385	fullcalc_4	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
386	fullcaltm_4	Num	8	TIMEAMPM.	Yes, time full calorie reached:
387	pronevent_4	Num	8		Prone ventilation this 24 hour period?
388	proneventc_4	Char	3	$3.	Prone ventilation this 24 hour period?
389	recfeedx_4	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
390	goalratex_4	Char	64	$64.	Tube feeding goal rate (Not Done)
391	goalchangex_4	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
392	brand1x_4	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
393	feedhrsx_4	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
394	giintoledenx_4	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
395	distalconfx_4	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
396	fullcalx_4	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
397	surg_5	Num	8		Surgery
398	surgc_5	Char	7	$7.	Surgery
399	residual_5	Num	8		Elevated Residuals
400	residualc_5	Char	18	$18.	Elevated Residuals

Num	Variable	Type	Len	Format	Label
401	const_5	Num	8		Constipation
402	constc_5	Char	12	$12.	Constipation
403	cramp_5	Num	8		Abdominal distention or cramping
404	crampc_5	Char	32	$32.	Abdominal distention or cramping
405	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)
406	feedsitex_5	Char	64	$64.	Insertion site of feeding tube (Not Done)
407	tubesizex_5	Char	64	$64.	Feeding tube size (Not Done)
408	distalposx_5	Char	64	$64.	Distal position of feeding tube (Not Done)
409	proneventx_5	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
410	recfeed_5	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
411	recfeedc_5	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
412	goalrate_5	Num	8		Tube feeding goal rate
413	goalchange_5	Num	8		Did the goal rate change during the 24 hour period?
414	goalchangec_5	Char	19	$19.	Did the goal rate change during the 24 hour period?
415	newgoal_5	Num	8		Yes, new goal rate
416	brand1_5	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
417	brand1vol_5	Num	8		Total volume of enteral formula 1 infused for 24 hour period
418	brand2_5	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
419	brand2vol_5	Num	8		Total volume of enteral formula 2 infused for 24 hour period
420	feedhrs_5	Num	8		Number of hours enteral tube feeds on for this 24 hour period
421	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?
422	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?
423	planext_5	Num	8		Planned Extubation
424	planextc_5	Char	18	$18.	Planned Extubation
425	giint_5	Num	8		GI Intolerance
426	giintc_5	Char	14	$14.	GI Intolerance
427	invbside_5	Num	8		Invasive bedside procedure
428	invbsidec_5	Char	26	$26.	Invasive bedside procedure
429	leftfloor_5	Num	8		Patient left the floor
430	leftfloorc_5	Char	22	$22.	Patient left the floor
431	care_5	Num	8		Nursing Care (i.e. bathing, HOB down)
432	carec_5	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
433	medadm_5	Num	8		Medical Administration
434	medadmc_5	Char	22	$22.	Medical Administration
435	feedoffoth_5	Num	8		Other reason feed turned off:
436	feedoffothc_5	Char	5	$5.	Other reason feed turned off:
437	feedoffreas_5	Char	255	$255.	Other reason feed turned off: Reason

Num	Variable	Type	Len	Format	Label
438	giintoleden_5	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
439	giintoledenc_5	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
440	diarrhea_5	Num	8		Diarrhea
441	diarrheac_5	Char	8	$8.	Diarrhea
442	vomiting_5	Num	8		Vomiting
443	vomitingc_5	Char	8	$8.	Vomiting
444	aspiration_5	Num	8		Aspiration
445	aspirationc_5	Char	10	$10.	Aspiration
446	regurg_5	Num	8		Regurgitation
447	regurgc_5	Char	13	$13.	Regurgitation
448	feedsite_5	Num	8		Insertion site of feeding tube
449	feedsitec_5	Char	12	$12.	Insertion site of feeding tube
450	tubesize_5	Num	8		Feeding tube size
451	tubesizec_5	Char	10	$10.	Feeding tube size
452	distalpos_5	Num	8		Distal position of feeding tube
453	distalposc_5	Char	12	$12.	Distal position of feeding tube
454	distalconf_5	Num	8		Was distal position confirmed during this 24 hour period?
455	distalconfc_5	Char	19	$19.	Was distal position confirmed during this 24 hour period?
456	distalhow_5	Num	8		Yes, how confirmed:
457	distalhowc_5	Char	15	$15.	Yes, how confirmed:
458	distaloth_5	Char	40	$40.	Yes, how confirmed: Other
459	fullcal_5	Num	8		Was rate advanced to full-calorie rate during this calendar day?
460	fullcalc_5	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
461	fullcaltm_5	Num	8	TIMEAMPM.	Yes, time full calorie reached:
462	pronevent_5	Num	8		Prone ventilation this 24 hour period?
463	proneventc_5	Char	3	$3.	Prone ventilation this 24 hour period?
464	recfeedx_5	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
465	goalratex_5	Char	64	$64.	Tube feeding goal rate (Not Done)
466	goalchangex_5	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
467	brand1x_5	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
468	feedhrsx_5	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
469	giintoledenx_5	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
470	distalconfx_5	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
471	fullcalx_5	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
472	surg_6	Num	8		Surgery
473	surgc_6	Char	7	$7.	Surgery

Num	Variable	Type	Len	Format	Label
474	residual_6	Num	8		Elevated Residuals
475	residualc_6	Char	18	$18.	Elevated Residuals
476	const_6	Num	8		Constipation
477	constc_6	Char	12	$12.	Constipation
478	cramp_6	Num	8		Abdominal distention or cramping
479	crampc_6	Char	32	$32.	Abdominal distention or cramping
480	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)
481	feedsitex_6	Char	64	$64.	Insertion site of feeding tube (Not Done)
482	tubesizex_6	Char	64	$64.	Feeding tube size (Not Done)
483	distalposx_6	Char	64	$64.	Distal position of feeding tube (Not Done)
484	proneventx_6	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
485	recfeed_6	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
486	recfeedc_6	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
487	goalrate_6	Num	8		Tube feeding goal rate
488	goalchange_6	Num	8		Did the goal rate change during the 24 hour period?
489	goalchangec_6	Char	19	$19.	Did the goal rate change during the 24 hour period?
490	newgoal_6	Num	8		Yes, new goal rate
491	brand1_6	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
492	brand1vol_6	Num	8		Total volume of enteral formula 1 infused for 24 hour period
493	brand2_6	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
494	brand2vol_6	Num	8		Total volume of enteral formula 2 infused for 24 hour period
495	feedhrs_6	Num	8		Number of hours enteral tube feeds on for this 24 hour period
496	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?
497	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?
498	planext_6	Num	8		Planned Extubation
499	planextc_6	Char	18	$18.	Planned Extubation
500	giint_6	Num	8		GI Intolerance
501	giintc_6	Char	14	$14.	GI Intolerance
502	invbside_6	Num	8		Invasive bedside procedure
503	invbsidec_6	Char	26	$26.	Invasive bedside procedure
504	leftfloor_6	Num	8		Patient left the floor
505	leftfloorc_6	Char	22	$22.	Patient left the floor
506	care_6	Num	8		Nursing Care (i.e. bathing, HOB down)
507	carec_6	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
508	medadm_6	Num	8		Medical Administration
509	medadmc_6	Char	22	$22.	Medical Administration
510	feedoffoth_6	Num	8		Other reason feed turned off:

Num	Variable	Type	Len	Format	Label
511	feedoffothc_6	Char	5	$5.	Other reason feed turned off:
512	feedoffreas_6	Char	255	$255.	Other reason feed turned off: Reason
513	giintoleden_6	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
514	giintoledenc_6	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
515	diarrhea_6	Num	8		Diarrhea
516	diarrheac_6	Char	8	$8.	Diarrhea
517	vomiting_6	Num	8		Vomiting
518	vomitingc_6	Char	8	$8.	Vomiting
519	aspiration_6	Num	8		Aspiration
520	aspirationc_6	Char	10	$10.	Aspiration
521	regurg_6	Num	8		Regurgitation
522	regurgc_6	Char	13	$13.	Regurgitation
523	feedsite_6	Num	8		Insertion site of feeding tube
524	feedsitec_6	Char	12	$12.	Insertion site of feeding tube
525	tubesize_6	Num	8		Feeding tube size
526	tubesizec_6	Char	10	$10.	Feeding tube size
527	distalpos_6	Num	8		Distal position of feeding tube
528	distalposc_6	Char	12	$12.	Distal position of feeding tube
529	distalconf_6	Num	8		Was distal position confirmed during this 24 hour period?
530	distalconfc_6	Char	19	$19.	Was distal position confirmed during this 24 hour period?
531	distalhow_6	Num	8		Yes, how confirmed:
532	distalhowc_6	Char	15	$15.	Yes, how confirmed:
533	distaloth_6	Char	40	$40.	Yes, how confirmed: Other
534	fullcal_6	Num	8		Was rate advanced to full-calorie rate during this calendar day?
535	fullcalc_6	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
536	fullcaltm_6	Num	8	TIMEAMPM.	Yes, time full calorie reached:
537	pronevent_6	Num	8		Prone ventilation this 24 hour period?
538	proneventc_6	Char	3	$3.	Prone ventilation this 24 hour period?
539	recfeedx_6	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
540	goalratex_6	Char	64	$64.	Tube feeding goal rate (Not Done)
541	goalchangex_6	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
542	brand1x_6	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
543	feedhrsx_6	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
544	giintoledenx_6	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
545	distalconfx_6	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
546	fullcalx_6	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)

Num	Variable	Type	Len	Format	Label
547	surg_7	Num	8		Surgery
548	surgc_7	Char	7	$7.	Surgery
549	residual_7	Num	8		Elevated Residuals
550	residualc_7	Char	18	$18.	Elevated Residuals
551	const_7	Num	8		Constipation
552	constc_7	Char	12	$12.	Constipation
553	cramp_7	Num	8		Abdominal distention or cramping
554	crampc_7	Char	32	$32.	Abdominal distention or cramping
555	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)
556	feedsitex_7	Char	64	$64.	Insertion site of feeding tube (Not Done)
557	tubesizex_7	Char	64	$64.	Feeding tube size (Not Done)
558	distalposx_7	Char	64	$64.	Distal position of feeding tube (Not Done)
559	proneventx_7	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
560	recfeed_7	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
561	recfeedc_7	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
562	goalrate_7	Num	8		Tube feeding goal rate
563	goalchange_7	Num	8		Did the goal rate change during the 24 hour period?
564	goalchangec_7	Char	19	$19.	Did the goal rate change during the 24 hour period?
565	newgoal_7	Num	8		Yes, new goal rate
566	brand1_7	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
567	brand1vol_7	Num	8		Total volume of enteral formula 1 infused for 24 hour period
568	brand2_7	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
569	brand2vol_7	Num	8		Total volume of enteral formula 2 infused for 24 hour period
570	feedhrs_7	Num	8		Number of hours enteral tube feeds on for this 24 hour period
571	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?
572	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?
573	planext_7	Num	8		Planned Extubation
574	planextc_7	Char	18	$18.	Planned Extubation
575	giint_7	Num	8		GI Intolerance
576	giintc_7	Char	14	$14.	GI Intolerance
577	invbside_7	Num	8		Invasive bedside procedure
578	invbsidec_7	Char	26	$26.	Invasive bedside procedure
579	leftfloor_7	Num	8		Patient left the floor
580	leftfloorc_7	Char	22	$22.	Patient left the floor
581	care_7	Num	8		Nursing Care (i.e. bathing, HOB down)
582	carec_7	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
583	medadm_7	Num	8		Medical Administration

Num	Variable	Type	Len	Format	Label
584	medadmc_7	Char	22	$22.	Medical Administration
585	feedoffoth_7	Num	8		Other reason feed turned off:
586	feedoffothc_7	Char	5	$5.	Other reason feed turned off:
587	feedoffreas_7	Char	255	$255.	Other reason feed turned off: Reason
588	giintoleden_7	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
589	giintoledenc_7	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
590	diarrhea_7	Num	8		Diarrhea
591	diarrheac_7	Char	8	$8.	Diarrhea
592	vomiting_7	Num	8		Vomiting
593	vomitingc_7	Char	8	$8.	Vomiting
594	aspiration_7	Num	8		Aspiration
595	aspirationc_7	Char	10	$10.	Aspiration
596	regurg_7	Num	8		Regurgitation
597	regurgc_7	Char	13	$13.	Regurgitation
598	feedsite_7	Num	8		Insertion site of feeding tube
599	feedsitec_7	Char	12	$12.	Insertion site of feeding tube
600	tubesize_7	Num	8		Feeding tube size
601	tubesizec_7	Char	10	$10.	Feeding tube size
602	distalpos_7	Num	8		Distal position of feeding tube
603	distalposc_7	Char	12	$12.	Distal position of feeding tube
604	distalconf_7	Num	8		Was distal position confirmed during this 24 hour period?
605	distalconfc_7	Char	19	$19.	Was distal position confirmed during this 24 hour period?
606	distalhow_7	Num	8		Yes, how confirmed:
607	distalhowc_7	Char	15	$15.	Yes, how confirmed:
608	distaloth_7	Char	40	$40.	Yes, how confirmed: Other
609	fullcal_7	Num	8		Was rate advanced to full-calorie rate during this calendar day?
610	fullcalc_7	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
611	fullcaltm_7	Num	8	TIMEAMPM.	Yes, time full calorie reached:
612	pronevent_7	Num	8		Prone ventilation this 24 hour period?
613	proneventc_7	Char	3	$3.	Prone ventilation this 24 hour period?
614	recfeedx_7	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
615	goalratex_7	Char	64	$64.	Tube feeding goal rate (Not Done)
616	goalchangex_7	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
617	brand1x_7	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
618	feedhrsx_7	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
619	giintoledenx_7	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)

Num	Variable	Type	Len	Format	Label
620	distalconfx_7	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
621	fullcalx_7	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
622	surg_8	Num	8		Surgery
623	surgc_8	Char	7	$7.	Surgery
624	residual_8	Num	8		Elevated Residuals
625	residualc_8	Char	18	$18.	Elevated Residuals
626	const_8	Num	8		Constipation
627	constc_8	Char	12	$12.	Constipation
628	cramp_8	Num	8		Abdominal distention or cramping
629	crampc_8	Char	32	$32.	Abdominal distention or cramping
630	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)
631	feedsitex_8	Char	64	$64.	Insertion site of feeding tube (Not Done)
632	tubesizex_8	Char	64	$64.	Feeding tube size (Not Done)
633	distalposx_8	Char	64	$64.	Distal position of feeding tube (Not Done)
634	proneventx_8	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
635	recfeed_8	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
636	recfeedc_8	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
637	goalrate_8	Num	8		Tube feeding goal rate
638	goalchange_8	Num	8		Did the goal rate change during the 24 hour period?
639	goalchangec_8	Char	19	$19.	Did the goal rate change during the 24 hour period?
640	newgoal_8	Num	8		Yes, new goal rate
641	brand1_8	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
642	brand1vol_8	Num	8		Total volume of enteral formula 1 infused for 24 hour period
643	brand2_8	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
644	brand2vol_8	Num	8		Total volume of enteral formula 2 infused for 24 hour period
645	feedhrs_8	Num	8		Number of hours enteral tube feeds on for this 24 hour period
646	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?
647	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?
648	planext_8	Num	8		Planned Extubation
649	planextc_8	Char	18	$18.	Planned Extubation
650	giint_8	Num	8		GI Intolerance
651	giintc_8	Char	14	$14.	GI Intolerance
652	invbside_8	Num	8		Invasive bedside procedure
653	invbsidec_8	Char	26	$26.	Invasive bedside procedure
654	leftfloor_8	Num	8		Patient left the floor
655	leftfloorc_8	Char	22	$22.	Patient left the floor
656	care_8	Num	8		Nursing Care (i.e. bathing, HOB down)

Num	Variable	Type	Len	Format	Label
657	carec_8	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
658	medadm_8	Num	8		Medical Administration
659	medadmc_8	Char	22	$22.	Medical Administration
660	feedoffoth_8	Num	8		Other reason feed turned off:
661	feedoffothc_8	Char	5	$5.	Other reason feed turned off:
662	feedoffreas_8	Char	255	$255.	Other reason feed turned off: Reason
663	giintoleden_8	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
664	giintoledenc_8	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
665	diarrhea_8	Num	8		Diarrhea
666	diarrheac_8	Char	8	$8.	Diarrhea
667	vomiting_8	Num	8		Vomiting
668	vomitingc_8	Char	8	$8.	Vomiting
669	aspiration_8	Num	8		Aspiration
670	aspirationc_8	Char	10	$10.	Aspiration
671	regurg_8	Num	8		Regurgitation
672	regurgc_8	Char	13	$13.	Regurgitation
673	feedsite_8	Num	8		Insertion site of feeding tube
674	feedsitec_8	Char	12	$12.	Insertion site of feeding tube
675	tubesize_8	Num	8		Feeding tube size
676	tubesizec_8	Char	10	$10.	Feeding tube size
677	distalpos_8	Num	8		Distal position of feeding tube
678	distalposc_8	Char	12	$12.	Distal position of feeding tube
679	distalconf_8	Num	8		Was distal position confirmed during this 24 hour period?
680	distalconfc_8	Char	19	$19.	Was distal position confirmed during this 24 hour period?
681	distalhow_8	Num	8		Yes, how confirmed:
682	distalhowc_8	Char	15	$15.	Yes, how confirmed:
683	distaloth_8	Char	40	$40.	Yes, how confirmed: Other
684	fullcal_8	Num	8		Was rate advanced to full-calorie rate during this calendar day?
685	fullcalc_8	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
686	fullcaltm_8	Num	8	TIMEAMPM.	Yes, time full calorie reached:
687	pronevent_8	Num	8		Prone ventilation this 24 hour period?
688	proneventc_8	Char	3	$3.	Prone ventilation this 24 hour period?
689	recfeedx_8	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
690	goalratex_8	Char	64	$64.	Tube feeding goal rate (Not Done)
691	goalchangex_8	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
692	brand1x_8	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
693	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
694	giintoledenx_8	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
695	distalconfx_8	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
696	fullcalx_8	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
697	surg_9	Num	8		Surgery
698	surgc_9	Char	7	$7.	Surgery
699	residual_9	Num	8		Elevated Residuals
700	residualc_9	Char	18	$18.	Elevated Residuals
701	const_9	Num	8		Constipation
702	constc_9	Char	12	$12.	Constipation
703	cramp_9	Num	8		Abdominal distention or cramping
704	crampc_9	Char	32	$32.	Abdominal distention or cramping
705	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)
706	feedsitex_9	Char	64	$64.	Insertion site of feeding tube (Not Done)
707	tubesizex_9	Char	64	$64.	Feeding tube size (Not Done)
708	distalposx_9	Char	64	$64.	Distal position of feeding tube (Not Done)
709	proneventx_9	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
710	recfeed_9	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
711	recfeedc_9	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
712	goalrate_9	Num	8		Tube feeding goal rate
713	goalchange_9	Num	8		Did the goal rate change during the 24 hour period?
714	goalchangec_9	Char	19	$19.	Did the goal rate change during the 24 hour period?
715	newgoal_9	Num	8		Yes, new goal rate
716	brand1_9	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
717	brand1vol_9	Num	8		Total volume of enteral formula 1 infused for 24 hour period
718	brand2_9	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
719	brand2vol_9	Num	8		Total volume of enteral formula 2 infused for 24 hour period
720	feedhrs_9	Num	8		Number of hours enteral tube feeds on for this 24 hour period
721	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?
722	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?
723	planext_9	Num	8		Planned Extubation
724	planextc_9	Char	18	$18.	Planned Extubation
725	giint_9	Num	8		GI Intolerance
726	giintc_9	Char	14	$14.	GI Intolerance
727	invbside_9	Num	8		Invasive bedside procedure
728	invbsidec_9	Char	26	$26.	Invasive bedside procedure
729	leftfloor_9	Num	8		Patient left the floor

Num	Variable	Type	Len	Format	Label
730	leftfloorc_9	Char	22	$22.	Patient left the floor
731	care_9	Num	8		Nursing Care (i.e. bathing, HOB down)
732	carec_9	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
733	medadm_9	Num	8		Medical Administration
734	medadmc_9	Char	22	$22.	Medical Administration
735	feedoffoth_9	Num	8		Other reason feed turned off:
736	feedoffothc_9	Char	5	$5.	Other reason feed turned off:
737	feedoffreas_9	Char	255	$255.	Other reason feed turned off: Reason
738	giintoleden_9	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
739	giintoledenc_9	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
740	diarrhea_9	Num	8		Diarrhea
741	diarrheac_9	Char	8	$8.	Diarrhea
742	vomiting_9	Num	8		Vomiting
743	vomitingc_9	Char	8	$8.	Vomiting
744	aspiration_9	Num	8		Aspiration
745	aspirationc_9	Char	10	$10.	Aspiration
746	regurg_9	Num	8		Regurgitation
747	regurgc_9	Char	13	$13.	Regurgitation
748	feedsite_9	Num	8		Insertion site of feeding tube
749	feedsitec_9	Char	12	$12.	Insertion site of feeding tube
750	tubesize_9	Num	8		Feeding tube size
751	tubesizec_9	Char	10	$10.	Feeding tube size
752	distalpos_9	Num	8		Distal position of feeding tube
753	distalposc_9	Char	12	$12.	Distal position of feeding tube
754	distalconf_9	Num	8		Was distal position confirmed during this 24 hour period?
755	distalconfc_9	Char	19	$19.	Was distal position confirmed during this 24 hour period?
756	distalhow_9	Num	8		Yes, how confirmed:
757	distalhowc_9	Char	15	$15.	Yes, how confirmed:
758	distaloth_9	Char	40	$40.	Yes, how confirmed: Other
759	fullcal_9	Num	8		Was rate advanced to full-calorie rate during this calendar day?
760	fullcalc_9	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
761	fullcaltm_9	Num	8	TIMEAMPM.	Yes, time full calorie reached:
762	pronevent_9	Num	8		Prone ventilation this 24 hour period?
763	proneventc_9	Char	3	$3.	Prone ventilation this 24 hour period?
764	recfeedx_9	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
765	goalratex_9	Char	64	$64.	Tube feeding goal rate (Not Done)
766	goalchangex_9	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)

Num	Variable	Type	Len	Format	Label
767	brand1x_9	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
768	feedhrsx_9	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
769	giintoledenx_9	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
770	distalconfx_9	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
771	fullcalx_9	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
772	surg_10	Num	8		Surgery
773	surgc_10	Char	7	$7.	Surgery
774	residual_10	Num	8		Elevated Residuals
775	residualc_10	Char	18	$18.	Elevated Residuals
776	const_10	Num	8		Constipation
777	constc_10	Char	12	$12.	Constipation
778	cramp_10	Num	8		Abdominal distention or cramping
779	crampc_10	Char	32	$32.	Abdominal distention or cramping
780	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)
781	feedsitex_10	Char	64	$64.	Insertion site of feeding tube (Not Done)
782	tubesizex_10	Char	64	$64.	Feeding tube size (Not Done)
783	distalposx_10	Char	64	$64.	Distal position of feeding tube (Not Done)
784	proneventx_10	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
785	recfeed_10	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
786	recfeedc_10	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
787	goalrate_10	Num	8		Tube feeding goal rate
788	goalchange_10	Num	8		Did the goal rate change during the 24 hour period?
789	goalchangec_10	Char	19	$19.	Did the goal rate change during the 24 hour period?
790	newgoal_10	Num	8		Yes, new goal rate
791	brand1_10	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
792	brand1vol_10	Num	8		Total volume of enteral formula 1 infused for 24 hour period
793	brand2_10	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
794	brand2vol_10	Num	8		Total volume of enteral formula 2 infused for 24 hour period
795	feedhrs_10	Num	8		Number of hours enteral tube feeds on for this 24 hour period
796	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?
797	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?
798	planext_10	Num	8		Planned Extubation
799	planextc_10	Char	18	$18.	Planned Extubation
800	giint_10	Num	8		GI Intolerance
801	giintc_10	Char	14	$14.	GI Intolerance
802	invbside_10	Num	8		Invasive bedside procedure

Num	Variable	Type	Len	Format	Label
803	invbsidec_10	Char	26	$26.	Invasive bedside procedure
804	leftfloor_10	Num	8		Patient left the floor
805	leftfloorc_10	Char	22	$22.	Patient left the floor
806	care_10	Num	8		Nursing Care (i.e. bathing, HOB down)
807	carec_10	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
808	medadm_10	Num	8		Medical Administration
809	medadmc_10	Char	22	$22.	Medical Administration
810	feedoffoth_10	Num	8		Other reason feed turned off:
811	feedoffothc_10	Char	5	$5.	Other reason feed turned off:
812	feedoffreas_10	Char	255	$255.	Other reason feed turned off: Reason
813	giintoleden_10	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
814	giintoledenc_10	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
815	diarrhea_10	Num	8		Diarrhea
816	diarrheac_10	Char	8	$8.	Diarrhea
817	vomiting_10	Num	8		Vomiting
818	vomitingc_10	Char	8	$8.	Vomiting
819	aspiration_10	Num	8		Aspiration
820	aspirationc_10	Char	10	$10.	Aspiration
821	regurg_10	Num	8		Regurgitation
822	regurgc_10	Char	13	$13.	Regurgitation
823	feedsite_10	Num	8		Insertion site of feeding tube
824	feedsitec_10	Char	12	$12.	Insertion site of feeding tube
825	tubesize_10	Num	8		Feeding tube size
826	tubesizec_10	Char	10	$10.	Feeding tube size
827	distalpos_10	Num	8		Distal position of feeding tube
828	distalposc_10	Char	12	$12.	Distal position of feeding tube
829	distalconf_10	Num	8		Was distal position confirmed during this 24 hour period?
830	distalconfc_10	Char	19	$19.	Was distal position confirmed during this 24 hour period?
831	distalhow_10	Num	8		Yes, how confirmed:
832	distalhowc_10	Char	15	$15.	Yes, how confirmed:
833	distaloth_10	Char	40	$40.	Yes, how confirmed: Other
834	fullcal_10	Num	8		Was rate advanced to full-calorie rate during this calendar day?
835	fullcalc_10	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
836	fullcaltm_10	Num	8	TIMEAMPM.	Yes, time full calorie reached:
837	pronevent_10	Num	8		Prone ventilation this 24 hour period?
838	proneventc_10	Char	3	$3.	Prone ventilation this 24 hour period?
839	recfeedx_10	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
840	goalratex_10	Char	64	$64.	Tube feeding goal rate (Not Done)
841	goalchangex_10	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
842	brand1x_10	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
843	feedhrsx_10	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
844	giintoledenx_10	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
845	distalconfx_10	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
846	fullcalx_10	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
847	surg_11	Num	8		Surgery
848	surgc_11	Char	7	$7.	Surgery
849	residual_11	Num	8		Elevated Residuals
850	residualc_11	Char	18	$18.	Elevated Residuals
851	const_11	Num	8		Constipation
852	constc_11	Char	12	$12.	Constipation
853	cramp_11	Num	8		Abdominal distention or cramping
854	crampc_11	Char	32	$32.	Abdominal distention or cramping
855	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)
856	feedsitex_11	Char	64	$64.	Insertion site of feeding tube (Not Done)
857	tubesizex_11	Char	64	$64.	Feeding tube size (Not Done)
858	distalposx_11	Char	64	$64.	Distal position of feeding tube (Not Done)
859	proneventx_11	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
860	recfeed_11	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
861	recfeedc_11	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
862	goalrate_11	Num	8		Tube feeding goal rate
863	goalchange_11	Num	8		Did the goal rate change during the 24 hour period?
864	goalchangec_11	Char	19	$19.	Did the goal rate change during the 24 hour period?
865	newgoal_11	Num	8		Yes, new goal rate
866	brand1_11	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
867	brand1vol_11	Num	8		Total volume of enteral formula 1 infused for 24 hour period
868	brand2_11	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
869	brand2vol_11	Num	8		Total volume of enteral formula 2 infused for 24 hour period
870	feedhrs_11	Num	8		Number of hours enteral tube feeds on for this 24 hour period
871	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?
872	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?
873	planext_11	Num	8		Planned Extubation
874	planextc_11	Char	18	$18.	Planned Extubation
875	giint_11	Num	8		GI Intolerance

Num	Variable	Type	Len	Format	Label
876	giintc_11	Char	14	$14.	GI Intolerance
877	invbside_11	Num	8		Invasive bedside procedure
878	invbsidec_11	Char	26	$26.	Invasive bedside procedure
879	leftfloor_11	Num	8		Patient left the floor
880	leftfloorc_11	Char	22	$22.	Patient left the floor
881	care_11	Num	8		Nursing Care (i.e. bathing, HOB down)
882	carec_11	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
883	medadm_11	Num	8		Medical Administration
884	medadmc_11	Char	22	$22.	Medical Administration
885	feedoffoth_11	Num	8		Other reason feed turned off:
886	feedoffothc_11	Char	5	$5.	Other reason feed turned off:
887	feedoffreas_11	Char	255	$255.	Other reason feed turned off: Reason
888	giintoleden_11	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
889	giintoledenc_11	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
890	diarrhea_11	Num	8		Diarrhea
891	diarrheac_11	Char	8	$8.	Diarrhea
892	vomiting_11	Num	8		Vomiting
893	vomitingc_11	Char	8	$8.	Vomiting
894	aspiration_11	Num	8		Aspiration
895	aspirationc_11	Char	10	$10.	Aspiration
896	regurg_11	Num	8		Regurgitation
897	regurgc_11	Char	13	$13.	Regurgitation
898	feedsite_11	Num	8		Insertion site of feeding tube
899	feedsitec_11	Char	12	$12.	Insertion site of feeding tube
900	tubesize_11	Num	8		Feeding tube size
901	tubesizec_11	Char	10	$10.	Feeding tube size
902	distalpos_11	Num	8		Distal position of feeding tube
903	distalposc_11	Char	12	$12.	Distal position of feeding tube
904	distalconf_11	Num	8		Was distal position confirmed during this 24 hour period?
905	distalconfc_11	Char	19	$19.	Was distal position confirmed during this 24 hour period?
906	distalhow_11	Num	8		Yes, how confirmed:
907	distalhowc_11	Char	15	$15.	Yes, how confirmed:
908	distaloth_11	Char	40	$40.	Yes, how confirmed: Other
909	fullcal_11	Num	8		Was rate advanced to full-calorie rate during this calendar day?
910	fullcalc_11	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
911	fullcaltm_11	Num	8	TIMEAMPM.	Yes, time full calorie reached:
912	pronevent_11	Num	8		Prone ventilation this 24 hour period?

Num	Variable	Type	Len	Format	Label
913	proneventc_11	Char	3	$3.	Prone ventilation this 24 hour period?
914	recfeedx_11	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
915	goalratex_11	Char	64	$64.	Tube feeding goal rate (Not Done)
916	goalchangex_11	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
917	brand1x_11	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
918	feedhrsx_11	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
919	giintoledenx_11	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
920	distalconfx_11	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
921	fullcalx_11	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
922	surg_12	Num	8		Surgery
923	surgc_12	Char	7	$7.	Surgery
924	residual_12	Num	8		Elevated Residuals
925	residualc_12	Char	18	$18.	Elevated Residuals
926	const_12	Num	8		Constipation
927	constc_12	Char	12	$12.	Constipation
928	cramp_12	Num	8		Abdominal distention or cramping
929	crampc_12	Char	32	$32.	Abdominal distention or cramping
930	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)
931	feedsitex_12	Char	64	$64.	Insertion site of feeding tube (Not Done)
932	tubesizex_12	Char	64	$64.	Feeding tube size (Not Done)
933	distalposx_12	Char	64	$64.	Distal position of feeding tube (Not Done)
934	proneventx_12	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
935	recfeed_12	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
936	recfeedc_12	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
937	goalrate_12	Num	8		Tube feeding goal rate
938	goalchange_12	Num	8		Did the goal rate change during the 24 hour period?
939	goalchangec_12	Char	19	$19.	Did the goal rate change during the 24 hour period?
940	newgoal_12	Num	8		Yes, new goal rate
941	brand1_12	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
942	brand1vol_12	Num	8		Total volume of enteral formula 1 infused for 24 hour period
943	brand2_12	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
944	brand2vol_12	Num	8		Total volume of enteral formula 2 infused for 24 hour period
945	feedhrs_12	Num	8		Number of hours enteral tube feeds on for this 24 hour period
946	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?
947	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?

Num	Variable	Type	Len	Format	Label
948	planext_12	Num	8		Planned Extubation
949	planextc_12	Char	18	$18.	Planned Extubation
950	giint_12	Num	8		GI Intolerance
951	giintc_12	Char	14	$14.	GI Intolerance
952	invbside_12	Num	8		Invasive bedside procedure
953	invbsidec_12	Char	26	$26.	Invasive bedside procedure
954	leftfloor_12	Num	8		Patient left the floor
955	leftfloorc_12	Char	22	$22.	Patient left the floor
956	care_12	Num	8		Nursing Care (i.e. bathing, HOB down)
957	carec_12	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
958	medadm_12	Num	8		Medical Administration
959	medadmc_12	Char	22	$22.	Medical Administration
960	feedoffoth_12	Num	8		Other reason feed turned off:
961	feedoffothc_12	Char	5	$5.	Other reason feed turned off:
962	feedoffreas_12	Char	255	$255.	Other reason feed turned off: Reason
963	giintoleden_12	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
964	giintoledenc_12	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
965	diarrhea_12	Num	8		Diarrhea
966	diarrheac_12	Char	8	$8.	Diarrhea
967	vomiting_12	Num	8		Vomiting
968	vomitingc_12	Char	8	$8.	Vomiting
969	aspiration_12	Num	8		Aspiration
970	aspirationc_12	Char	10	$10.	Aspiration
971	regurg_12	Num	8		Regurgitation
972	regurgc_12	Char	13	$13.	Regurgitation
973	feedsite_12	Num	8		Insertion site of feeding tube
974	feedsitec_12	Char	12	$12.	Insertion site of feeding tube
975	tubesize_12	Num	8		Feeding tube size
976	tubesizec_12	Char	10	$10.	Feeding tube size
977	distalpos_12	Num	8		Distal position of feeding tube
978	distalposc_12	Char	12	$12.	Distal position of feeding tube
979	distalconf_12	Num	8		Was distal position confirmed during this 24 hour period?
980	distalconfc_12	Char	19	$19.	Was distal position confirmed during this 24 hour period?
981	distalhow_12	Num	8		Yes, how confirmed:
982	distalhowc_12	Char	15	$15.	Yes, how confirmed:
983	distaloth_12	Char	40	$40.	Yes, how confirmed: Other
984	fullcal_12	Num	8		Was rate advanced to full-calorie rate during this calendar day?

Num	Variable	Type	Len	Format	Label
985	fullcalc_12	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
986	fullcaltm_12	Num	8	TIMEAMPM.	Yes, time full calorie reached:
987	pronevent_12	Num	8		Prone ventilation this 24 hour period?
988	proneventc_12	Char	3	$3.	Prone ventilation this 24 hour period?
989	recfeedx_12	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
990	goalratex_12	Char	64	$64.	Tube feeding goal rate (Not Done)
991	goalchangex_12	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
992	brand1x_12	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
993	feedhrsx_12	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
994	giintoledenx_12	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
995	distalconfx_12	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
996	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	status	Num	8		Patient status (through Day 90):
12	homedt	Num	8	BEST12.	Home with UAB, date: (Day)
13	deathdt	Num	8	BEST12.	Dead prior to home with UAB, date: (Day)
14	othstatdt	Num	8	BEST12.	Other, date of last known patient status: (Day)
15	hospdcdt	Num	8	BEST12.	If yes, give date: (Day)
16	uabdt	Num	8	BEST12.	Patient reached 48 hour UAB before day 29: Date (Day)
17	uabdt1	Num	8	BEST12.	If yes, date of UAB (first date with no AB): (Day)
18	uabdt2	Num	8	BEST12.	If yes, date of UAB (2nd date with no AB): (Day)
19	uabdt3	Num	8	BEST12.	If yes, date of UAB (3rd date with no AB): (Day)
20	uabdt4	Num	8	BEST12.	If yes, date of UAB (4th date with no AB): (Day)
21	retabdt1	Num	8	BEST12.	If yes, date of return to AB: (Day)
22	retabdt2	Num	8	BEST12.	If yes, date of return to AB: (Day)
23	retabdt3	Num	8	BEST12.	If yes, date of return to AB: (Day)
24	dischargedt1	Num	8	BEST12.	If yes, date of ICU DC: (Day)
25	dischargedt2	Num	8	BEST12.	If yes, date of ICU DC: (Day)
26	dischargedt3	Num	8	BEST12.	If yes, date of ICU DC: (Day)
27	dischargedt4	Num	8	BEST12.	If yes, date of ICU DC: (Day)
28	dischargedt5	Num	8	BEST12.	If yes, date of ICU DC: (Day)
29	readmitdt1	Num	8	BEST12.	If yes, date of ICU readmission: (Day)
30	readmitdt2	Num	8	BEST12.	If yes, date of ICU readmission: (Day)
31	readmitdt3	Num	8	BEST12.	If yes, date of ICU readmission: (Day)
32	readmitdt4	Num	8	BEST12.	If yes, date of ICU readmission: (Day)
33	alive0	Num	8		Is patient alive on day 0?
34	alive1	Num	8		Is patient alive on day 1?
35	alive2	Num	8		Is patient alive on day 2?
36	alive3	Num	8		Is patient alive on day 3?

Num	Variable	Type	Len	Format	Label
37	alive4	Num	8		Is patient alive on day 4?
38	alive5	Num	8		Is patient alive on day 5?
39	alive6	Num	8		Is patient alive on day 6?
40	alive7	Num	8		Is patient alive on day 7?
41	alive8	Num	8		Is patient alive on day 8?
42	alive9	Num	8		Is patient alive on day 9?
43	alive10	Num	8		Is patient alive on day 10?
44	alive11	Num	8		Is patient alive on day 11?
45	alive12	Num	8		Is patient alive on day 12?
46	alive13	Num	8		Is patient alive on day 13?
47	alive14	Num	8		Is patient alive on day 14?
48	alive15	Num	8		Is patient alive on day 15?
49	alive16	Num	8		Is patient alive on day 16?
50	alive17	Num	8		Is patient alive on day 17?
51	alive18	Num	8		Is patient alive on day 18?
52	alive19	Num	8		Is patient alive on day 19?
53	alive20	Num	8		Is patient alive on day 20?
54	alive21	Num	8		Is patient alive on day 21?
55	alive22	Num	8		Is patient alive on day 22?
56	alive23	Num	8		Is patient alive on day 23?
57	alive24	Num	8		Is patient alive on day 24?
58	alive25	Num	8		Is patient alive on day 25?
59	alive26	Num	8		Is patient alive on day 26?
60	alive27	Num	8		Is patient alive on day 27?
61	alive28	Num	8		Is patient alive on day 28?
62	alive29	Num	8		Is patient alive on day 29?
63	alive30	Num	8		Is patient alive on day 30?
64	alive31	Num	8		Is patient alive on day 31?
65	alive32	Num	8		Is patient alive on day 32?
66	alive33	Num	8		Is patient alive on day 33?
67	alive34	Num	8		Is patient alive on day 34?
68	alive35	Num	8		Is patient alive on day 35?
69	alive36	Num	8		Is patient alive on day 36?
70	alive37	Num	8		Is patient alive on day 37?
71	alive38	Num	8		Is patient alive on day 38?
72	alive39	Num	8		Is patient alive on day 39?
73	alive40	Num	8		Is patient alive on day 40?
74	alive41	Num	8		Is patient alive on day 41?
75	alive42	Num	8		Is patient alive on day 42?

Num	Variable	Type	Len	Format	Label
76	alive43	Num	8		Is patient alive on day 43?
77	alive44	Num	8		Is patient alive on day 44?
78	alive45	Num	8		Is patient alive on day 45?
79	alive46	Num	8		Is patient alive on day 46?
80	alive47	Num	8		Is patient alive on day 47?
81	alive48	Num	8		Is patient alive on day 48?
82	alive49	Num	8		Is patient alive on day 49?
83	alive50	Num	8		Is patient alive on day 50?
84	alive51	Num	8		Is patient alive on day 51?
85	alive52	Num	8		Is patient alive on day 52?
86	alive53	Num	8		Is patient alive on day 53?
87	alive54	Num	8		Is patient alive on day 54?
88	alive55	Num	8		Is patient alive on day 55?
89	alive56	Num	8		Is patient alive on day 56?
90	alive57	Num	8		Is patient alive on day 57?
91	alive58	Num	8		Is patient alive on day 58?
92	alive59	Num	8		Is patient alive on day 59?
93	alive60	Num	8		Is patient alive on day 60?
94	home0	Num	8		Has patient been discharged home on day 0?
95	home1	Num	8		Has patient been discharged home on day 1?
96	home2	Num	8		Has patient been discharged home on day 2?
97	home3	Num	8		Has patient been discharged home on day 3?
98	home4	Num	8		Has patient been discharged home on day 4?
99	home5	Num	8		Has patient been discharged home on day 5?
100	home6	Num	8		Has patient been discharged home on day 6?
101	home7	Num	8		Has patient been discharged home on day 7?
102	home8	Num	8		Has patient been discharged home on day 8?
103	home9	Num	8		Has patient been discharged home on day 9?
104	home10	Num	8		Has patient been discharged home on day 10?
105	home11	Num	8		Has patient been discharged home on day 11?
106	home12	Num	8		Has patient been discharged home on day 12?
107	home13	Num	8		Has patient been discharged home on day 13?
108	home14	Num	8		Has patient been discharged home on day 14?
109	home15	Num	8		Has patient been discharged home on day 15?
110	home16	Num	8		Has patient been discharged home on day 16?
111	home17	Num	8		Has patient been discharged home on day 17?
112	home18	Num	8		Has patient been discharged home on day 18?
113	home19	Num	8		Has patient been discharged home on day 19?
114	home20	Num	8		Has patient been discharged home on day 20?

Num	Variable	Type	Len	Format	Label
115	home21	Num	8		Has patient been discharged home on day 21?
116	home22	Num	8		Has patient been discharged home on day 22?
117	home23	Num	8		Has patient been discharged home on day 23?
118	home24	Num	8		Has patient been discharged home on day 24?
119	home25	Num	8		Has patient been discharged home on day 25?
120	home26	Num	8		Has patient been discharged home on day 26?
121	home27	Num	8		Has patient been discharged home on day 27?
122	home28	Num	8		Has patient been discharged home on day 28?
123	home29	Num	8		Has patient been discharged home on day 29?
124	home30	Num	8		Has patient been discharged home on day 30?
125	home31	Num	8		Has patient been discharged home on day 31?
126	home32	Num	8		Has patient been discharged home on day 32?
127	home33	Num	8		Has patient been discharged home on day 33?
128	home34	Num	8		Has patient been discharged home on day 34?
129	home35	Num	8		Has patient been discharged home on day 35?
130	home36	Num	8		Has patient been discharged home on day 36?
131	home37	Num	8		Has patient been discharged home on day 37?
132	home38	Num	8		Has patient been discharged home on day 38?
133	home39	Num	8		Has patient been discharged home on day 39?
134	home40	Num	8		Has patient been discharged home on day 40?
135	home41	Num	8		Has patient been discharged home on day 41?
136	home42	Num	8		Has patient been discharged home on day 42?
137	home43	Num	8		Has patient been discharged home on day 43?
138	home44	Num	8		Has patient been discharged home on day 44?
139	home45	Num	8		Has patient been discharged home on day 45?
140	home46	Num	8		Has patient been discharged home on day 46?
141	home47	Num	8		Has patient been discharged home on day 47?
142	home48	Num	8		Has patient been discharged home on day 48?
143	home49	Num	8		Has patient been discharged home on day 49?
144	home50	Num	8		Has patient been discharged home on day 50?
145	home51	Num	8		Has patient been discharged home on day 51?
146	home52	Num	8		Has patient been discharged home on day 52?
147	home53	Num	8		Has patient been discharged home on day 53?
148	home54	Num	8		Has patient been discharged home on day 54?
149	home55	Num	8		Has patient been discharged home on day 55?
150	home56	Num	8		Has patient been discharged home on day 56?
151	home57	Num	8		Has patient been discharged home on day 57?
152	home58	Num	8		Has patient been discharged home on day 58?
153	home59	Num	8		Has patient been discharged home on day 59?

Num	Variable	Type	Len	Format	Label
154	home60	Num	8		Has patient been discharged home on day 60?
155	breathwoa0	Num	8		Is patient alive and breathing without assistance on day 0?
156	breathwoa1	Num	8		Is patient alive and breathing without assistance on day 1?
157	breathwoa2	Num	8		Is patient alive and breathing without assistance on day 2?
158	breathwoa3	Num	8		Is patient alive and breathing without assistance on day 3?
159	breathwoa4	Num	8		Is patient alive and breathing without assistance on day 4?
160	breathwoa5	Num	8		Is patient alive and breathing without assistance on day 5?
161	breathwoa6	Num	8		Is patient alive and breathing without assistance on day 6?
162	breathwoa7	Num	8		Is patient alive and breathing without assistance on day 7?
163	breathwoa8	Num	8		Is patient alive and breathing without assistance on day 8?
164	breathwoa9	Num	8		Is patient alive and breathing without assistance on day 9?
165	breathwoa10	Num	8		Is patient alive and breathing without assistance on day 10?
166	breathwoa11	Num	8		Is patient alive and breathing without assistance on day 11?
167	breathwoa12	Num	8		Is patient alive and breathing without assistance on day 12?
168	breathwoa13	Num	8		Is patient alive and breathing without assistance on day 13?
169	breathwoa14	Num	8		Is patient alive and breathing without assistance on day 14?
170	breathwoa15	Num	8		Is patient alive and breathing without assistance on day 15?
171	breathwoa16	Num	8		Is patient alive and breathing without assistance on day 16?
172	breathwoa17	Num	8		Is patient alive and breathing without assistance on day 17?
173	breathwoa18	Num	8		Is patient alive and breathing without assistance on day 18?
174	breathwoa19	Num	8		Is patient alive and breathing without assistance on day 19?
175	breathwoa20	Num	8		Is patient alive and breathing without assistance on day 20?
176	breathwoa21	Num	8		Is patient alive and breathing without assistance on day 21?
177	breathwoa22	Num	8		Is patient alive and breathing without assistance on day 22?
178	breathwoa23	Num	8		Is patient alive and breathing without assistance on day 23?
179	breathwoa24	Num	8		Is patient alive and breathing without assistance on day 24?
180	breathwoa25	Num	8		Is patient alive and breathing without assistance on day 25?
181	breathwoa26	Num	8		Is patient alive and breathing without assistance on day 26?
182	breathwoa27	Num	8		Is patient alive and breathing without assistance on day 27?
183	breathwoa28	Num	8		Is patient alive and breathing without assistance on day 28?
184	breathwoa29	Num	8		Is patient alive and breathing without assistance on day 29?
185	breathwoa30	Num	8		Is patient alive and breathing without assistance on day 30?
186	breathwoa31	Num	8		Is patient alive and breathing without assistance on day 31?
187	breathwoa32	Num	8		Is patient alive and breathing without assistance on day 32?
188	breathwoa33	Num	8		Is patient alive and breathing without assistance on day 33?
189	breathwoa34	Num	8		Is patient alive and breathing without assistance on day 34?
190	breathwoa35	Num	8		Is patient alive and breathing without assistance on day 35?
191	breathwoa36	Num	8		Is patient alive and breathing without assistance on day 36?
192	breathwoa37	Num	8		Is patient alive and breathing without assistance on day 37?

Num	Variable	Type	Len	Format	Label
193	breathwoa38	Num	8		Is patient alive and breathing without assistance on day 38?
194	breathwoa39	Num	8		Is patient alive and breathing without assistance on day 39?
195	breathwoa40	Num	8		Is patient alive and breathing without assistance on day 40?
196	breathwoa41	Num	8		Is patient alive and breathing without assistance on day 41?
197	breathwoa42	Num	8		Is patient alive and breathing without assistance on day 42?
198	breathwoa43	Num	8		Is patient alive and breathing without assistance on day 43?
199	breathwoa44	Num	8		Is patient alive and breathing without assistance on day 44?
200	breathwoa45	Num	8		Is patient alive and breathing without assistance on day 45?
201	breathwoa46	Num	8		Is patient alive and breathing without assistance on day 46?
202	breathwoa47	Num	8		Is patient alive and breathing without assistance on day 47?
203	breathwoa48	Num	8		Is patient alive and breathing without assistance on day 48?
204	breathwoa49	Num	8		Is patient alive and breathing without assistance on day 49?
205	breathwoa50	Num	8		Is patient alive and breathing without assistance on day 50?
206	breathwoa51	Num	8		Is patient alive and breathing without assistance on day 51?
207	breathwoa52	Num	8		Is patient alive and breathing without assistance on day 52?
208	breathwoa53	Num	8		Is patient alive and breathing without assistance on day 53?
209	breathwoa54	Num	8		Is patient alive and breathing without assistance on day 54?
210	breathwoa55	Num	8		Is patient alive and breathing without assistance on day 55?
211	breathwoa56	Num	8		Is patient alive and breathing without assistance on day 56?
212	breathwoa57	Num	8		Is patient alive and breathing without assistance on day 57?
213	breathwoa58	Num	8		Is patient alive and breathing without assistance on day 58?
214	breathwoa59	Num	8		Is patient alive and breathing without assistance on day 59?
215	breathwoa60	Num	8		Is patient alive and breathing without assistance on day 60?
216	inicu0	Num	8		Is patient alive and in the ICU on day 0?
217	inicu1	Num	8		Is patient alive and in the ICU on day 1?
218	inicu2	Num	8		Is patient alive and in the ICU on day 2?
219	inicu3	Num	8		Is patient alive and in the ICU on day 3?
220	inicu4	Num	8		Is patient alive and in the ICU on day 4?
221	inicu5	Num	8		Is patient alive and in the ICU on day 5?
222	inicu6	Num	8		Is patient alive and in the ICU on day 6?
223	inicu7	Num	8		Is patient alive and in the ICU on day 7?
224	inicu8	Num	8		Is patient alive and in the ICU on day 8?
225	inicu9	Num	8		Is patient alive and in the ICU on day 9?
226	inicu10	Num	8		Is patient alive and in the ICU on day 10?
227	inicu11	Num	8		Is patient alive and in the ICU on day 11?
228	inicu12	Num	8		Is patient alive and in the ICU on day 12?
229	inicu13	Num	8		Is patient alive and in the ICU on day 13?
230	inicu14	Num	8		Is patient alive and in the ICU on day 14?
231	inicu15	Num	8		Is patient alive and in the ICU on day 15?

Num	Variable	Type	Len	Format	Label
232	inicu16	Num	8		Is patient alive and in the ICU on day 16?
233	inicu17	Num	8		Is patient alive and in the ICU on day 17?
234	inicu18	Num	8		Is patient alive and in the ICU on day 18?
235	inicu19	Num	8		Is patient alive and in the ICU on day 19?
236	inicu20	Num	8		Is patient alive and in the ICU on day 20?
237	inicu21	Num	8		Is patient alive and in the ICU on day 21?
238	inicu22	Num	8		Is patient alive and in the ICU on day 22?
239	inicu23	Num	8		Is patient alive and in the ICU on day 23?
240	inicu24	Num	8		Is patient alive and in the ICU on day 24?
241	inicu25	Num	8		Is patient alive and in the ICU on day 25?
242	inicu26	Num	8		Is patient alive and in the ICU on day 26?
243	inicu27	Num	8		Is patient alive and in the ICU on day 27?
244	inicu28	Num	8		Is patient alive and in the ICU on day 28?
245	inicu29	Num	8		Is patient alive and in the ICU on day 29?
246	inicu30	Num	8		Is patient alive and in the ICU on day 30?
247	inicu31	Num	8		Is patient alive and in the ICU on day 31?
248	inicu32	Num	8		Is patient alive and in the ICU on day 32?
249	inicu33	Num	8		Is patient alive and in the ICU on day 33?
250	inicu34	Num	8		Is patient alive and in the ICU on day 34?
251	inicu35	Num	8		Is patient alive and in the ICU on day 35?
252	inicu36	Num	8		Is patient alive and in the ICU on day 36?
253	inicu37	Num	8		Is patient alive and in the ICU on day 37?
254	inicu38	Num	8		Is patient alive and in the ICU on day 38?
255	inicu39	Num	8		Is patient alive and in the ICU on day 39?
256	inicu40	Num	8		Is patient alive and in the ICU on day 40?
257	inicu41	Num	8		Is patient alive and in the ICU on day 41?
258	inicu42	Num	8		Is patient alive and in the ICU on day 42?
259	inicu43	Num	8		Is patient alive and in the ICU on day 43?
260	inicu44	Num	8		Is patient alive and in the ICU on day 44?
261	inicu45	Num	8		Is patient alive and in the ICU on day 45?
262	inicu46	Num	8		Is patient alive and in the ICU on day 46?
263	inicu47	Num	8		Is patient alive and in the ICU on day 47?
264	inicu48	Num	8		Is patient alive and in the ICU on day 48?
265	inicu49	Num	8		Is patient alive and in the ICU on day 49?
266	inicu50	Num	8		Is patient alive and in the ICU on day 50?
267	inicu51	Num	8		Is patient alive and in the ICU on day 51?
268	inicu52	Num	8		Is patient alive and in the ICU on day 52?
269	inicu53	Num	8		Is patient alive and in the ICU on day 53?
270	inicu54	Num	8		Is patient alive and in the ICU on day 54?

Num	Variable	Type	Len	Format	Label
271	inicu55	Num	8		Is patient alive and in the ICU on day 55?
272	inicu56	Num	8		Is patient alive and in the ICU on day 56?
273	inicu57	Num	8		Is patient alive and in the ICU on day 57?
274	inicu58	Num	8		Is patient alive and in the ICU on day 58?
275	inicu59	Num	8		Is patient alive and in the ICU on day 59?
276	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	edenpatient	Num	8		
10	omegapatient	Num	8		
11	sedative_0	Num	8		Is patient on a sedative or neuromuscular blocker?
12	sedativec_0	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
13	eye_0	Num	8		Eye opening score:
14	eyec_0	Char	11	$11.	Eye opening score:
15	motor_0	Num	8		Motor response score:
16	motorc_0	Char	26	$26.	Motor response score:
17	verbal_0	Num	8		Verbal response score:
18	verbalc_0	Char	50	$50.	Verbal response score:
19	gcs_0	Num	8		Total
20	gcsdt_0	Num	8	BEST12.	Date Taken (Day)
21	sedativex_0	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
22	eyex_0	Char	64	$64.	Eye opening score: (Not Done)
23	motorx_0	Char	64	$64.	Motor response score: (Not Done)
24	verbalx_0	Char	64	$64.	Verbal response score: (Not Done)
25	VISITORDER_0	Num	8		VISITORDER
26	sedative_7	Num	8		Is patient on a sedative or neuromuscular blocker?
27	sedativec_7	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
28	eye_7	Num	8		Eye opening score:
29	eyec_7	Char	11	$11.	Eye opening score:
30	motor_7	Num	8		Motor response score:
31	motorc_7	Char	26	$26.	Motor response score:
32	verbal_7	Num	8		Verbal response score:
33	verbalc_7	Char	50	$50.	Verbal response score:
34	gcs_7	Num	8		Total
35	gcsdt_7	Num	8	BEST12.	Date Taken (Day)
36	sedativex_7	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)

Num	Variable	Type	Len	Format	Label
37	eyex_7	Char	64	$64.	Eye opening score: (Not Done)
38	motorx_7	Char	64	$64.	Motor response score: (Not Done)
39	verbalx_7	Char	64	$64.	Verbal response score: (Not Done)
40	VISITORDER_7	Num	8		VISITORDER
41	sedative_13	Num	8		Is patient on a sedative or neuromuscular blocker?
42	sedativec_13	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
43	eye_13	Num	8		Eye opening score:
44	eyec_13	Char	11	$11.	Eye opening score:
45	motor_13	Num	8		Motor response score:
46	motorc_13	Char	26	$26.	Motor response score:
47	verbal_13	Num	8		Verbal response score:
48	verbalc_13	Char	50	$50.	Verbal response score:
49	gcs_13	Num	8		Total
50	gcsdt_13	Num	8	BEST12.	Date Taken (Day)
51	sedativex_13	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
52	eyex_13	Char	64	$64.	Eye opening score: (Not Done)
53	motorx_13	Char	64	$64.	Motor response score: (Not Done)
54	verbalx_13	Char	64	$64.	Verbal response score: (Not Done)
55	VISITORDER_13	Num	8		VISITORDER
56	sedative_14	Num	8		Is patient on a sedative or neuromuscular blocker?
57	sedativec_14	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
58	eye_14	Num	8		Eye opening score:
59	eyec_14	Char	11	$11.	Eye opening score:
60	motor_14	Num	8		Motor response score:
61	motorc_14	Char	26	$26.	Motor response score:
62	verbal_14	Num	8		Verbal response score:
63	verbalc_14	Char	50	$50.	Verbal response score:
64	gcs_14	Num	8		Total
65	gcsdt_14	Num	8	BEST12.	Date Taken (Day)
66	sedativex_14	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
67	eyex_14	Char	64	$64.	Eye opening score: (Not Done)
68	motorx_14	Char	64	$64.	Motor response score: (Not Done)
69	verbalx_14	Char	64	$64.	Verbal response score: (Not Done)
70	VISITORDER_14	Num	8		VISITORDER
71	sedative_15	Num	8		Is patient on a sedative or neuromuscular blocker?
72	sedativec_15	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
73	eye_15	Num	8		Eye opening score:
74	eyec_15	Char	11	$11.	Eye opening score:
75	motor_15	Num	8		Motor response score:

Num	Variable	Type	Len	Format	Label
76	motorc_15	Char	26	$26.	Motor response score:
77	verbal_15	Num	8		Verbal response score:
78	verbalc_15	Char	50	$50.	Verbal response score:
79	gcs_15	Num	8		Total
80	gcsdt_15	Num	8	BEST12.	Date Taken (Day)
81	sedativex_15	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
82	eyex_15	Char	64	$64.	Eye opening score: (Not Done)
83	motorx_15	Char	64	$64.	Motor response score: (Not Done)
84	verbalx_15	Char	64	$64.	Verbal response score: (Not Done)
85	VISITORDER_15	Num	8		VISITORDER
86	sedative_16	Num	8		Is patient on a sedative or neuromuscular blocker?
87	sedativec_16	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
88	eye_16	Num	8		Eye opening score:
89	eyec_16	Char	11	$11.	Eye opening score:
90	motor_16	Num	8		Motor response score:
91	motorc_16	Char	26	$26.	Motor response score:
92	verbal_16	Num	8		Verbal response score:
93	verbalc_16	Char	50	$50.	Verbal response score:
94	gcs_16	Num	8		Total
95	gcsdt_16	Num	8	BEST12.	Date Taken (Day)
96	sedativex_16	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
97	eyex_16	Char	64	$64.	Eye opening score: (Not Done)
98	motorx_16	Char	64	$64.	Motor response score: (Not Done)
99	verbalx_16	Char	64	$64.	Verbal response score: (Not Done)
100	VISITORDER_16	Num	8		VISITORDER
101	sedative_17	Num	8		Is patient on a sedative or neuromuscular blocker?
102	sedativec_17	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
103	eye_17	Num	8		Eye opening score:
104	eyec_17	Char	11	$11.	Eye opening score:
105	motor_17	Num	8		Motor response score:
106	motorc_17	Char	26	$26.	Motor response score:
107	verbal_17	Num	8		Verbal response score:
108	verbalc_17	Char	50	$50.	Verbal response score:
109	gcs_17	Num	8		Total
110	gcsdt_17	Num	8	BEST12.	Date Taken (Day)
111	sedativex_17	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
112	eyex_17	Char	64	$64.	Eye opening score: (Not Done)
113	motorx_17	Char	64	$64.	Motor response score: (Not Done)
114	verbalx_17	Char	64	$64.	Verbal response score: (Not Done)

Num	Variable	Type	Len	Format	Label
115	VISITORDER_17	Num	8		VISITORDER
116	sedative_18	Num	8		Is patient on a sedative or neuromuscular blocker?
117	sedativec_18	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
118	eye_18	Num	8		Eye opening score:
119	eyec_18	Char	11	$11.	Eye opening score:
120	motor_18	Num	8		Motor response score:
121	motorc_18	Char	26	$26.	Motor response score:
122	verbal_18	Num	8		Verbal response score:
123	verbalc_18	Char	50	$50.	Verbal response score:
124	gcs_18	Num	8		Total
125	gcsdt_18	Num	8	BEST12.	Date Taken (Day)
126	sedativex_18	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
127	eyex_18	Char	64	$64.	Eye opening score: (Not Done)
128	motorx_18	Char	64	$64.	Motor response score: (Not Done)
129	verbalx_18	Char	64	$64.	Verbal response score: (Not Done)
130	VISITORDER_18	Num	8		VISITORDER
131	sedative_19	Num	8		Is patient on a sedative or neuromuscular blocker?
132	sedativec_19	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
133	eye_19	Num	8		Eye opening score:
134	eyec_19	Char	11	$11.	Eye opening score:
135	motor_19	Num	8		Motor response score:
136	motorc_19	Char	26	$26.	Motor response score:
137	verbal_19	Num	8		Verbal response score:
138	verbalc_19	Char	50	$50.	Verbal response score:
139	gcs_19	Num	8		Total
140	gcsdt_19	Num	8	BEST12.	Date Taken (Day)
141	sedativex_19	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
142	eyex_19	Char	64	$64.	Eye opening score: (Not Done)
143	motorx_19	Char	64	$64.	Motor response score: (Not Done)
144	verbalx_19	Char	64	$64.	Verbal response score: (Not Done)
145	VISITORDER_19	Num	8		VISITORDER
146	sedative_20	Num	8		Is patient on a sedative or neuromuscular blocker?
147	sedativec_20	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
148	eye_20	Num	8		Eye opening score:
149	eyec_20	Char	11	$11.	Eye opening score:
150	motor_20	Num	8		Motor response score:
151	motorc_20	Char	26	$26.	Motor response score:
152	verbal_20	Num	8		Verbal response score:
153	verbalc_20	Char	50	$50.	Verbal response score:

Num	Variable	Type	Len	Format	Label
154	gcs_20	Num	8		Total
155	gcsdt_20	Num	8	BEST12.	Date Taken (Day)
156	sedativex_20	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
157	eyex_20	Char	64	$64.	Eye opening score: (Not Done)
158	motorx_20	Char	64	$64.	Motor response score: (Not Done)
159	verbalx_20	Char	64	$64.	Verbal response score: (Not Done)
160	VISITORDER_20	Num	8		VISITORDER
161	sedative_28	Num	8		Is patient on a sedative or neuromuscular blocker?
162	sedativec_28	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
163	eye_28	Num	8		Eye opening score:
164	eyec_28	Char	11	$11.	Eye opening score:
165	motor_28	Num	8		Motor response score:
166	motorc_28	Char	26	$26.	Motor response score:
167	verbal_28	Num	8		Verbal response score:
168	verbalc_28	Char	50	$50.	Verbal response score:
169	gcs_28	Num	8		Total
170	gcsdt_28	Num	8	BEST12.	Date Taken (Day)
171	sedativex_28	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
172	eyex_28	Char	64	$64.	Eye opening score: (Not Done)
173	motorx_28	Char	64	$64.	Motor response score: (Not Done)
174	verbalx_28	Char	64	$64.	Verbal response score: (Not Done)
175	VISITORDER_28	Num	8		VISITORDER
176	sedative_uns	Num	8		Is patient on a sedative or neuromuscular blocker?
177	sedativec_uns	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
178	eye_uns	Num	8		Eye opening score:
179	eyec_uns	Char	11	$11.	Eye opening score:
180	motor_uns	Num	8		Motor response score:
181	motorc_uns	Char	26	$26.	Motor response score:
182	verbal_uns	Num	8		Verbal response score:
183	verbalc_uns	Char	50	$50.	Verbal response score:
184	gcs_uns	Num	8		Total
185	gcsdt_uns	Num	8	BEST12.	Date Taken (Day)
186	sedativex_uns	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
187	eyex_uns	Char	64	$64.	Eye opening score: (Not Done)
188	motorx_uns	Char	64	$64.	Motor response score: (Not Done)
189	verbalx_uns	Char	64	$64.	Verbal response score: (Not Done)
190	VISITORDER_uns	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	proprate	Num	8		Propofol infusion rate at time of randomization
12	feedgrp	Num	8		Enteral Feeding Group
13	feedgrpc	Char	12	$12.	Enteral Feeding Group
14	prebasefeed	Num	8		In the 12 hours prior to enrollment, did patient receive any enteral feedings?
15	prebasefeedc	Char	72	$72.	In the 12 hours prior to enrollment, did patient receive any enteral feedings?
16	prebasevol	Num	8		Yes, enter total volume of enteral feeds in 12 hours prior to enrollment
17	feedinitdt	Num	8	BEST12.	Date and time of initiation of protocol specified enteral feeds (Day)
18	feedinittm	Num	8	TIME5.	Date and time of initiation of protocol specified enteral feeds (Time)
19	recfeed_0	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
20	recfeedc_0	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
21	goalrate_0	Num	8		Tube feeding goal rate
22	goalchange_0	Num	8		Did the goal rate change during the 24 hour period?
23	goalchangec_0	Char	19	$19.	Did the goal rate change during the 24 hour period?
24	newgoal_0	Num	8		New goal rate
25	brand1_0	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
26	brand1vol_0	Num	8		Total volume of enteral formula 1 infused for 24 hour period
27	brand2_0	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
28	brand2vol_0	Num	8		Total volume of enteral formula 2 infused for 24 hour period
29	feedhrs_0	Num	8		Number of hours enteral tube feeds on for this 24 hour period
30	feedoff_0	Num	8		Feeds turned off for > 30 minutes within 24 hour period
31	feedoffc_0	Char	61	$61.	Feeds turned off for > 30 minutes within 24 hour period
32	planext_0	Num	8		Planned Extubation
33	planextc_0	Char	18	$18.	Planned Extubation
34	giint_0	Num	8		GI Intolerance
35	giintc_0	Char	14	$14.	GI Intolerance
36	invbside_0	Num	8		Invasive bedside procedure

Num	Variable	Type	Len	Format	Label
37	invbsidec_0	Char	26	$26.	Invasive bedside procedure
38	surgery	Num	8		Surgery
39	surgeryc	Char	7	$7.	Surgery
40	leftfloor_0	Num	8		Patient left the floor
41	leftfloorc_0	Char	22	$22.	Patient left the floor
42	care_0	Num	8		Nursing Care(ie bathing, HOB down)
43	carec_0	Char	34	$34.	Nursing Care(ie bathing, HOB down)
44	medadm_0	Num	8		Medical Administration
45	medadmc_0	Char	22	$22.	Medical Administration
46	feedoffoth_0	Num	8		Other reason feed turned off:
47	feedoffothc_0	Char	5	$5.	Other reason feed turned off:
48	feedoffreas_0	Char	255	$255.	Other reason feed turned off: Reason
49	giintoleden_0	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
50	giintoledenc_0	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
51	diarrhea_0	Num	8		Diarrhea
52	diarrheac_0	Char	8	$8.	Diarrhea
53	vomiting_0	Num	8		Vomiting
54	vomitingc_0	Char	8	$8.	Vomiting
55	aspiration_0	Num	8		Aspiration
56	aspirationc_0	Char	10	$10.	Aspiration
57	elevresid	Num	8		Elevated Residuals
58	elevresidc	Char	18	$18.	Elevated Residuals
59	regurg_0	Num	8		Regurgitation
60	regurgc_0	Char	13	$13.	Regurgitation
61	constipation	Num	8		Constipation
62	constipationc	Char	12	$12.	Constipation
63	cramping	Num	8		Abdominal distention or cramping
64	crampingc	Char	32	$32.	Abdominal distention or cramping
65	feedsite_0	Num	8		Insertion site of feeding tube:
66	feedsitec_0	Char	12	$12.	Insertion site of feeding tube:
67	tubesize_0	Num	8		Feeding tube size
68	tubesizec_0	Char	10	$10.	Feeding tube size
69	distalpos_0	Num	8		Distal position of feeding tube
70	distalposc_0	Char	12	$12.	Distal position of feeding tube
71	distalconf_0	Num	8		Was distal position confirmed during this 24 hour period?
72	distalconfc_0	Char	19	$19.	Was distal position confirmed during this 24 hour period?
73	distalhow_0	Num	8		How distal position confirmed

Num	Variable	Type	Len	Format	Label
74	distalhowc_0	Char	15	$15.	How distal position confirmed
75	distaloth_0	Char	40	$40.	How distal position confirmed: other
76	fullcal_0	Num	8		Was rate advanced to full-calorie rate during this calendar day?
77	fullcalc_0	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
78	fullcaltm_0	Num	8	TIMEAMPM.	time full calorie reached
79	pronevent_0	Num	8		Prone ventilation between randomization and midnight?
80	proneventc_0	Char	3	$3.	Prone ventilation between randomization and midnight?
81	propratex	Char	64	$64.	Propofol infusion rate at time of randomization (Not Done)
82	feedgrpx	Char	64	$64.	Enteral Feeding Group (Not Done)
83	prebasefeedx	Char	64	$64.	In the 12 hours prior to enrollment, did patient receive any enteral feedings? (Not Done)
84	feedinitdtmx	Char	64	$64.	Date and time of initiation of protocol specified enteral feeds (Not Done)
85	recfeedx_0	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
86	goalratex_0	Char	64	$64.	Tube feeding goal rate (Not Done)
87	goalchangex_0	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
88	brand1x_0	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period (Not Done)
89	feedhrsx_0	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
90	feedoffX	Char	64	$64.	Feeds turned off for > 30 minutes within 24 hour period (Not Done)
91	giintoledenx_0	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
92	feedsiteX	Char	64	$64.	Insertion site of feeding tube: (Not Done)
93	tubesizeX	Char	64	$64.	Feeding tube size (Not Done)
94	distalposX	Char	64	$64.	Distal position of feeding tube (Not Done)
95	distalconfx_0	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
96	fullcalx_0	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
97	surg_1	Num	8		Surgery
98	surgc_1	Char	7	$7.	Surgery
99	residual_1	Num	8		Elevated Residuals
100	residualc_1	Char	18	$18.	Elevated Residuals
101	const_1	Num	8		Constipation
102	constc_1	Char	12	$12.	Constipation
103	cramp_1	Num	8		Abdominal distention or cramping
104	crampc_1	Char	32	$32.	Abdominal distention or cramping
105	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)
106	feedsitex_1	Char	64	$64.	Insertion site of feeding tube (Not Done)
107	tubesizex_1	Char	64	$64.	Feeding tube size (Not Done)
108	distalposx_1	Char	64	$64.	Distal position of feeding tube (Not Done)
109	proneventx_1	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)

Num	Variable	Type	Len	Format	Label
110	recfeed_1	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
111	recfeedc_1	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
112	goalrate_1	Num	8		Tube feeding goal rate
113	goalchange_1	Num	8		Did the goal rate change during the 24 hour period?
114	goalchangec_1	Char	19	$19.	Did the goal rate change during the 24 hour period?
115	newgoal_1	Num	8		Yes, new goal rate
116	brand1_1	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
117	brand1vol_1	Num	8		Total volume of enteral formula 1 infused for 24 hour period
118	brand2_1	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
119	brand2vol_1	Num	8		Total volume of enteral formula 2 infused for 24 hour period
120	feedhrs_1	Num	8		Number of hours enteral tube feeds on for this 24 hour period
121	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?
122	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?
123	planext_1	Num	8		Planned Extubation
124	planextc_1	Char	18	$18.	Planned Extubation
125	giint_1	Num	8		GI Intolerance
126	giintc_1	Char	14	$14.	GI Intolerance
127	invbside_1	Num	8		Invasive bedside procedure
128	invbsidec_1	Char	26	$26.	Invasive bedside procedure
129	leftfloor_1	Num	8		Patient left the floor
130	leftfloorc_1	Char	22	$22.	Patient left the floor
131	care_1	Num	8		Nursing Care (i.e. bathing, HOB down)
132	carec_1	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
133	medadm_1	Num	8		Medical Administration
134	medadmc_1	Char	22	$22.	Medical Administration
135	feedoffoth_1	Num	8		Other reason feed turned off:
136	feedoffothc_1	Char	5	$5.	Other reason feed turned off:
137	feedoffreas_1	Char	255	$255.	Other reason feed turned off: Reason
138	giintoleden_1	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
139	giintoledenc_1	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
140	diarrhea_1	Num	8		Diarrhea
141	diarrheac_1	Char	8	$8.	Diarrhea
142	vomiting_1	Num	8		Vomiting
143	vomitingc_1	Char	8	$8.	Vomiting
144	aspiration_1	Num	8		Aspiration
145	aspirationc_1	Char	10	$10.	Aspiration

Num	Variable	Type	Len	Format	Label
146	regurg_1	Num	8		Regurgitation
147	regurgc_1	Char	13	$13.	Regurgitation
148	feedsite_1	Num	8		Insertion site of feeding tube
149	feedsitec_1	Char	12	$12.	Insertion site of feeding tube
150	tubesize_1	Num	8		Feeding tube size
151	tubesizec_1	Char	10	$10.	Feeding tube size
152	distalpos_1	Num	8		Distal position of feeding tube
153	distalposc_1	Char	12	$12.	Distal position of feeding tube
154	distalconf_1	Num	8		Was distal position confirmed during this 24 hour period?
155	distalconfc_1	Char	19	$19.	Was distal position confirmed during this 24 hour period?
156	distalhow_1	Num	8		Yes, how confirmed:
157	distalhowc_1	Char	15	$15.	Yes, how confirmed:
158	distaloth_1	Char	40	$40.	Yes, how confirmed: Other
159	fullcal_1	Num	8		Was rate advanced to full-calorie rate during this calendar day?
160	fullcalc_1	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
161	fullcaltm_1	Num	8	TIMEAMPM.	Yes, time full calorie reached:
162	pronevent_1	Num	8		Prone ventilation this 24 hour period?
163	proneventc_1	Char	3	$3.	Prone ventilation this 24 hour period?
164	recfeedx_1	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
165	goalratex_1	Char	64	$64.	Tube feeding goal rate (Not Done)
166	goalchangex_1	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
167	brand1x_1	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
168	feedhrsx_1	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
169	giintoledenx_1	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
170	distalconfx_1	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
171	fullcalx_1	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
172	surg_2	Num	8		Surgery
173	surgc_2	Char	7	$7.	Surgery
174	residual_2	Num	8		Elevated Residuals
175	residualc_2	Char	18	$18.	Elevated Residuals
176	const_2	Num	8		Constipation
177	constc_2	Char	12	$12.	Constipation
178	cramp_2	Num	8		Abdominal distention or cramping
179	crampc_2	Char	32	$32.	Abdominal distention or cramping
180	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)
181	feedsitex_2	Char	64	$64.	Insertion site of feeding tube (Not Done)
182	tubesizex_2	Char	64	$64.	Feeding tube size (Not Done)

Num	Variable	Type	Len	Format	Label
183	distalposx_2	Char	64	$64.	Distal position of feeding tube (Not Done)
184	proneventx_2	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
185	recfeed_2	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
186	recfeedc_2	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
187	goalrate_2	Num	8		Tube feeding goal rate
188	goalchange_2	Num	8		Did the goal rate change during the 24 hour period?
189	goalchangec_2	Char	19	$19.	Did the goal rate change during the 24 hour period?
190	newgoal_2	Num	8		Yes, new goal rate
191	brand1_2	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
192	brand1vol_2	Num	8		Total volume of enteral formula 1 infused for 24 hour period
193	brand2_2	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
194	brand2vol_2	Num	8		Total volume of enteral formula 2 infused for 24 hour period
195	feedhrs_2	Num	8		Number of hours enteral tube feeds on for this 24 hour period
196	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?
197	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?
198	planext_2	Num	8		Planned Extubation
199	planextc_2	Char	18	$18.	Planned Extubation
200	giint_2	Num	8		GI Intolerance
201	giintc_2	Char	14	$14.	GI Intolerance
202	invbside_2	Num	8		Invasive bedside procedure
203	invbsidec_2	Char	26	$26.	Invasive bedside procedure
204	leftfloor_2	Num	8		Patient left the floor
205	leftfloorc_2	Char	22	$22.	Patient left the floor
206	care_2	Num	8		Nursing Care (i.e. bathing, HOB down)
207	carec_2	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
208	medadm_2	Num	8		Medical Administration
209	medadmc_2	Char	22	$22.	Medical Administration
210	feedoffoth_2	Num	8		Other reason feed turned off:
211	feedoffothc_2	Char	5	$5.	Other reason feed turned off:
212	feedoffreas_2	Char	255	$255.	Other reason feed turned off: Reason
213	giintoleden_2	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
214	giintoledenc_2	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
215	diarrhea_2	Num	8		Diarrhea
216	diarrheac_2	Char	8	$8.	Diarrhea
217	vomiting_2	Num	8		Vomiting
218	vomitingc_2	Char	8	$8.	Vomiting

Num	Variable	Type	Len	Format	Label
219	aspiration_2	Num	8		Aspiration
220	aspirationc_2	Char	10	$10.	Aspiration
221	regurg_2	Num	8		Regurgitation
222	regurgc_2	Char	13	$13.	Regurgitation
223	feedsite_2	Num	8		Insertion site of feeding tube
224	feedsitec_2	Char	12	$12.	Insertion site of feeding tube
225	tubesize_2	Num	8		Feeding tube size
226	tubesizec_2	Char	10	$10.	Feeding tube size
227	distalpos_2	Num	8		Distal position of feeding tube
228	distalposc_2	Char	12	$12.	Distal position of feeding tube
229	distalconf_2	Num	8		Was distal position confirmed during this 24 hour period?
230	distalconfc_2	Char	19	$19.	Was distal position confirmed during this 24 hour period?
231	distalhow_2	Num	8		Yes, how confirmed:
232	distalhowc_2	Char	15	$15.	Yes, how confirmed:
233	distaloth_2	Char	40	$40.	Yes, how confirmed: Other
234	fullcal_2	Num	8		Was rate advanced to full-calorie rate during this calendar day?
235	fullcalc_2	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
236	fullcaltm_2	Num	8	TIMEAMPM.	Yes, time full calorie reached:
237	pronevent_2	Num	8		Prone ventilation this 24 hour period?
238	proneventc_2	Char	3	$3.	Prone ventilation this 24 hour period?
239	recfeedx_2	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
240	goalratex_2	Char	64	$64.	Tube feeding goal rate (Not Done)
241	goalchangex_2	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
242	brand1x_2	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
243	feedhrsx_2	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
244	giintoledenx_2	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
245	distalconfx_2	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
246	fullcalx_2	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
247	surg_3	Num	8		Surgery
248	surgc_3	Char	7	$7.	Surgery
249	residual_3	Num	8		Elevated Residuals
250	residualc_3	Char	18	$18.	Elevated Residuals
251	const_3	Num	8		Constipation
252	constc_3	Char	12	$12.	Constipation
253	cramp_3	Num	8		Abdominal distention or cramping
254	crampc_3	Char	32	$32.	Abdominal distention or cramping
255	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)

Num	Variable	Type	Len	Format	Label
256	feedsitex_3	Char	64	$64.	Insertion site of feeding tube (Not Done)
257	tubesizex_3	Char	64	$64.	Feeding tube size (Not Done)
258	distalposx_3	Char	64	$64.	Distal position of feeding tube (Not Done)
259	proneventx_3	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
260	recfeed_3	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
261	recfeedc_3	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
262	goalrate_3	Num	8		Tube feeding goal rate
263	goalchange_3	Num	8		Did the goal rate change during the 24 hour period?
264	goalchangec_3	Char	19	$19.	Did the goal rate change during the 24 hour period?
265	newgoal_3	Num	8		Yes, new goal rate
266	brand1_3	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
267	brand1vol_3	Num	8		Total volume of enteral formula 1 infused for 24 hour period
268	brand2_3	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
269	brand2vol_3	Num	8		Total volume of enteral formula 2 infused for 24 hour period
270	feedhrs_3	Num	8		Number of hours enteral tube feeds on for this 24 hour period
271	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?
272	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?
273	planext_3	Num	8		Planned Extubation
274	planextc_3	Char	18	$18.	Planned Extubation
275	giint_3	Num	8		GI Intolerance
276	giintc_3	Char	14	$14.	GI Intolerance
277	invbside_3	Num	8		Invasive bedside procedure
278	invbsidec_3	Char	26	$26.	Invasive bedside procedure
279	leftfloor_3	Num	8		Patient left the floor
280	leftfloorc_3	Char	22	$22.	Patient left the floor
281	care_3	Num	8		Nursing Care (i.e. bathing, HOB down)
282	carec_3	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
283	medadm_3	Num	8		Medical Administration
284	medadmc_3	Char	22	$22.	Medical Administration
285	feedoffoth_3	Num	8		Other reason feed turned off:
286	feedoffothc_3	Char	5	$5.	Other reason feed turned off:
287	feedoffreas_3	Char	255	$255.	Other reason feed turned off: Reason
288	giintoleden_3	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
289	giintoledenc_3	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
290	diarrhea_3	Num	8		Diarrhea
291	diarrheac_3	Char	8	$8.	Diarrhea

Num	Variable	Type	Len	Format	Label
292	vomiting_3	Num	8		Vomiting
293	vomitingc_3	Char	8	$8.	Vomiting
294	aspiration_3	Num	8		Aspiration
295	aspirationc_3	Char	10	$10.	Aspiration
296	regurg_3	Num	8		Regurgitation
297	regurgc_3	Char	13	$13.	Regurgitation
298	feedsite_3	Num	8		Insertion site of feeding tube
299	feedsitec_3	Char	12	$12.	Insertion site of feeding tube
300	tubesize_3	Num	8		Feeding tube size
301	tubesizec_3	Char	10	$10.	Feeding tube size
302	distalpos_3	Num	8		Distal position of feeding tube
303	distalposc_3	Char	12	$12.	Distal position of feeding tube
304	distalconf_3	Num	8		Was distal position confirmed during this 24 hour period?
305	distalconfc_3	Char	19	$19.	Was distal position confirmed during this 24 hour period?
306	distalhow_3	Num	8		Yes, how confirmed:
307	distalhowc_3	Char	15	$15.	Yes, how confirmed:
308	distaloth_3	Char	40	$40.	Yes, how confirmed: Other
309	fullcal_3	Num	8		Was rate advanced to full-calorie rate during this calendar day?
310	fullcalc_3	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
311	fullcaltm_3	Num	8	TIMEAMPM.	Yes, time full calorie reached:
312	pronevent_3	Num	8		Prone ventilation this 24 hour period?
313	proneventc_3	Char	3	$3.	Prone ventilation this 24 hour period?
314	recfeedx_3	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
315	goalratex_3	Char	64	$64.	Tube feeding goal rate (Not Done)
316	goalchangex_3	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
317	brand1x_3	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
318	feedhrsx_3	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
319	giintoledenx_3	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
320	distalconfx_3	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
321	fullcalx_3	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
322	surg_4	Num	8		Surgery
323	surgc_4	Char	7	$7.	Surgery
324	residual_4	Num	8		Elevated Residuals
325	residualc_4	Char	18	$18.	Elevated Residuals
326	const_4	Num	8		Constipation
327	constc_4	Char	12	$12.	Constipation
328	cramp_4	Num	8		Abdominal distention or cramping

Num	Variable	Type	Len	Format	Label
329	crampc_4	Char	32	$32.	Abdominal distention or cramping
330	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)
331	feedsitex_4	Char	64	$64.	Insertion site of feeding tube (Not Done)
332	tubesizex_4	Char	64	$64.	Feeding tube size (Not Done)
333	distalposx_4	Char	64	$64.	Distal position of feeding tube (Not Done)
334	proneventx_4	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
335	recfeed_4	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
336	recfeedc_4	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
337	goalrate_4	Num	8		Tube feeding goal rate
338	goalchange_4	Num	8		Did the goal rate change during the 24 hour period?
339	goalchangec_4	Char	19	$19.	Did the goal rate change during the 24 hour period?
340	newgoal_4	Num	8		Yes, new goal rate
341	brand1_4	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
342	brand1vol_4	Num	8		Total volume of enteral formula 1 infused for 24 hour period
343	brand2_4	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
344	brand2vol_4	Num	8		Total volume of enteral formula 2 infused for 24 hour period
345	feedhrs_4	Num	8		Number of hours enteral tube feeds on for this 24 hour period
346	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?
347	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?
348	planext_4	Num	8		Planned Extubation
349	planextc_4	Char	18	$18.	Planned Extubation
350	giint_4	Num	8		GI Intolerance
351	giintc_4	Char	14	$14.	GI Intolerance
352	invbside_4	Num	8		Invasive bedside procedure
353	invbsidec_4	Char	26	$26.	Invasive bedside procedure
354	leftfloor_4	Num	8		Patient left the floor
355	leftfloorc_4	Char	22	$22.	Patient left the floor
356	care_4	Num	8		Nursing Care (i.e. bathing, HOB down)
357	carec_4	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
358	medadm_4	Num	8		Medical Administration
359	medadmc_4	Char	22	$22.	Medical Administration
360	feedoffoth_4	Num	8		Other reason feed turned off:
361	feedoffothc_4	Char	5	$5.	Other reason feed turned off:
362	feedoffreas_4	Char	255	$255.	Other reason feed turned off: Reason
363	giintoleden_4	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
364	giintoledenc_4	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
365	diarrhea_4	Num	8		Diarrhea
366	diarrheac_4	Char	8	$8.	Diarrhea
367	vomiting_4	Num	8		Vomiting
368	vomitingc_4	Char	8	$8.	Vomiting
369	aspiration_4	Num	8		Aspiration
370	aspirationc_4	Char	10	$10.	Aspiration
371	regurg_4	Num	8		Regurgitation
372	regurgc_4	Char	13	$13.	Regurgitation
373	feedsite_4	Num	8		Insertion site of feeding tube
374	feedsitec_4	Char	12	$12.	Insertion site of feeding tube
375	tubesize_4	Num	8		Feeding tube size
376	tubesizec_4	Char	10	$10.	Feeding tube size
377	distalpos_4	Num	8		Distal position of feeding tube
378	distalposc_4	Char	12	$12.	Distal position of feeding tube
379	distalconf_4	Num	8		Was distal position confirmed during this 24 hour period?
380	distalconfc_4	Char	19	$19.	Was distal position confirmed during this 24 hour period?
381	distalhow_4	Num	8		Yes, how confirmed:
382	distalhowc_4	Char	15	$15.	Yes, how confirmed:
383	distaloth_4	Char	40	$40.	Yes, how confirmed: Other
384	fullcal_4	Num	8		Was rate advanced to full-calorie rate during this calendar day?
385	fullcalc_4	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
386	fullcaltm_4	Num	8	TIMEAMPM.	Yes, time full calorie reached:
387	pronevent_4	Num	8		Prone ventilation this 24 hour period?
388	proneventc_4	Char	3	$3.	Prone ventilation this 24 hour period?
389	recfeedx_4	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
390	goalratex_4	Char	64	$64.	Tube feeding goal rate (Not Done)
391	goalchangex_4	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
392	brand1x_4	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
393	feedhrsx_4	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
394	giintoledenx_4	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
395	distalconfx_4	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
396	fullcalx_4	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
397	surg_5	Num	8		Surgery
398	surgc_5	Char	7	$7.	Surgery
399	residual_5	Num	8		Elevated Residuals
400	residualc_5	Char	18	$18.	Elevated Residuals

Num	Variable	Type	Len	Format	Label
401	const_5	Num	8		Constipation
402	constc_5	Char	12	$12.	Constipation
403	cramp_5	Num	8		Abdominal distention or cramping
404	crampc_5	Char	32	$32.	Abdominal distention or cramping
405	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)
406	feedsitex_5	Char	64	$64.	Insertion site of feeding tube (Not Done)
407	tubesizex_5	Char	64	$64.	Feeding tube size (Not Done)
408	distalposx_5	Char	64	$64.	Distal position of feeding tube (Not Done)
409	proneventx_5	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
410	recfeed_5	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
411	recfeedc_5	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
412	goalrate_5	Num	8		Tube feeding goal rate
413	goalchange_5	Num	8		Did the goal rate change during the 24 hour period?
414	goalchangec_5	Char	19	$19.	Did the goal rate change during the 24 hour period?
415	newgoal_5	Num	8		Yes, new goal rate
416	brand1_5	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
417	brand1vol_5	Num	8		Total volume of enteral formula 1 infused for 24 hour period
418	brand2_5	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
419	brand2vol_5	Num	8		Total volume of enteral formula 2 infused for 24 hour period
420	feedhrs_5	Num	8		Number of hours enteral tube feeds on for this 24 hour period
421	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?
422	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?
423	planext_5	Num	8		Planned Extubation
424	planextc_5	Char	18	$18.	Planned Extubation
425	giint_5	Num	8		GI Intolerance
426	giintc_5	Char	14	$14.	GI Intolerance
427	invbside_5	Num	8		Invasive bedside procedure
428	invbsidec_5	Char	26	$26.	Invasive bedside procedure
429	leftfloor_5	Num	8		Patient left the floor
430	leftfloorc_5	Char	22	$22.	Patient left the floor
431	care_5	Num	8		Nursing Care (i.e. bathing, HOB down)
432	carec_5	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
433	medadm_5	Num	8		Medical Administration
434	medadmc_5	Char	22	$22.	Medical Administration
435	feedoffoth_5	Num	8		Other reason feed turned off:
436	feedoffothc_5	Char	5	$5.	Other reason feed turned off:
437	feedoffreas_5	Char	255	$255.	Other reason feed turned off: Reason

Num	Variable	Type	Len	Format	Label
438	giintoleden_5	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
439	giintoledenc_5	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
440	diarrhea_5	Num	8		Diarrhea
441	diarrheac_5	Char	8	$8.	Diarrhea
442	vomiting_5	Num	8		Vomiting
443	vomitingc_5	Char	8	$8.	Vomiting
444	aspiration_5	Num	8		Aspiration
445	aspirationc_5	Char	10	$10.	Aspiration
446	regurg_5	Num	8		Regurgitation
447	regurgc_5	Char	13	$13.	Regurgitation
448	feedsite_5	Num	8		Insertion site of feeding tube
449	feedsitec_5	Char	12	$12.	Insertion site of feeding tube
450	tubesize_5	Num	8		Feeding tube size
451	tubesizec_5	Char	10	$10.	Feeding tube size
452	distalpos_5	Num	8		Distal position of feeding tube
453	distalposc_5	Char	12	$12.	Distal position of feeding tube
454	distalconf_5	Num	8		Was distal position confirmed during this 24 hour period?
455	distalconfc_5	Char	19	$19.	Was distal position confirmed during this 24 hour period?
456	distalhow_5	Num	8		Yes, how confirmed:
457	distalhowc_5	Char	15	$15.	Yes, how confirmed:
458	distaloth_5	Char	40	$40.	Yes, how confirmed: Other
459	fullcal_5	Num	8		Was rate advanced to full-calorie rate during this calendar day?
460	fullcalc_5	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
461	fullcaltm_5	Num	8	TIMEAMPM.	Yes, time full calorie reached:
462	pronevent_5	Num	8		Prone ventilation this 24 hour period?
463	proneventc_5	Char	3	$3.	Prone ventilation this 24 hour period?
464	recfeedx_5	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
465	goalratex_5	Char	64	$64.	Tube feeding goal rate (Not Done)
466	goalchangex_5	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
467	brand1x_5	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
468	feedhrsx_5	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
469	giintoledenx_5	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
470	distalconfx_5	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
471	fullcalx_5	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
472	surg_6	Num	8		Surgery
473	surgc_6	Char	7	$7.	Surgery

Num	Variable	Type	Len	Format	Label
474	residual_6	Num	8		Elevated Residuals
475	residualc_6	Char	18	$18.	Elevated Residuals
476	const_6	Num	8		Constipation
477	constc_6	Char	12	$12.	Constipation
478	cramp_6	Num	8		Abdominal distention or cramping
479	crampc_6	Char	32	$32.	Abdominal distention or cramping
480	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)
481	feedsitex_6	Char	64	$64.	Insertion site of feeding tube (Not Done)
482	tubesizex_6	Char	64	$64.	Feeding tube size (Not Done)
483	distalposx_6	Char	64	$64.	Distal position of feeding tube (Not Done)
484	proneventx_6	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
485	recfeed_6	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
486	recfeedc_6	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
487	goalrate_6	Num	8		Tube feeding goal rate
488	goalchange_6	Num	8		Did the goal rate change during the 24 hour period?
489	goalchangec_6	Char	19	$19.	Did the goal rate change during the 24 hour period?
490	newgoal_6	Num	8		Yes, new goal rate
491	brand1_6	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
492	brand1vol_6	Num	8		Total volume of enteral formula 1 infused for 24 hour period
493	brand2_6	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
494	brand2vol_6	Num	8		Total volume of enteral formula 2 infused for 24 hour period
495	feedhrs_6	Num	8		Number of hours enteral tube feeds on for this 24 hour period
496	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?
497	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?
498	planext_6	Num	8		Planned Extubation
499	planextc_6	Char	18	$18.	Planned Extubation
500	giint_6	Num	8		GI Intolerance
501	giintc_6	Char	14	$14.	GI Intolerance
502	invbside_6	Num	8		Invasive bedside procedure
503	invbsidec_6	Char	26	$26.	Invasive bedside procedure
504	leftfloor_6	Num	8		Patient left the floor
505	leftfloorc_6	Char	22	$22.	Patient left the floor
506	care_6	Num	8		Nursing Care (i.e. bathing, HOB down)
507	carec_6	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
508	medadm_6	Num	8		Medical Administration
509	medadmc_6	Char	22	$22.	Medical Administration
510	feedoffoth_6	Num	8		Other reason feed turned off:

Num	Variable	Type	Len	Format	Label
511	feedoffothc_6	Char	5	$5.	Other reason feed turned off:
512	feedoffreas_6	Char	255	$255.	Other reason feed turned off: Reason
513	giintoleden_6	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
514	giintoledenc_6	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
515	diarrhea_6	Num	8		Diarrhea
516	diarrheac_6	Char	8	$8.	Diarrhea
517	vomiting_6	Num	8		Vomiting
518	vomitingc_6	Char	8	$8.	Vomiting
519	aspiration_6	Num	8		Aspiration
520	aspirationc_6	Char	10	$10.	Aspiration
521	regurg_6	Num	8		Regurgitation
522	regurgc_6	Char	13	$13.	Regurgitation
523	feedsite_6	Num	8		Insertion site of feeding tube
524	feedsitec_6	Char	12	$12.	Insertion site of feeding tube
525	tubesize_6	Num	8		Feeding tube size
526	tubesizec_6	Char	10	$10.	Feeding tube size
527	distalpos_6	Num	8		Distal position of feeding tube
528	distalposc_6	Char	12	$12.	Distal position of feeding tube
529	distalconf_6	Num	8		Was distal position confirmed during this 24 hour period?
530	distalconfc_6	Char	19	$19.	Was distal position confirmed during this 24 hour period?
531	distalhow_6	Num	8		Yes, how confirmed:
532	distalhowc_6	Char	15	$15.	Yes, how confirmed:
533	distaloth_6	Char	40	$40.	Yes, how confirmed: Other
534	fullcal_6	Num	8		Was rate advanced to full-calorie rate during this calendar day?
535	fullcalc_6	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
536	fullcaltm_6	Num	8	TIMEAMPM.	Yes, time full calorie reached:
537	pronevent_6	Num	8		Prone ventilation this 24 hour period?
538	proneventc_6	Char	3	$3.	Prone ventilation this 24 hour period?
539	recfeedx_6	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
540	goalratex_6	Char	64	$64.	Tube feeding goal rate (Not Done)
541	goalchangex_6	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
542	brand1x_6	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
543	feedhrsx_6	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
544	giintoledenx_6	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
545	distalconfx_6	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
546	fullcalx_6	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)

Num	Variable	Type	Len	Format	Label
547	surg_7	Num	8		Surgery
548	surgc_7	Char	7	$7.	Surgery
549	residual_7	Num	8		Elevated Residuals
550	residualc_7	Char	18	$18.	Elevated Residuals
551	const_7	Num	8		Constipation
552	constc_7	Char	12	$12.	Constipation
553	cramp_7	Num	8		Abdominal distention or cramping
554	crampc_7	Char	32	$32.	Abdominal distention or cramping
555	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)
556	feedsitex_7	Char	64	$64.	Insertion site of feeding tube (Not Done)
557	tubesizex_7	Char	64	$64.	Feeding tube size (Not Done)
558	distalposx_7	Char	64	$64.	Distal position of feeding tube (Not Done)
559	proneventx_7	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
560	recfeed_7	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
561	recfeedc_7	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
562	goalrate_7	Num	8		Tube feeding goal rate
563	goalchange_7	Num	8		Did the goal rate change during the 24 hour period?
564	goalchangec_7	Char	19	$19.	Did the goal rate change during the 24 hour period?
565	newgoal_7	Num	8		Yes, new goal rate
566	brand1_7	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
567	brand1vol_7	Num	8		Total volume of enteral formula 1 infused for 24 hour period
568	brand2_7	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
569	brand2vol_7	Num	8		Total volume of enteral formula 2 infused for 24 hour period
570	feedhrs_7	Num	8		Number of hours enteral tube feeds on for this 24 hour period
571	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?
572	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?
573	planext_7	Num	8		Planned Extubation
574	planextc_7	Char	18	$18.	Planned Extubation
575	giint_7	Num	8		GI Intolerance
576	giintc_7	Char	14	$14.	GI Intolerance
577	invbside_7	Num	8		Invasive bedside procedure
578	invbsidec_7	Char	26	$26.	Invasive bedside procedure
579	leftfloor_7	Num	8		Patient left the floor
580	leftfloorc_7	Char	22	$22.	Patient left the floor
581	care_7	Num	8		Nursing Care (i.e. bathing, HOB down)
582	carec_7	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
583	medadm_7	Num	8		Medical Administration

Num	Variable	Type	Len	Format	Label
584	medadmc_7	Char	22	$22.	Medical Administration
585	feedoffoth_7	Num	8		Other reason feed turned off:
586	feedoffothc_7	Char	5	$5.	Other reason feed turned off:
587	feedoffreas_7	Char	255	$255.	Other reason feed turned off: Reason
588	giintoleden_7	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
589	giintoledenc_7	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
590	diarrhea_7	Num	8		Diarrhea
591	diarrheac_7	Char	8	$8.	Diarrhea
592	vomiting_7	Num	8		Vomiting
593	vomitingc_7	Char	8	$8.	Vomiting
594	aspiration_7	Num	8		Aspiration
595	aspirationc_7	Char	10	$10.	Aspiration
596	regurg_7	Num	8		Regurgitation
597	regurgc_7	Char	13	$13.	Regurgitation
598	feedsite_7	Num	8		Insertion site of feeding tube
599	feedsitec_7	Char	12	$12.	Insertion site of feeding tube
600	tubesize_7	Num	8		Feeding tube size
601	tubesizec_7	Char	10	$10.	Feeding tube size
602	distalpos_7	Num	8		Distal position of feeding tube
603	distalposc_7	Char	12	$12.	Distal position of feeding tube
604	distalconf_7	Num	8		Was distal position confirmed during this 24 hour period?
605	distalconfc_7	Char	19	$19.	Was distal position confirmed during this 24 hour period?
606	distalhow_7	Num	8		Yes, how confirmed:
607	distalhowc_7	Char	15	$15.	Yes, how confirmed:
608	distaloth_7	Char	40	$40.	Yes, how confirmed: Other
609	fullcal_7	Num	8		Was rate advanced to full-calorie rate during this calendar day?
610	fullcalc_7	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
611	fullcaltm_7	Num	8	TIMEAMPM.	Yes, time full calorie reached:
612	pronevent_7	Num	8		Prone ventilation this 24 hour period?
613	proneventc_7	Char	3	$3.	Prone ventilation this 24 hour period?
614	recfeedx_7	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
615	goalratex_7	Char	64	$64.	Tube feeding goal rate (Not Done)
616	goalchangex_7	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
617	brand1x_7	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
618	feedhrsx_7	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
619	giintoledenx_7	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)

Num	Variable	Type	Len	Format	Label
620	distalconfx_7	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
621	fullcalx_7	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
622	surg_8	Num	8		Surgery
623	surgc_8	Char	7	$7.	Surgery
624	residual_8	Num	8		Elevated Residuals
625	residualc_8	Char	18	$18.	Elevated Residuals
626	const_8	Num	8		Constipation
627	constc_8	Char	12	$12.	Constipation
628	cramp_8	Num	8		Abdominal distention or cramping
629	crampc_8	Char	32	$32.	Abdominal distention or cramping
630	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)
631	feedsitex_8	Char	64	$64.	Insertion site of feeding tube (Not Done)
632	tubesizex_8	Char	64	$64.	Feeding tube size (Not Done)
633	distalposx_8	Char	64	$64.	Distal position of feeding tube (Not Done)
634	proneventx_8	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
635	recfeed_8	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
636	recfeedc_8	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
637	goalrate_8	Num	8		Tube feeding goal rate
638	goalchange_8	Num	8		Did the goal rate change during the 24 hour period?
639	goalchangec_8	Char	19	$19.	Did the goal rate change during the 24 hour period?
640	newgoal_8	Num	8		Yes, new goal rate
641	brand1_8	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
642	brand1vol_8	Num	8		Total volume of enteral formula 1 infused for 24 hour period
643	brand2_8	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
644	brand2vol_8	Num	8		Total volume of enteral formula 2 infused for 24 hour period
645	feedhrs_8	Num	8		Number of hours enteral tube feeds on for this 24 hour period
646	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?
647	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?
648	planext_8	Num	8		Planned Extubation
649	planextc_8	Char	18	$18.	Planned Extubation
650	giint_8	Num	8		GI Intolerance
651	giintc_8	Char	14	$14.	GI Intolerance
652	invbside_8	Num	8		Invasive bedside procedure
653	invbsidec_8	Char	26	$26.	Invasive bedside procedure
654	leftfloor_8	Num	8		Patient left the floor
655	leftfloorc_8	Char	22	$22.	Patient left the floor
656	care_8	Num	8		Nursing Care (i.e. bathing, HOB down)

Num	Variable	Type	Len	Format	Label
657	carec_8	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
658	medadm_8	Num	8		Medical Administration
659	medadmc_8	Char	22	$22.	Medical Administration
660	feedoffoth_8	Num	8		Other reason feed turned off:
661	feedoffothc_8	Char	5	$5.	Other reason feed turned off:
662	feedoffreas_8	Char	255	$255.	Other reason feed turned off: Reason
663	giintoleden_8	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
664	giintoledenc_8	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
665	diarrhea_8	Num	8		Diarrhea
666	diarrheac_8	Char	8	$8.	Diarrhea
667	vomiting_8	Num	8		Vomiting
668	vomitingc_8	Char	8	$8.	Vomiting
669	aspiration_8	Num	8		Aspiration
670	aspirationc_8	Char	10	$10.	Aspiration
671	regurg_8	Num	8		Regurgitation
672	regurgc_8	Char	13	$13.	Regurgitation
673	feedsite_8	Num	8		Insertion site of feeding tube
674	feedsitec_8	Char	12	$12.	Insertion site of feeding tube
675	tubesize_8	Num	8		Feeding tube size
676	tubesizec_8	Char	10	$10.	Feeding tube size
677	distalpos_8	Num	8		Distal position of feeding tube
678	distalposc_8	Char	12	$12.	Distal position of feeding tube
679	distalconf_8	Num	8		Was distal position confirmed during this 24 hour period?
680	distalconfc_8	Char	19	$19.	Was distal position confirmed during this 24 hour period?
681	distalhow_8	Num	8		Yes, how confirmed:
682	distalhowc_8	Char	15	$15.	Yes, how confirmed:
683	distaloth_8	Char	40	$40.	Yes, how confirmed: Other
684	fullcal_8	Num	8		Was rate advanced to full-calorie rate during this calendar day?
685	fullcalc_8	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
686	fullcaltm_8	Num	8	TIMEAMPM.	Yes, time full calorie reached:
687	pronevent_8	Num	8		Prone ventilation this 24 hour period?
688	proneventc_8	Char	3	$3.	Prone ventilation this 24 hour period?
689	recfeedx_8	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
690	goalratex_8	Char	64	$64.	Tube feeding goal rate (Not Done)
691	goalchangex_8	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
692	brand1x_8	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
693	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
694	giintoledenx_8	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
695	distalconfx_8	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
696	fullcalx_8	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
697	surg_9	Num	8		Surgery
698	surgc_9	Char	7	$7.	Surgery
699	residual_9	Num	8		Elevated Residuals
700	residualc_9	Char	18	$18.	Elevated Residuals
701	const_9	Num	8		Constipation
702	constc_9	Char	12	$12.	Constipation
703	cramp_9	Num	8		Abdominal distention or cramping
704	crampc_9	Char	32	$32.	Abdominal distention or cramping
705	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)
706	feedsitex_9	Char	64	$64.	Insertion site of feeding tube (Not Done)
707	tubesizex_9	Char	64	$64.	Feeding tube size (Not Done)
708	distalposx_9	Char	64	$64.	Distal position of feeding tube (Not Done)
709	proneventx_9	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
710	recfeed_9	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
711	recfeedc_9	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
712	goalrate_9	Num	8		Tube feeding goal rate
713	goalchange_9	Num	8		Did the goal rate change during the 24 hour period?
714	goalchangec_9	Char	19	$19.	Did the goal rate change during the 24 hour period?
715	newgoal_9	Num	8		Yes, new goal rate
716	brand1_9	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
717	brand1vol_9	Num	8		Total volume of enteral formula 1 infused for 24 hour period
718	brand2_9	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
719	brand2vol_9	Num	8		Total volume of enteral formula 2 infused for 24 hour period
720	feedhrs_9	Num	8		Number of hours enteral tube feeds on for this 24 hour period
721	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?
722	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?
723	planext_9	Num	8		Planned Extubation
724	planextc_9	Char	18	$18.	Planned Extubation
725	giint_9	Num	8		GI Intolerance
726	giintc_9	Char	14	$14.	GI Intolerance
727	invbside_9	Num	8		Invasive bedside procedure
728	invbsidec_9	Char	26	$26.	Invasive bedside procedure
729	leftfloor_9	Num	8		Patient left the floor

Num	Variable	Type	Len	Format	Label
730	leftfloorc_9	Char	22	$22.	Patient left the floor
731	care_9	Num	8		Nursing Care (i.e. bathing, HOB down)
732	carec_9	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
733	medadm_9	Num	8		Medical Administration
734	medadmc_9	Char	22	$22.	Medical Administration
735	feedoffoth_9	Num	8		Other reason feed turned off:
736	feedoffothc_9	Char	5	$5.	Other reason feed turned off:
737	feedoffreas_9	Char	255	$255.	Other reason feed turned off: Reason
738	giintoleden_9	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
739	giintoledenc_9	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
740	diarrhea_9	Num	8		Diarrhea
741	diarrheac_9	Char	8	$8.	Diarrhea
742	vomiting_9	Num	8		Vomiting
743	vomitingc_9	Char	8	$8.	Vomiting
744	aspiration_9	Num	8		Aspiration
745	aspirationc_9	Char	10	$10.	Aspiration
746	regurg_9	Num	8		Regurgitation
747	regurgc_9	Char	13	$13.	Regurgitation
748	feedsite_9	Num	8		Insertion site of feeding tube
749	feedsitec_9	Char	12	$12.	Insertion site of feeding tube
750	tubesize_9	Num	8		Feeding tube size
751	tubesizec_9	Char	10	$10.	Feeding tube size
752	distalpos_9	Num	8		Distal position of feeding tube
753	distalposc_9	Char	12	$12.	Distal position of feeding tube
754	distalconf_9	Num	8		Was distal position confirmed during this 24 hour period?
755	distalconfc_9	Char	19	$19.	Was distal position confirmed during this 24 hour period?
756	distalhow_9	Num	8		Yes, how confirmed:
757	distalhowc_9	Char	15	$15.	Yes, how confirmed:
758	distaloth_9	Char	40	$40.	Yes, how confirmed: Other
759	fullcal_9	Num	8		Was rate advanced to full-calorie rate during this calendar day?
760	fullcalc_9	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
761	fullcaltm_9	Num	8	TIMEAMPM.	Yes, time full calorie reached:
762	pronevent_9	Num	8		Prone ventilation this 24 hour period?
763	proneventc_9	Char	3	$3.	Prone ventilation this 24 hour period?
764	recfeedx_9	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
765	goalratex_9	Char	64	$64.	Tube feeding goal rate (Not Done)
766	goalchangex_9	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)

Num	Variable	Type	Len	Format	Label
767	brand1x_9	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
768	feedhrsx_9	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
769	giintoledenx_9	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
770	distalconfx_9	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
771	fullcalx_9	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
772	surg_10	Num	8		Surgery
773	surgc_10	Char	7	$7.	Surgery
774	residual_10	Num	8		Elevated Residuals
775	residualc_10	Char	18	$18.	Elevated Residuals
776	const_10	Num	8		Constipation
777	constc_10	Char	12	$12.	Constipation
778	cramp_10	Num	8		Abdominal distention or cramping
779	crampc_10	Char	32	$32.	Abdominal distention or cramping
780	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)
781	feedsitex_10	Char	64	$64.	Insertion site of feeding tube (Not Done)
782	tubesizex_10	Char	64	$64.	Feeding tube size (Not Done)
783	distalposx_10	Char	64	$64.	Distal position of feeding tube (Not Done)
784	proneventx_10	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
785	recfeed_10	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
786	recfeedc_10	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
787	goalrate_10	Num	8		Tube feeding goal rate
788	goalchange_10	Num	8		Did the goal rate change during the 24 hour period?
789	goalchangec_10	Char	19	$19.	Did the goal rate change during the 24 hour period?
790	newgoal_10	Num	8		Yes, new goal rate
791	brand1_10	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
792	brand1vol_10	Num	8		Total volume of enteral formula 1 infused for 24 hour period
793	brand2_10	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
794	brand2vol_10	Num	8		Total volume of enteral formula 2 infused for 24 hour period
795	feedhrs_10	Num	8		Number of hours enteral tube feeds on for this 24 hour period
796	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?
797	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?
798	planext_10	Num	8		Planned Extubation
799	planextc_10	Char	18	$18.	Planned Extubation
800	giint_10	Num	8		GI Intolerance
801	giintc_10	Char	14	$14.	GI Intolerance
802	invbside_10	Num	8		Invasive bedside procedure

Num	Variable	Type	Len	Format	Label
803	invbsidec_10	Char	26	$26.	Invasive bedside procedure
804	leftfloor_10	Num	8		Patient left the floor
805	leftfloorc_10	Char	22	$22.	Patient left the floor
806	care_10	Num	8		Nursing Care (i.e. bathing, HOB down)
807	carec_10	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
808	medadm_10	Num	8		Medical Administration
809	medadmc_10	Char	22	$22.	Medical Administration
810	feedoffoth_10	Num	8		Other reason feed turned off:
811	feedoffothc_10	Char	5	$5.	Other reason feed turned off:
812	feedoffreas_10	Char	255	$255.	Other reason feed turned off: Reason
813	giintoleden_10	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
814	giintoledenc_10	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
815	diarrhea_10	Num	8		Diarrhea
816	diarrheac_10	Char	8	$8.	Diarrhea
817	vomiting_10	Num	8		Vomiting
818	vomitingc_10	Char	8	$8.	Vomiting
819	aspiration_10	Num	8		Aspiration
820	aspirationc_10	Char	10	$10.	Aspiration
821	regurg_10	Num	8		Regurgitation
822	regurgc_10	Char	13	$13.	Regurgitation
823	feedsite_10	Num	8		Insertion site of feeding tube
824	feedsitec_10	Char	12	$12.	Insertion site of feeding tube
825	tubesize_10	Num	8		Feeding tube size
826	tubesizec_10	Char	10	$10.	Feeding tube size
827	distalpos_10	Num	8		Distal position of feeding tube
828	distalposc_10	Char	12	$12.	Distal position of feeding tube
829	distalconf_10	Num	8		Was distal position confirmed during this 24 hour period?
830	distalconfc_10	Char	19	$19.	Was distal position confirmed during this 24 hour period?
831	distalhow_10	Num	8		Yes, how confirmed:
832	distalhowc_10	Char	15	$15.	Yes, how confirmed:
833	distaloth_10	Char	40	$40.	Yes, how confirmed: Other
834	fullcal_10	Num	8		Was rate advanced to full-calorie rate during this calendar day?
835	fullcalc_10	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
836	fullcaltm_10	Num	8	TIMEAMPM.	Yes, time full calorie reached:
837	pronevent_10	Num	8		Prone ventilation this 24 hour period?
838	proneventc_10	Char	3	$3.	Prone ventilation this 24 hour period?
839	recfeedx_10	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
840	goalratex_10	Char	64	$64.	Tube feeding goal rate (Not Done)
841	goalchangex_10	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
842	brand1x_10	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
843	feedhrsx_10	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
844	giintoledenx_10	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
845	distalconfx_10	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
846	fullcalx_10	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
847	surg_11	Num	8		Surgery
848	surgc_11	Char	7	$7.	Surgery
849	residual_11	Num	8		Elevated Residuals
850	residualc_11	Char	18	$18.	Elevated Residuals
851	const_11	Num	8		Constipation
852	constc_11	Char	12	$12.	Constipation
853	cramp_11	Num	8		Abdominal distention or cramping
854	crampc_11	Char	32	$32.	Abdominal distention or cramping
855	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)
856	feedsitex_11	Char	64	$64.	Insertion site of feeding tube (Not Done)
857	tubesizex_11	Char	64	$64.	Feeding tube size (Not Done)
858	distalposx_11	Char	64	$64.	Distal position of feeding tube (Not Done)
859	proneventx_11	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
860	recfeed_11	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
861	recfeedc_11	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
862	goalrate_11	Num	8		Tube feeding goal rate
863	goalchange_11	Num	8		Did the goal rate change during the 24 hour period?
864	goalchangec_11	Char	19	$19.	Did the goal rate change during the 24 hour period?
865	newgoal_11	Num	8		Yes, new goal rate
866	brand1_11	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
867	brand1vol_11	Num	8		Total volume of enteral formula 1 infused for 24 hour period
868	brand2_11	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
869	brand2vol_11	Num	8		Total volume of enteral formula 2 infused for 24 hour period
870	feedhrs_11	Num	8		Number of hours enteral tube feeds on for this 24 hour period
871	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?
872	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?
873	planext_11	Num	8		Planned Extubation
874	planextc_11	Char	18	$18.	Planned Extubation
875	giint_11	Num	8		GI Intolerance

Num	Variable	Type	Len	Format	Label
876	giintc_11	Char	14	$14.	GI Intolerance
877	invbside_11	Num	8		Invasive bedside procedure
878	invbsidec_11	Char	26	$26.	Invasive bedside procedure
879	leftfloor_11	Num	8		Patient left the floor
880	leftfloorc_11	Char	22	$22.	Patient left the floor
881	care_11	Num	8		Nursing Care (i.e. bathing, HOB down)
882	carec_11	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
883	medadm_11	Num	8		Medical Administration
884	medadmc_11	Char	22	$22.	Medical Administration
885	feedoffoth_11	Num	8		Other reason feed turned off:
886	feedoffothc_11	Char	5	$5.	Other reason feed turned off:
887	feedoffreas_11	Char	255	$255.	Other reason feed turned off: Reason
888	giintoleden_11	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
889	giintoledenc_11	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
890	diarrhea_11	Num	8		Diarrhea
891	diarrheac_11	Char	8	$8.	Diarrhea
892	vomiting_11	Num	8		Vomiting
893	vomitingc_11	Char	8	$8.	Vomiting
894	aspiration_11	Num	8		Aspiration
895	aspirationc_11	Char	10	$10.	Aspiration
896	regurg_11	Num	8		Regurgitation
897	regurgc_11	Char	13	$13.	Regurgitation
898	feedsite_11	Num	8		Insertion site of feeding tube
899	feedsitec_11	Char	12	$12.	Insertion site of feeding tube
900	tubesize_11	Num	8		Feeding tube size
901	tubesizec_11	Char	10	$10.	Feeding tube size
902	distalpos_11	Num	8		Distal position of feeding tube
903	distalposc_11	Char	12	$12.	Distal position of feeding tube
904	distalconf_11	Num	8		Was distal position confirmed during this 24 hour period?
905	distalconfc_11	Char	19	$19.	Was distal position confirmed during this 24 hour period?
906	distalhow_11	Num	8		Yes, how confirmed:
907	distalhowc_11	Char	15	$15.	Yes, how confirmed:
908	distaloth_11	Char	40	$40.	Yes, how confirmed: Other
909	fullcal_11	Num	8		Was rate advanced to full-calorie rate during this calendar day?
910	fullcalc_11	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
911	fullcaltm_11	Num	8	TIMEAMPM.	Yes, time full calorie reached:
912	pronevent_11	Num	8		Prone ventilation this 24 hour period?

Num	Variable	Type	Len	Format	Label
913	proneventc_11	Char	3	$3.	Prone ventilation this 24 hour period?
914	recfeedx_11	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
915	goalratex_11	Char	64	$64.	Tube feeding goal rate (Not Done)
916	goalchangex_11	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
917	brand1x_11	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
918	feedhrsx_11	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
919	giintoledenx_11	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
920	distalconfx_11	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
921	fullcalx_11	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
922	surg_12	Num	8		Surgery
923	surgc_12	Char	7	$7.	Surgery
924	residual_12	Num	8		Elevated Residuals
925	residualc_12	Char	18	$18.	Elevated Residuals
926	const_12	Num	8		Constipation
927	constc_12	Char	12	$12.	Constipation
928	cramp_12	Num	8		Abdominal distention or cramping
929	crampc_12	Char	32	$32.	Abdominal distention or cramping
930	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)
931	feedsitex_12	Char	64	$64.	Insertion site of feeding tube (Not Done)
932	tubesizex_12	Char	64	$64.	Feeding tube size (Not Done)
933	distalposx_12	Char	64	$64.	Distal position of feeding tube (Not Done)
934	proneventx_12	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
935	recfeed_12	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
936	recfeedc_12	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
937	goalrate_12	Num	8		Tube feeding goal rate
938	goalchange_12	Num	8		Did the goal rate change during the 24 hour period?
939	goalchangec_12	Char	19	$19.	Did the goal rate change during the 24 hour period?
940	newgoal_12	Num	8		Yes, new goal rate
941	brand1_12	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
942	brand1vol_12	Num	8		Total volume of enteral formula 1 infused for 24 hour period
943	brand2_12	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
944	brand2vol_12	Num	8		Total volume of enteral formula 2 infused for 24 hour period
945	feedhrs_12	Num	8		Number of hours enteral tube feeds on for this 24 hour period
946	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?
947	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?

Num	Variable	Type	Len	Format	Label
948	planext_12	Num	8		Planned Extubation
949	planextc_12	Char	18	$18.	Planned Extubation
950	giint_12	Num	8		GI Intolerance
951	giintc_12	Char	14	$14.	GI Intolerance
952	invbside_12	Num	8		Invasive bedside procedure
953	invbsidec_12	Char	26	$26.	Invasive bedside procedure
954	leftfloor_12	Num	8		Patient left the floor
955	leftfloorc_12	Char	22	$22.	Patient left the floor
956	care_12	Num	8		Nursing Care (i.e. bathing, HOB down)
957	carec_12	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
958	medadm_12	Num	8		Medical Administration
959	medadmc_12	Char	22	$22.	Medical Administration
960	feedoffoth_12	Num	8		Other reason feed turned off:
961	feedoffothc_12	Char	5	$5.	Other reason feed turned off:
962	feedoffreas_12	Char	255	$255.	Other reason feed turned off: Reason
963	giintoleden_12	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
964	giintoledenc_12	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
965	diarrhea_12	Num	8		Diarrhea
966	diarrheac_12	Char	8	$8.	Diarrhea
967	vomiting_12	Num	8		Vomiting
968	vomitingc_12	Char	8	$8.	Vomiting
969	aspiration_12	Num	8		Aspiration
970	aspirationc_12	Char	10	$10.	Aspiration
971	regurg_12	Num	8		Regurgitation
972	regurgc_12	Char	13	$13.	Regurgitation
973	feedsite_12	Num	8		Insertion site of feeding tube
974	feedsitec_12	Char	12	$12.	Insertion site of feeding tube
975	tubesize_12	Num	8		Feeding tube size
976	tubesizec_12	Char	10	$10.	Feeding tube size
977	distalpos_12	Num	8		Distal position of feeding tube
978	distalposc_12	Char	12	$12.	Distal position of feeding tube
979	distalconf_12	Num	8		Was distal position confirmed during this 24 hour period?
980	distalconfc_12	Char	19	$19.	Was distal position confirmed during this 24 hour period?
981	distalhow_12	Num	8		Yes, how confirmed:
982	distalhowc_12	Char	15	$15.	Yes, how confirmed:
983	distaloth_12	Char	40	$40.	Yes, how confirmed: Other
984	fullcal_12	Num	8		Was rate advanced to full-calorie rate during this calendar day?

Num	Variable	Type	Len	Format	Label
985	fullcalc_12	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
986	fullcaltm_12	Num	8	TIMEAMPM.	Yes, time full calorie reached:
987	pronevent_12	Num	8		Prone ventilation this 24 hour period?
988	proneventc_12	Char	3	$3.	Prone ventilation this 24 hour period?
989	recfeedx_12	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
990	goalratex_12	Char	64	$64.	Tube feeding goal rate (Not Done)
991	goalchangex_12	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
992	brand1x_12	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
993	feedhrsx_12	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
994	giintoledenx_12	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
995	distalconfx_12	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
996	fullcalx_12	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
997	residual_0	Num	8		
998	const_0	Num	8		
999	cramp_0	Num	8		
1000	n_days	Num	8		N days with feeding data
1001	n_off	Num	8		N GI Intolerances
1002	n_off1	Num	8		Diarrhea
1003	n_off2	Num	8		Vomiting
1004	n_off3	Num	8		Aspiration
1005	n_off4	Num	8		Elevated Residuals
1006	n_off5	Num	8		Regurgitation
1007	n_off6	Num	8		Constipation
1008	n_off7	Num	8		Abdominal distention or cramping
1009	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	sedative	Num	8		Is patient on a sedative or neuromuscular blocker?
14	sedativec	Char	3	$3.	Is patient on a sedative or neuromuscular blocker?
15	eye	Num	8		Eye opening score:
16	eyec	Char	11	$11.	Eye opening score:
17	motor	Num	8		Motor response score:
18	motorc	Char	26	$26.	Motor response score:
19	verbal	Num	8		Verbal response score:
20	verbalc	Char	50	$50.	Verbal response score:
21	gcs	Num	8		Total
22	gcsdt	Num	8	BEST12.	Date Taken (Day)
23	sedativex	Char	64	$64.	Is patient on a sedative or neuromuscular blocker? (Not Done)
24	eyex	Char	64	$64.	Eye opening score: (Not Done)
25	motorx	Char	64	$64.	Motor response score: (Not Done)
26	verbalx	Char	64	$64.	Verbal response score: (Not Done)
27	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	fluidin	Num	8		Total Fluid Intake in last 24h
14	prbc24	Num	8		PRBC given in last 24 hours
15	ffp24	Num	8		FFP given in last 24 hours
16	fluidout	Num	8		Total fluid out last 24 hours
17	urineout	Num	8		Total urine output in the last 24 hours
18	notedenpt	Num	8		Is the subject enrolled in ALTA ONLY or SAILS ONLY?
19	notedenptc	Char	58	$58.	Is the subject enrolled in ALTA ONLY or SAILS ONLY?
20	entfeedvol	Num	8		If enrolled only in ALTA or SAILS, Enteral feedings volume for the last 24 hours is
21	fluidinx	Char	64	$64.	Total Fluid Intake in last 24h (Not Done)
22	fluidoutx	Char	64	$64.	Total fluid out last 24 hours (Not Done)
23	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	hgb_0	Num	8		Hgb (g/dL)
12	sodium_0	Num	8		Sodium (mEq/L):
13	potas_0	Num	8		Postassium (mEq/L)
14	gluc_0	Num	8		Glucose (mg/dL):
15	bicarb_0	Num	8		Serum Bicarb (mEq/L):
16	phos_0	Num	8		Serum Phosphorous (mg/dL)
17	mg_0	Num	8		Serum Magnesium (mEq/L)
18	protein_0	Num	8		Total Protein (g/dL)
19	album_0	Num	8		Albumin (g/dL):
20	glucmin_0	Num	8		Lowest glucose this day:
21	prothrombin_0	Num	8		Prothrombin time
22	hgbx	Char	64	$64.	Hgb (g/dL) (Not Done)
23	sodiumx	Char	64	$64.	Sodium (mEq/L): (Not Done)
24	potasx	Char	64	$64.	Postassium (mEq/L) (Not Done)
25	glucx	Char	64	$64.	Glucose (mg/dL): (Not Done)
26	bicarbx	Char	64	$64.	Serum Bicarb (mEq/L): (Not Done)
27	phosx_0	Char	64	$64.	Serum Phosphorous (mg/dL) (Not Done)
28	mgx_0	Char	64	$64.	Serum Magnesium (mEq/L) (Not Done)
29	proteinx_0	Char	64	$64.	Total Protein (g/dL) (Not Done)
30	albumx_0	Char	64	$64.	Albumin (g/dL): (Not Done)
31	alt_0	Num	8		ALT
32	ast	Num	8		AST
33	ck_0	Num	8		CK
34	crp_0	Num	8		CRP
35	crphl_0	Num	8		High sensitivity or regular CRP
36	crphlc_0	Char	16	$16.	High sensitivity or regular CRP

Num	Variable	Type	Len	Format	Label
37	insulinrt_1	Num	8		Insulin drip rate at time of glucose value
38	insulinsq_1	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
39	hgb_1	Num	8		Hgb (g/dL)
40	sodium_1	Num	8		Sodium (mEq/L):
41	potas_1	Num	8		Postassium (mEq/L)
42	gluc_1	Num	8		Glucose (mg/dL):
43	bicarb_1	Num	8		Serum Bicarb (mEq/L):
44	phos_1	Num	8		Serum Phosphorus (mEq/L)
45	mg_1	Num	8		Serum Magnesium (mg/dL)
46	protein_1	Num	8		Total Protein (g/dL)
47	album_1	Num	8		Albumin (g/dL):
48	prothrombin_1	Num	8		Prothrombin time (Seconds)
49	glucmin_1	Num	8		Lowest glucose this day
50	phosx_1	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
51	mgx_1	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
52	proteinx_1	Char	64	$64.	Total Protein (g/dL) (Not Done)
53	albumx_1	Char	64	$64.	Albumin (g/dL): (Not Done)
54	alt_1	Num	8		ALT
55	ck_1	Num	8		CK
56	crp_1	Num	8		CRP
57	crphl_1	Num	8		High sensitivity or regular CRP
58	crphlc_1	Char	16	$16.	High sensitivity or regular CRP
59	insulinrt_2	Num	8		Insulin drip rate at time of glucose value
60	insulinsq_2	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
61	hgb_2	Num	8		Hgb (g/dL)
62	sodium_2	Num	8		Sodium (mEq/L):
63	potas_2	Num	8		Postassium (mEq/L)
64	gluc_2	Num	8		Glucose (mg/dL):
65	bicarb_2	Num	8		Serum Bicarb (mEq/L):
66	phos_2	Num	8		Serum Phosphorus (mEq/L)
67	mg_2	Num	8		Serum Magnesium (mg/dL)
68	protein_2	Num	8		Total Protein (g/dL)
69	album_2	Num	8		Albumin (g/dL):
70	prothrombin_2	Num	8		Prothrombin time (Seconds)
71	glucmin_2	Num	8		Lowest glucose this day
72	phosx_2	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
73	mgx_2	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
74	proteinx_2	Char	64	$64.	Total Protein (g/dL) (Not Done)
75	albumx_2	Char	64	$64.	Albumin (g/dL): (Not Done)

Num	Variable	Type	Len	Format	Label
76	alt_2	Num	8		ALT
77	ck_2	Num	8		CK
78	crp_2	Num	8		CRP
79	crphl_2	Num	8		High sensitivity or regular CRP
80	crphlc_2	Char	16	$16.	High sensitivity or regular CRP
81	insulinrt_3	Num	8		Insulin drip rate at time of glucose value
82	insulinsq_3	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
83	hgb_3	Num	8		Hgb (g/dL)
84	sodium_3	Num	8		Sodium (mEq/L):
85	potas_3	Num	8		Postassium (mEq/L)
86	gluc_3	Num	8		Glucose (mg/dL):
87	bicarb_3	Num	8		Serum Bicarb (mEq/L):
88	phos_3	Num	8		Serum Phosphorus (mEq/L)
89	mg_3	Num	8		Serum Magnesium (mg/dL)
90	protein_3	Num	8		Total Protein (g/dL)
91	album_3	Num	8		Albumin (g/dL):
92	prothrombin_3	Num	8		Prothrombin time (Seconds)
93	glucmin_3	Num	8		Lowest glucose this day
94	phosx_3	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
95	mgx_3	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
96	proteinx_3	Char	64	$64.	Total Protein (g/dL) (Not Done)
97	albumx_3	Char	64	$64.	Albumin (g/dL): (Not Done)
98	alt_3	Num	8		ALT
99	ck_3	Num	8		CK
100	crp_3	Num	8		CRP
101	crphl_3	Num	8		High sensitivity or regular CRP
102	crphlc_3	Char	16	$16.	High sensitivity or regular CRP
103	insulinrt_4	Num	8		Insulin drip rate at time of glucose value
104	insulinsq_4	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
105	hgb_4	Num	8		Hgb (g/dL)
106	sodium_4	Num	8		Sodium (mEq/L):
107	potas_4	Num	8		Postassium (mEq/L)
108	gluc_4	Num	8		Glucose (mg/dL):
109	bicarb_4	Num	8		Serum Bicarb (mEq/L):
110	phos_4	Num	8		Serum Phosphorus (mEq/L)
111	mg_4	Num	8		Serum Magnesium (mg/dL)
112	protein_4	Num	8		Total Protein (g/dL)
113	album_4	Num	8		Albumin (g/dL):
114	prothrombin_4	Num	8		Prothrombin time (Seconds)

Num	Variable	Type	Len	Format	Label
115	glucmin_4	Num	8		Lowest glucose this day
116	phosx_4	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
117	mgx_4	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
118	proteinx_4	Char	64	$64.	Total Protein (g/dL) (Not Done)
119	albumx_4	Char	64	$64.	Albumin (g/dL): (Not Done)
120	alt_4	Num	8		ALT
121	ck_4	Num	8		CK
122	crp_4	Num	8		CRP
123	crphl_4	Num	8		High sensitivity or regular CRP
124	crphlc_4	Char	16	$16.	High sensitivity or regular CRP
125	insulinrt_5	Num	8		Insulin drip rate at time of glucose value
126	insulinsq_5	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
127	hgb_5	Num	8		Hgb (g/dL)
128	sodium_5	Num	8		Sodium (mEq/L):
129	potas_5	Num	8		Postassium (mEq/L)
130	gluc_5	Num	8		Glucose (mg/dL):
131	bicarb_5	Num	8		Serum Bicarb (mEq/L):
132	phos_5	Num	8		Serum Phosphorus (mEq/L)
133	mg_5	Num	8		Serum Magnesium (mg/dL)
134	protein_5	Num	8		Total Protein (g/dL)
135	album_5	Num	8		Albumin (g/dL):
136	prothrombin_5	Num	8		Prothrombin time (Seconds)
137	glucmin_5	Num	8		Lowest glucose this day
138	phosx_5	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
139	mgx_5	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
140	proteinx_5	Char	64	$64.	Total Protein (g/dL) (Not Done)
141	albumx_5	Char	64	$64.	Albumin (g/dL): (Not Done)
142	alt_5	Num	8		ALT
143	ck_5	Num	8		CK
144	crp_5	Num	8		CRP
145	crphl_5	Num	8		High sensitivity or regular CRP
146	crphlc_5	Char	16	$16.	High sensitivity or regular CRP
147	insulinrt_6	Num	8		Insulin drip rate at time of glucose value
148	insulinsq_6	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
149	hgb_6	Num	8		Hgb (g/dL)
150	sodium_6	Num	8		Sodium (mEq/L):
151	potas_6	Num	8		Postassium (mEq/L)
152	gluc_6	Num	8		Glucose (mg/dL):
153	bicarb_6	Num	8		Serum Bicarb (mEq/L):

Num	Variable	Type	Len	Format	Label
154	phos_6	Num	8		Serum Phosphorus (mEq/L)
155	mg_6	Num	8		Serum Magnesium (mg/dL)
156	protein_6	Num	8		Total Protein (g/dL)
157	album_6	Num	8		Albumin (g/dL):
158	prothrombin_6	Num	8		Prothrombin time (Seconds)
159	glucmin_6	Num	8		Lowest glucose this day
160	phosx_6	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
161	mgx_6	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
162	proteinx_6	Char	64	$64.	Total Protein (g/dL) (Not Done)
163	albumx_6	Char	64	$64.	Albumin (g/dL): (Not Done)
164	alt_6	Num	8		ALT
165	ck_6	Num	8		CK
166	crp_6	Num	8		CRP
167	crphl_6	Num	8		High sensitivity or regular CRP
168	crphlc_6	Char	16	$16.	High sensitivity or regular CRP
169	insulinrt_7	Num	8		Insulin drip rate at time of glucose value
170	insulinsq_7	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
171	hgb_7	Num	8		Hgb (g/dL)
172	sodium_7	Num	8		Sodium (mEq/L):
173	potas_7	Num	8		Postassium (mEq/L)
174	gluc_7	Num	8		Glucose (mg/dL):
175	bicarb_7	Num	8		Serum Bicarb (mEq/L):
176	phos_7	Num	8		Serum Phosphorus (mEq/L)
177	mg_7	Num	8		Serum Magnesium (mg/dL)
178	protein_7	Num	8		Total Protein (g/dL)
179	album_7	Num	8		Albumin (g/dL):
180	prothrombin_7	Num	8		Prothrombin time (Seconds)
181	glucmin_7	Num	8		Lowest glucose this day
182	phosx_7	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
183	mgx_7	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
184	proteinx_7	Char	64	$64.	Total Protein (g/dL) (Not Done)
185	albumx_7	Char	64	$64.	Albumin (g/dL): (Not Done)
186	alt_7	Num	8		ALT
187	ck_7	Num	8		CK
188	crp_7	Num	8		CRP
189	crphl_7	Num	8		High sensitivity or regular CRP
190	crphlc_7	Char	16	$16.	High sensitivity or regular CRP
191	insulinrt_8	Num	8		Insulin drip rate at time of glucose value
192	insulinsq_8	Num	8		Total sq insulin given in the 6 hours preceding the glucose value

Num	Variable	Type	Len	Format	Label
193	hgb_8	Num	8		Hgb (g/dL)
194	sodium_8	Num	8		Sodium (mEq/L):
195	potas_8	Num	8		Postassium (mEq/L)
196	gluc_8	Num	8		Glucose (mg/dL):
197	bicarb_8	Num	8		Serum Bicarb (mEq/L):
198	phos_8	Num	8		Serum Phosphorus (mEq/L)
199	mg_8	Num	8		Serum Magnesium (mg/dL)
200	protein_8	Num	8		Total Protein (g/dL)
201	album_8	Num	8		Albumin (g/dL):
202	prothrombin_8	Num	8		Prothrombin time (Seconds)
203	glucmin_8	Num	8		Lowest glucose this day
204	phosx_8	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
205	mgx_8	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
206	proteinx_8	Char	64	$64.	Total Protein (g/dL) (Not Done)
207	albumx_8	Char	64	$64.	Albumin (g/dL): (Not Done)
208	alt_8	Num	8		ALT
209	ck_8	Num	8		CK
210	crp_8	Num	8		CRP
211	crphl_8	Num	8		High sensitivity or regular CRP
212	crphlc_8	Char	16	$16.	High sensitivity or regular CRP
213	insulinrt_9	Num	8		Insulin drip rate at time of glucose value
214	insulinsq_9	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
215	hgb_9	Num	8		Hgb (g/dL)
216	sodium_9	Num	8		Sodium (mEq/L):
217	potas_9	Num	8		Postassium (mEq/L)
218	gluc_9	Num	8		Glucose (mg/dL):
219	bicarb_9	Num	8		Serum Bicarb (mEq/L):
220	phos_9	Num	8		Serum Phosphorus (mEq/L)
221	mg_9	Num	8		Serum Magnesium (mg/dL)
222	protein_9	Num	8		Total Protein (g/dL)
223	album_9	Num	8		Albumin (g/dL):
224	prothrombin_9	Num	8		Prothrombin time (Seconds)
225	glucmin_9	Num	8		Lowest glucose this day
226	phosx_9	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
227	mgx_9	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
228	proteinx_9	Char	64	$64.	Total Protein (g/dL) (Not Done)
229	albumx_9	Char	64	$64.	Albumin (g/dL): (Not Done)
230	alt_9	Num	8		ALT
231	ck_9	Num	8		CK

Num	Variable	Type	Len	Format	Label
232	crp_9	Num	8		CRP
233	crphl_9	Num	8		High sensitivity or regular CRP
234	crphlc_9	Char	16	$16.	High sensitivity or regular CRP
235	insulinrt_10	Num	8		Insulin drip rate at time of glucose value
236	insulinsq_10	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
237	hgb_10	Num	8		Hgb (g/dL)
238	sodium_10	Num	8		Sodium (mEq/L):
239	potas_10	Num	8		Postassium (mEq/L)
240	gluc_10	Num	8		Glucose (mg/dL):
241	bicarb_10	Num	8		Serum Bicarb (mEq/L):
242	phos_10	Num	8		Serum Phosphorus (mEq/L)
243	mg_10	Num	8		Serum Magnesium (mg/dL)
244	protein_10	Num	8		Total Protein (g/dL)
245	album_10	Num	8		Albumin (g/dL):
246	prothrombin_10	Num	8		Prothrombin time (Seconds)
247	glucmin_10	Num	8		Lowest glucose this day
248	phosx_10	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
249	mgx_10	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
250	proteinx_10	Char	64	$64.	Total Protein (g/dL) (Not Done)
251	albumx_10	Char	64	$64.	Albumin (g/dL): (Not Done)
252	alt_10	Num	8		ALT
253	ck_10	Num	8		CK
254	crp_10	Num	8		CRP
255	crphl_10	Num	8		High sensitivity or regular CRP
256	crphlc_10	Char	16	$16.	High sensitivity or regular CRP
257	insulinrt_11	Num	8		Insulin drip rate at time of glucose value
258	insulinsq_11	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
259	hgb_11	Num	8		Hgb (g/dL)
260	sodium_11	Num	8		Sodium (mEq/L):
261	potas_11	Num	8		Postassium (mEq/L)
262	gluc_11	Num	8		Glucose (mg/dL):
263	bicarb_11	Num	8		Serum Bicarb (mEq/L):
264	phos_11	Num	8		Serum Phosphorus (mEq/L)
265	mg_11	Num	8		Serum Magnesium (mg/dL)
266	protein_11	Num	8		Total Protein (g/dL)
267	album_11	Num	8		Albumin (g/dL):
268	prothrombin_11	Num	8		Prothrombin time (Seconds)
269	glucmin_11	Num	8		Lowest glucose this day
270	phosx_11	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)

Num	Variable	Type	Len	Format	Label
271	mgx_11	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
272	proteinx_11	Char	64	$64.	Total Protein (g/dL) (Not Done)
273	albumx_11	Char	64	$64.	Albumin (g/dL): (Not Done)
274	alt_11	Num	8		ALT
275	ck_11	Num	8		CK
276	crp_11	Num	8		CRP
277	crphl_11	Num	8		High sensitivity or regular CRP
278	crphlc_11	Char	16	$16.	High sensitivity or regular CRP
279	insulinrt_12	Num	8		Insulin drip rate at time of glucose value
280	insulinsq_12	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
281	hgb_12	Num	8		Hgb (g/dL)
282	sodium_12	Num	8		Sodium (mEq/L):
283	potas_12	Num	8		Postassium (mEq/L)
284	gluc_12	Num	8		Glucose (mg/dL):
285	bicarb_12	Num	8		Serum Bicarb (mEq/L):
286	phos_12	Num	8		Serum Phosphorus (mEq/L)
287	mg_12	Num	8		Serum Magnesium (mg/dL)
288	protein_12	Num	8		Total Protein (g/dL)
289	album_12	Num	8		Albumin (g/dL):
290	prothrombin_12	Num	8		Prothrombin time (Seconds)
291	glucmin_12	Num	8		Lowest glucose this day
292	phosx_12	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
293	mgx_12	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
294	proteinx_12	Char	64	$64.	Total Protein (g/dL) (Not Done)
295	albumx_12	Char	64	$64.	Albumin (g/dL): (Not Done)
296	alt_12	Num	8		ALT
297	ck_12	Num	8		CK
298	crp_12	Num	8		CRP
299	crphl_12	Num	8		High sensitivity or regular CRP
300	crphlc_12	Char	16	$16.	High sensitivity or regular CRP
301	insulinrt_14	Num	8		Insulin drip rate at time of glucose value
302	insulinsq_14	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
303	hgb_14	Num	8		Hgb (g/dL)
304	sodium_14	Num	8		Sodium (mEq/L):
305	potas_14	Num	8		Postassium (mEq/L)
306	gluc_14	Num	8		Glucose (mg/dL):
307	bicarb_14	Num	8		Serum Bicarb (mEq/L):
308	phos_14	Num	8		Serum Phosphorus (mEq/L)
309	mg_14	Num	8		Serum Magnesium (mg/dL)

Num	Variable	Type	Len	Format	Label
310	protein_14	Num	8		Total Protein (g/dL)
311	album_14	Num	8		Albumin (g/dL):
312	prothrombin_14	Num	8		Prothrombin time (Seconds)
313	glucmin_14	Num	8		Lowest glucose this day
314	phosx_14	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
315	mgx_14	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
316	proteinx_14	Char	64	$64.	Total Protein (g/dL) (Not Done)
317	albumx_14	Char	64	$64.	Albumin (g/dL): (Not Done)
318	alt_14	Num	8		ALT
319	ck_14	Num	8		CK
320	crp_14	Num	8		CRP
321	crphl_14	Num	8		High sensitivity or regular CRP
322	crphlc_14	Char	16	$16.	High sensitivity or regular CRP
323	insulinrt_21	Num	8		Insulin drip rate at time of glucose value
324	insulinsq_21	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
325	hgb_21	Num	8		Hgb (g/dL)
326	sodium_21	Num	8		Sodium (mEq/L):
327	potas_21	Num	8		Postassium (mEq/L)
328	gluc_21	Num	8		Glucose (mg/dL):
329	bicarb_21	Num	8		Serum Bicarb (mEq/L):
330	phos_21	Num	8		Serum Phosphorus (mEq/L)
331	mg_21	Num	8		Serum Magnesium (mg/dL)
332	protein_21	Num	8		Total Protein (g/dL)
333	album_21	Num	8		Albumin (g/dL):
334	prothrombin_21	Num	8		Prothrombin time (Seconds)
335	glucmin_21	Num	8		Lowest glucose this day
336	phosx_21	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
337	mgx_21	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
338	proteinx_21	Char	64	$64.	Total Protein (g/dL) (Not Done)
339	albumx_21	Char	64	$64.	Albumin (g/dL): (Not Done)
340	alt_21	Num	8		ALT
341	ck_21	Num	8		CK
342	crp_21	Num	8		CRP
343	crphl_21	Num	8		High sensitivity or regular CRP
344	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	abgidx	Num	8		Form index
13	visitname	Char	1024	$1024.	Visit Name
14	fio2abg	Num	8		FiO2:
15	pao2abg	Num	8		PaO2 (mmHg):
16	paco2abg	Num	8		PaCO2 (mmHg):
17	phabg	Num	8		pH:
18	intubat	Num	8		Intubated when ABG obtained:
19	intubatc	Char	3	$3.	Intubated when ABG obtained:
20	fio2abgx	Char	64	$64.	FiO2: (Not Done)
21	pao2abgX	Char	64	$64.	PaO2 (mmHg): (Not Done)
22	paco2abgX	Char	64	$64.	PaCO2 (mmHg): (Not Done)
23	phabgX	Char	64	$64.	pH: (Not Done)
24	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	omegadose	Num	8		Number of scheduled doses of study emulsion given
14	omegadosec	Char	1	$1.	Number of scheduled doses of study emulsion given
15	omegaheld1	Num	8		Reason 1
16	omegaheld1c	Char	7	$7.	Reason 1
17	omegaheldrsn1	Num	8		Reason 1: Pulldown Choice
18	omegaheldrsn1c	Char	23	$23.	Reason 1: Pulldown Choice
19	omegaheld1oth	Char	255	$255.	Reason 1: Other
20	omegaheld2	Num	8		Reason 2
21	omegaheld2c	Char	7	$7.	Reason 2
22	omegaheldrsn2	Num	8		Reason 2: Pulldown Choice
23	omegaheldrsn2c	Char	23	$23.	Reason 2: Pulldown Choice
24	omegaheld2oth	Char	255	$255.	Reason 2: Other
25	omegatol	Num	8		Number of administered doses tolerated
26	omegatolc	Char	1	$1.	Number of administered doses tolerated
27	omegadosex	Char	64	$64.	Number of scheduled doses of study emulsion given (Not Done)
28	omegaheld1x	Char	64	$64.	Reason 1 (Not Done)
29	omegaheld2x	Char	64	$64.	Reason 2 (Not Done)
30	omegatolx	Char	64	$64.	Number of administered doses tolerated (Not Done)

Data Set Name: omega_dose_long.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	omegachar	Char	12		
3	eden	Char	20		
4	omegadose_0	Num	8		
5	omegadose_1	Num	8		
6	omegadose_2	Num	8		
7	omegadose_3	Num	8		
8	omegadose_4	Num	8		
9	omegadose_5	Num	8		
10	omegadose_6	Num	8		
11	omegadose_7	Num	8		
12	omegadose_8	Num	8		
13	omegadose_9	Num	8		
14	omegadose_10	Num	8		
15	omegadose_11	Num	8		
16	omegadose_12	Num	8		
17	omegadose_13	Num	8		
18	omegadose_14	Num	8		
19	omegadose_15	Num	8		
20	omegadose_16	Num	8		
21	omegadose_17	Num	8		
22	omegadose_18	Num	8		
23	omegadose_19	Num	8		
24	omegadose_20	Num	8		
25	omegadose_21	Num	8		

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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	recfeed	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
14	recfeedc	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
15	goalrate	Num	8		Tube feeding goal rate
16	goalchange	Num	8		Did the goal rate change during the 24 hour period?
17	goalchangec	Char	19	$19.	Did the goal rate change during the 24 hour period?
18	newgoal	Num	8		Yes, new goal rate
19	brand1	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
20	brand1vol	Num	8		Total volume of enteral formula 1 infused for 24 hour period
21	brand2	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
22	brand2vol	Num	8		Total volume of enteral formula 2 infused for 24 hour period
23	feedhrs	Num	8		Number of hours enteral tube feeds on for this 24 hour period
24	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?
25	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?
26	planext	Num	8		Planned Extubation
27	planextc	Char	18	$18.	Planned Extubation
28	giint	Num	8		GI Intolerance
29	giintc	Char	14	$14.	GI Intolerance
30	invbside	Num	8		Invasive bedside procedure
31	invbsidec	Char	26	$26.	Invasive bedside procedure
32	surg	Num	8		Surgery
33	surgc	Char	7	$7.	Surgery
34	leftfloor	Num	8		Patient left the floor
35	leftfloorc	Char	22	$22.	Patient left the floor

Num	Variable	Type	Len	Format	Label
36	care	Num	8		Nursing Care (i.e. bathing, HOB down)
37	carec	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
38	medadm	Num	8		Medical Administration
39	medadmc	Char	22	$22.	Medical Administration
40	feedoffoth	Num	8		Other reason feed turned off:
41	feedoffothc	Char	5	$5.	Other reason feed turned off:
42	feedoffreas	Char	255	$255.	Other reason feed turned off: Reason
43	giintoleden	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
44	giintoledenc	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
45	diarrhea	Num	8		Diarrhea
46	diarrheac	Char	8	$8.	Diarrhea
47	vomiting	Num	8		Vomiting
48	vomitingc	Char	8	$8.	Vomiting
49	aspiration	Num	8		Aspiration
50	aspirationc	Char	10	$10.	Aspiration
51	residual	Num	8		Elevated Residuals
52	residualc	Char	18	$18.	Elevated Residuals
53	regurg	Num	8		Regurgitation
54	regurgc	Char	13	$13.	Regurgitation
55	const	Num	8		Constipation
56	constc	Char	12	$12.	Constipation
57	cramp	Num	8		Abdominal distention or cramping
58	crampc	Char	32	$32.	Abdominal distention or cramping
59	feedsite	Num	8		Insertion site of feeding tube
60	feedsitec	Char	12	$12.	Insertion site of feeding tube
61	tubesize	Num	8		Feeding tube size
62	tubesizec	Char	10	$10.	Feeding tube size
63	distalpos	Num	8		Distal position of feeding tube
64	distalposc	Char	12	$12.	Distal position of feeding tube
65	distalconf	Num	8		Was distal position confirmed during this 24 hour period?
66	distalconfc	Char	19	$19.	Was distal position confirmed during this 24 hour period?
67	distalhow	Num	8		Yes, how confirmed:
68	distalhowc	Char	15	$15.	Yes, how confirmed:
69	distaloth	Char	40	$40.	Yes, how confirmed: Other
70	fullcal	Num	8		Was rate advanced to full-calorie rate during this calendar day?
71	fullcalc	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
72	fullcaltm	Num	8	TIMEAMPM.	Yes, time full calorie reached:

Num	Variable	Type	Len	Format	Label
73	pronevent	Num	8		Prone ventilation this 24 hour period?
74	proneventc	Char	3	$3.	Prone ventilation this 24 hour period?
75	recfeedx	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
76	goalratex	Char	64	$64.	Tube feeding goal rate (Not Done)
77	goalchangex	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
78	brand1x	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
79	feedhrsx	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
80	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)
81	giintoledenx	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
82	feedsitex	Char	64	$64.	Insertion site of feeding tube (Not Done)
83	tubesizex	Char	64	$64.	Feeding tube size (Not Done)
84	distalposx	Char	64	$64.	Distal position of feeding tube (Not Done)
85	distalconfx	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
86	fullcalx	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
87	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	hgb	Num	8		Hgb (g/dL)
14	sodium	Num	8		Sodium (mEq/L):
15	potas	Num	8		Postassium (mEq/L)
16	gluc	Num	8		Glucose (mg/dL):
17	bicarb	Num	8		Serum Bicarb (mEq/L):
18	phos	Num	8		Serum Phosphorus (mEq/L)
19	mg	Num	8		Serum Magnesium (mg/dL)
20	protein	Num	8		Total Protein (g/dL)
21	album	Num	8		Albumin (g/dL):
22	prothrombin	Num	8		Prothrombin time (Seconds)
23	insulinrt	Num	8		Insulin drip rate at time of glucose value
24	insulinsq	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
25	glucmin	Num	8		Lowest glucose this day
26	phosx	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
27	mgx	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
28	proteinx	Char	64	$64.	Total Protein (g/dL) (Not Done)
29	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	hgb	Num	8		Hgb (g/dL)
14	sodium	Num	8		Sodium (mEq/L):
15	potas	Num	8		Postassium (mEq/L)
16	gluc	Num	8		Glucose (mg/dL):
17	bicarb	Num	8		Serum Bicarb (mEq/L):
18	phos	Num	8		Serum Phosphorus (mEq/L)
19	mg	Num	8		Serum Magnesium (mg/dL)
20	protein	Num	8		Total Protein (g/dL)
21	album	Num	8		Albumin (g/dL):
22	prothrombin	Num	8		Prothrombin time (Seconds)
23	insulinrt	Num	8		Insulin drip rate at time of glucose value
24	insulinsq	Num	8		Total sq insulin given in the 6 hours preceding the glucose value
25	glucmin	Num	8		Lowest glucose this day
26	phosx	Char	64	$64.	Serum Phosphorus (mEq/L) (Not Done)
27	mgx	Char	64	$64.	Serum Magnesium (mg/dL) (Not Done)
28	proteinx	Char	64	$64.	Total Protein (g/dL) (Not Done)
29	albumx	Char	64	$64.	Albumin (g/dL): (Not Done)
30	alt	Num	8		ALT
31	ck	Num	8		CK
32	crp	Num	8		CRP
33	crphl	Num	8		High sensitivity or regular CRP
34	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	simv	Num	8		SIMV
14	simvc	Char	4	$4.	SIMV
15	prvc	Num	8		PRVC (pressure regulated volume control) or equivalent
16	prvc2	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
17	pressup	Num	8		Pressure Support (y/n)
18	pressupc	Char	16	$16.	Pressure Support (y/n)
19	pressupcmh2o	Num	8		Pressure Support cmH2O
20	volassist	Num	8		Volume Assist/Control
21	volassistc	Char	21	$21.	Volume Assist/Control
22	presassist	Num	8		Pressure Assist (y/n)
23	presassistc	Char	15	$15.	Pressure Assist (y/n)
24	presascmh2o	Num	8		Pressure Assist cmH2O
25	pcirv	Num	8		PC IRV
26	pcirvc	Char	6	$6.	PC IRV
27	aprv	Num	8		Airway Pressure Release Ventilation (APRV)
28	aprvc	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
29	ventoth	Num	8		Other vent mode
30	ventothc	Char	5	$5.	Other vent mode
31	hfov	Num	8		HFOV
32	hfovc	Char	4	$4.	HFOV
33	othvent	Char	255	$255.	Enter other vent mode:
34	tidal	Num	8		Calculated Delivered Tidal Volume
35	setrate	Num	8		Set Rate
36	resp	Num	8		Total Respiratory Rate

Num	Variable	Type	Len	Format	Label
37	minvent	Num	8		Total Minute Ventilation
38	peep	Num	8		PEEP (cm H2O):
39	fio2	Num	8		FiO2 at 0800
40	SpO2	Num	8		SpO2 at 0800
41	pplat	Num	8		Plateau Pressure (cm H2O):
42	pip	Num	8		Peak Inspiratory Pressure
43	meanair	Num	8		Mean airway pressure (cm H2O)
44	fio2abg	Num	8		FiO2 at time of ABG:
45	pao2abg	Num	8		PaO2 (cm H20):
46	paco2abg	Num	8		PaCO2 (cm H20):
47	phabg	Num	8		Arterial pH:
48	spo2abg	Num	8		SpO2 at time of ABG
49	ventmodex	Char	64	$64.	Vent mode: (Not Done)
50	tidalx	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
51	respx	Char	64	$64.	Total Respiratory Rate (Not Done)
52	minventx	Char	64	$64.	Total Minute Ventilation (Not Done)
53	peepx	Char	64	$64.	PEEP (cm H2O): (Not Done)
54	fio2x	Char	64	$64.	FiO2 at 0800 (Not Done)
55	SpO2x	Char	64	$64.	SpO2 at 0800 (Not Done)
56	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	hrate	Num	8		Heart Rate (beat/min):
14	sysbp	Num	8		Systolic BP (mmHg):
15	diabp	Num	8		Diastolic BP (mmHg):
16	temp	Num	8		Temperature (Celcius):
17	cvp	Num	8		CVP (mmHg):
18	cxrquads	Num	8		CXR: Number of quadrants with infiltrates
19	vaso	Num	8		Vasopressors/inotropes this day?
20	vasoc	Char	3	$3.	Vasopressors/inotropes this day?
21	dobut	Num	8		IV Dobutamine Infusion Rate:
22	dobutu	Char	9	$9.	IV Dobutamine Infusion Rate Units
23	dopa	Num	8		IV Dopamine Infusion Rate:
24	dopau	Char	9	$9.	IV Dopamine Infusion Rate Units
25	norepi	Num	8		IV Norepinephrine Infusion Rate:
26	norepiu	Char	9	$9.	IV Norepinephrine Infusion Rate Units
27	epi	Num	8		IV Epinephrine Infusion Rate:
28	epiu	Char	9	$9.	ug/kg/min or ug/min
29	vasorate	Num	8		IV Vasopressin Infusion Rate (units/min):
30	neosyn	Num	8		IV Neosynephrine Infusion Rate:
31	neosynu	Char	9	$9.	IV Neosynephrine Infusion Rate Units
32	vasooth	Char	50	$50.	If Other Please Specify:
33	cort20	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
34	cort20c	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
35	betablock	Num	8		Beta Blockers (IV, PO, PGT) this day?

Num	Variable	Type	Len	Format	Label
36	betablockc	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
37	ipatro	Num	8		Aerosolized or MDI delivered ipatropium?
38	ipatroc	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
39	ipadose	Num	8		Yes: Enter total number of doses this day:
40	nsbetag	Num	8		Non-study beta-agonist aerosol this day?
41	nsbetagc	Char	85	$85.	Non-study beta-agonist aerosol this day?
42	nsbetagdose	Num	8		Yes: Enter total dose in mg this day
43	hratex	Char	64	$64.	Heart Rate (beat/min): (Not Done)
44	sysbpx	Char	64	$64.	Systolic BP (mmHg): (Not Done)
45	diabpx	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
46	tempx	Char	64	$64.	Temperature (Celcius): (Not Done)
47	vasox	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
48	betablockx	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
49	ipatrox	Char	64	$64.	Aerosolized or MDI delivered ipatropium? (Not Done)
50	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	hrate	Num	8		Heart Rate (beat/min):
14	sysbp	Num	8		Systolic BP (mmHg):
15	diabp	Num	8		Diastolic BP (mmHg):
16	temp	Num	8		Temperature (Celcius):
17	cvp	Num	8		CVP (mmHg):
18	cxrquads	Num	8		CXR: Number of quadrants with infiltrates
19	vaso	Num	8		Vasopressors/inotropes this day?
20	vasoc	Char	3	$3.	Vasopressors/inotropes this day?
21	dobut	Num	8		IV Dobutamine Infusion Rate:
22	dobutu	Char	9	$9.	IV Dobutamine Infusion Rate Units
23	dopa	Num	8		IV Dopamine Infusion Rate:
24	dopau	Char	9	$9.	IV Dopamine Infusion Rate Units
25	norepi	Num	8		IV Norepinephrine Infusion Rate:
26	norepiu	Char	9	$9.	IV Norepinephrine Infusion Rate Units
27	epi	Num	8		IV Epinephrine Infusion Rate:
28	epiu	Char	9	$9.	ug/kg/min or ug/min
29	vasorate	Num	8		IV Vasopressin Infusion Rate (units/min):
30	neosyn	Num	8		IV Neosynephrine Infusion Rate:
31	neosynu	Char	9	$9.	IV Neosynephrine Infusion Rate Units
32	vasooth	Char	50	$50.	If Other Please Specify:
33	cort20	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
34	cort20c	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
35	betablock	Num	8		Beta Blockers (IV, PO, PGT) this day?

Num	Variable	Type	Len	Format	Label
36	betablockc	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
37	ipatro	Num	8		Aerosolized or MDI delivered ipatropium?
38	ipatroc	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
39	ipadose	Num	8		Yes: Enter total number of doses this day:
40	nsbetag	Num	8		Non-study beta-agonist aerosol this day?
41	nsbetagc	Char	85	$85.	Non-study beta-agonist aerosol this day?
42	nsbetagdose	Num	8		Yes: Enter total dose in mg this day
43	hratex	Char	64	$64.	Heart Rate (beat/min): (Not Done)
44	sysbpx	Char	64	$64.	Systolic BP (mmHg): (Not Done)
45	diabpx	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
46	tempx	Char	64	$64.	Temperature (Celcius): (Not Done)
47	vasox	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
48	betablockx	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
49	ipatrox	Char	64	$64.	Aerosolized or MDI delivered ipatropium? (Not Done)
50	nsbetagx	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
51	cort	Num	8		IV or PO corticosteroids totaling more than 20 mg this calendar day
52	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	chktm1	Char	11	$11.	Day 1 Check Time
14	chktm2	Char	11	$11.	Day 2 Check Time
15	chktm3	Char	11	$11.	Day 3 Check Time
16	chktm4	Char	11	$11.	Day 4 Check Time
17	chktm5	Char	11	$11.	Day 5 Check Time
18	chktm6	Char	11	$11.	Day 6 Check Time
19	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	vaso12prior	Num	8		Patient received vasopressors in the 12 hours prior to random check time?
14	vaso12priorc	Char	3	$3.	Patient received vasopressors in the 12 hours prior to random check time?
15	map60	Num	8		Did MAP fall below 60 mmHg in the 12 hours prior to random check time?
16	map60c	Char	3	$3.	Did MAP fall below 60 mmHg in the 12 hours prior to random check time?
17	maintflu	Num	8		IV maintenance fluids running in the 4 hours prior to random check time?
18	maintfluc	Char	3	$3.	IV maintenance fluids running in the 4 hours prior to random check time?
19	lasix4	Num	8		Lasix given in the in the 4 hours prior to random check time?
20	lasix4c	Char	3	$3.	Lasix given in the in the 4 hours prior to random check time?
21	bolus12	Num	8		Fluid bolus given in the 12 hours prior to random check time?
22	bolus12c	Char	3	$3.	Fluid bolus given in the 12 hours prior to random check time?
23	avuop4	Num	8		Average UOP in the in the 4 hours prior to random check time?
24	avuop4c	Char	3	$3.	Average UOP in the in the 4 hours prior to random check time?
25	cvp_rc	Num	8		mmHg CVP
26	paop_rc	Num	8		mmHg PAOP
27	renal	Num	8		Renal therapy or renal failure this day?
28	renalc	Char	3	$3.	Renal therapy or renal failure this day?
29	edenptrc	Num	8		Is subject enrolled in EDEN or Co-Enrolled?
30	edenptrcc	Char	31	$31.	Is subject enrolled in EDEN or Co-Enrolled?
31	propinfrate	Num	8		Propofol Infusion Rate
32	vaso12priorx	Char	64	$64.	Patient received vasopressors in the 12 hours prior to random check time? (Not Done)
33	map60x	Char	64	$64.	Did MAP fall below 60 mmHg in the 12 hours prior to random check time? (Not Done)
34	maintflux	Char	64	$64.	IV maintenance fluids running in the 4 hours prior to random check time? (Not Done)
35	lasix4x	Char	64	$64.	Lasix given in the in the 4 hours prior to random check time? (Not Done)
36	bolus12x	Char	64	$64.	Fluid bolus given in the 12 hours prior to random check time? (Not Done)

Num	Variable	Type	Len	Format	Label
37	avuop4x	Char	64	$64.	Average UOP in the in the 4 hours prior to random check time? (Not Done)
38	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	cytocolldt0	Num	8	BEST12.	Day 0 Cytokine and coagulation parameters sample collected (Plasma) Date (Day)
14	cytofrozdt0	Num	8	BEST12.	Day 0 Cytokine and coagulation parameters sample frozen (Plasma) Date (Day)
15	cytoprocdt0	Num	8	BEST12.	Day 0 Cytokine and coagulation parameters sample processing initiated (Plasma) Date (Day)
16	urinecolldt0	Num	8	BEST12.	Day 0 Urine sample Collected Date? (Day)
17	urinefrozdt0	Num	8	BEST12.	Day 0 Urine sample Frozen Date? (Day)
18	unrineprocdt0	Num	8	BEST12.	Day 0 Urine sample Processing Initiated Date? (Day)
19	cyto0	Num	8		Day 0 Cytokine and coagulation parameters sample collected (Plasma)?
20	cyto0c	Char	11	$11.	Day 0 Cytokine and coagulation parameters sample collected (Plasma)?
21	cytoreas0	Char	255	$255.	Day 0 Cytokine not collected: Reason
22	fattyacid0	Num	8		Day 0 Plasma fatty acids sample collected (Plasma)?
23	fattyacid0c	Char	26	$26.	Day 0 Plasma fatty acids sample collected (Plasma)?
24	fattyacidreas0	Char	255	$255.	Day 0 Plasma fatty acids not collected: Reason
25	epi0	Num	8		Day 0 Plasma epinephrine level sample collected (Plasma)?
26	epi0c	Char	20	$20.	Day 0 Plasma epinephrine level sample collected (Plasma)?
27	epireas0	Char	255	$255.	Day 0 Plasma epinephrine not collected: Reason
28	urine0	Num	8		Day 0 Urine sample collected?
29	urine0c	Char	11	$11.	Day 0 Urine sample collected?
30	urinereas0	Char	255	$255.	Day 0 Urine not collected: Reason
31	bloodcolldt0	Num	8	BEST12.	Day 0 Whole blood sample collected (Genetics) Date (Day)
32	bloodfrozendt0	Num	8	BEST12.	Day 0 Whole blood sample collected (Genetics) frozen Date (Day)
33	blood0	Num	8		Day 0 Whole blood sample collected (Genetics)?

Num	Variable	Type	Len	Format	Label
34	blood0c	Char	20	$20.	Day 0 Whole blood sample collected (Genetics)?
35	bloodreas0	Char	255	$255.	Day 0 Whole blood sample not collected: Reason
36	colldt1	Num	8	BEST12.	Date Day 1 Specimens Collected (Day)
37	alb1	Num	8		Day 1 Plasma Albuterol level sample collected (Plasma)?
38	alb1c	Char	20	$20.	Day 1 Plasma Albuterol level sample collected (Plasma)?
39	albreas1	Char	255	$255.	Day 1 Plasma Albuterol level sample not collected: Reason
40	epi1	Num	8		Day 1 Plasma epinephrine level sample collected (Plasma)?
41	epi1c	Char	20	$20.	Day 1 Plasma epinephrine level sample collected (Plasma)?
42	epireas1	Char	255	$255.	Day 1 Plasma epinephrine level sample not collected: Reason
43	cytocolldt3	Num	8	BEST12.	Day 3 Cytokine and coagulation parameters sample collected (Plasma) Date (Day)
44	cytofrozdt3	Num	8	BEST12.	Day 3 Cytokine and coagulation parameters sample frozen (Plasma) Date (Day)
45	cytoprocdt3	Num	8	BEST12.	Day 3 Cytokine and coagulation parameters sample processing initiated (Plasma) Date (Day)
46	cyto3	Num	8		Day 3 Cytokine and coagulation parameters sample collected (Plasma)?
47	cyto3c	Char	20	$20.	Day 3 Cytokine and coagulation parameters sample collected (Plasma)?
48	cytoreas3n	Char	255	$255.	Day 3 Cytokine not collected: Reason
49	fattyacid3	Num	8		Day 3 Plasma fatty acids sample collected (Plasma)?
50	fattyacid3c	Char	26	$26.	Day 3 Plasma fatty acids sample collected (Plasma)?
51	fattyaciddt3	Num	8	BEST12.	Day 3 Plasma fatty acids: Date (Day)
52	fattyacidreas3	Char	255	$255.	Day 3 Plasma fatty acids not collected: Reason
53	unrinecolldt3	Num	8	BEST12.	Day 3 Urine sample Collected Date (Day)
54	urinefrozdt3	Num	8	BEST12.	Day 3 Urine sample Frozen Date? (Day)
55	urineprocdt3	Num	8	BEST12.	Day 3 Urine sample Processing Initiated Date (Day)
56	urine3	Num	8		Day 3 Urine sample collected?
57	urine3c	Char	20	$20.	Day 3 Urine sample collected?
58	urinereas3	Char	255	$255.	Day 3 Urine sample not collected: Reason
59	cytocolldt6	Num	8	BEST12.	Day 6 Cytokine and coagulation parameters sample collected (Plasma) Date (Day)
60	cytofrozdt6	Num	8	BEST12.	Day 6 Cytokine and coagulation parameters sample frozen (Plasma) Date (Day)
61	cytoprocdt6	Num	8	BEST12.	Day 6 Cytokine and coagulation parameters sample processing initiated (Plasma) Date (Day)
62	cyto6	Num	8		Day 6 Cytokine and coagulation parameters sample collected (Plasma)?
63	cyto6c	Char	20	$20.	Day 6 Cytokine and coagulation parameters sample collected (Plasma)?
64	cytoreas6	Char	255	$255.	Day 6 Cytokine not collected: Reason
65	fattyacid6	Num	8		Day 6 Plasma fatty acids sample collected (Plasma)?

Num	Variable	Type	Len	Format	Label
66	fattyacid6c	Char	26	$26.	Day 6 Plasma fatty acids sample collected (Plasma)?
67	fattyaciddt6	Num	8	BEST12.	Day 6 Plasma fatty acids: Date (Day)
68	fattyacidreas6	Char	255	$255.	Day 6 Plasma fatty acids not collected: Reason
69	urinecolldt6	Num	8	BEST12.	Day 6 Urine sample Collected Date (Day)
70	urinefrozdt6	Num	8	BEST12.	Day 6 Urine sample Frozen Date (Day)
71	urineprocdt6	Num	8	BEST12.	Day 6 Urine sample Processing Initiated Date (Day)
72	urine6	Num	8		Day 6 Urine sample collected?
73	urine6c	Char	20	$20.	Day 6 Urine sample collected?
74	urinereas6	Char	255	$255.	Day 6 Urine sample not collected: Reason
75	cytocolldt12	Num	8	BEST12.	Day 12 Cytokine and coagulation parameters sample collected (Plasma) Date (Day)
76	cytoprocdt12	Num	8	BEST12.	Day 12 Cytokine and coagulation parameters sample processing initiated (Plasma) Date (Day)
77	cytofrozdt12	Num	8	BEST12.	Day 12 Cytokine and coagulation parameters sample frozen (Plasma) Date (Day)
78	cyto12	Num	8		Day 12 Cytokine and coagulation parameters sample collected (Plasma)?
79	cyto12c	Char	20	$20.	Day 12 Cytokine and coagulation parameters sample collected (Plasma)?
80	cytoreas12	Char	255	$255.	Day 12 Cytokine not collected: Reason
81	fattyacid12	Num	8		Day 12 Plasma fatty acids sample collected (Plasma)?
82	fattyacid12c	Char	26	$26.	Day 12 Plasma fatty acids sample collected (Plasma)?
83	fattyaciddt12	Num	8	BEST12.	Day 12 Plasma fatty acids: Date (Day)
84	fattyacidreas12	Char	255	$255.	Day 12 Plasma fatty acids not collected: Reason
85	peakdt6	Num	8	BEST12.	Day 6 Peak level collected Date (Day)
86	ptshipdt6	Num	8	BEST12.	Day 6 P&T samples shipped to Assay Lab Date (Day)
87	troughdt6	Num	8	BEST12.	Day 6 Trough level collected Date (Day)
88	bloodstor0	Num	8		Day 0 Storage Temperature at -70 C or lower (+/- 10 degrees)?
89	bloodstor0c	Char	11	$11.	Day 0 Storage Temperature at -70 C or lower (+/- 10 degrees)?
90	bloodstorreas0	Char	255	$255.	Day 0 Storage Temperature at -70 C or lower : no reason
91	bloodtube0	Num	8		Day 0 Tube Type:
92	bloodtube0c	Char	13	$13.	Day 0 Tube Type:
93	bloodtubeoth0	Char	255	$255.	Day 0 Tube Type Other:
94	peakcollreas6	Char	255	$255.	Day 6 Peak level not collected reason?
95	ptship6	Num	8		Day 6 P&T samples shipped to Assay Lab?
96	ptship6c	Char	18	$18.	Day 6 P&T samples shipped to Assay Lab?
97	ptshipreas6	Char	255	$255.	Day 6 P&T samples not shipped to Assay Lab Reason?
98	colldt0x	Char	64	$64.	Day 0 Date (Not Done)
99	cyto0x	Char	64	$64.	Day 0 Cytokine and coagulation parameters sample collected (Plasma) (Not Done)?
100	fattyacid0x	Char	64	$64.	Day 0 Plasma fatty acids sample collected (Plasma)? (Not Done)

Num	Variable	Type	Len	Format	Label
101	urine0x	Char	64	$64.	Day 0 Urine sample collected? (Not Done)
102	blood0x	Char	64	$64.	Day 0 Whole blood sample collected (Genetics)? (Not Done)
103	cytocoll0x	Char	64	$64.	Day 0 Cytokine and coagulation parameters sample collected (Plasma) (Not Done)
104	urinecoll0x	Char	64	$64.	Day 0 Urine sample Collected (Not Done)
105	ND_SPEC_COLL_DAY0_BLOOD	Char	64	$64.	ND_SPEC_COLL_DAY0_BLOOD
106	cyto3x	Char	64	$64.	Day 3 Cytokine and coagulation parameters sample processing initiated (Plasma) (Not Done)
107	urine3x	Char	64	$64.	Day 3 Urine sample collected? (Not Done)
108	cyto6x	Char	64	$64.	Day 6 Cytokine and coagulation parameters sample collected (Plasma) (Not Done)
109	urine6x	Char	64	$64.	Day 6 Urine sample Collected (Not Done)
110	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	status	Num	8		Patient status (through Day 90):
14	statusc	Char	69	$69.	Patient status (through Day 90):
15	homedt	Num	8	BEST12.	Home with UAB, date: (Day)
16	deathdt	Num	8	BEST12.	Dead prior to home with UAB, date: (Day)
17	othstatdt	Num	8	BEST12.	Other, date of last known patient status: (Day)
18	altapt	Num	8		ALTA patient?
19	altaptc	Char	12	$12.	ALTA patient?
20	altawdraw	Num	8		Was this patient permanently withdrawn from ALTA (through Day 28)?
21	altawdrawc	Char	13	$13.	Was this patient permanently withdrawn from ALTA (through Day 28)?
22	altawdrawdt	Num	8	BEST12.	Patient withdrawn from ALTA: Date (Day)
23	altawdrawreas	Char	255	$255.	Patient withdrawn from ALTA: Reason
24	eopt	Num	8		EDEN/Omega Patient?
25	eoptc	Char	18	$18.	EDEN/Omega Patient?
26	eowdraw	Num	8		Was this patient permanently withdrawn from EDEN/Omega (through Day 28)?
27	eowdrawc	Char	13	$13.	Was this patient permanently withdrawn from EDEN/Omega (through Day 28)?
28	eowdrawdt	Num	8	BEST12.	Patient withdrawn from EDEN/Omega: Date (Day)
29	eowdrawreas	Char	255	$255.	Patient withdrawn from EDEN/Omega: Reason
30	eoenroll	Num	8		If the patient was enrolled in EDEN/OMEGA study or Co-Enrolled
31	eoenrollc	Char	25	$25.	If the patient was enrolled in EDEN/OMEGA study or Co-Enrolled
32	eofullcal	Num	8		Did patient reach full-calorie enteral feeding rate?
33	eofullcalc	Char	51	$51.	Did patient reach full-calorie enteral feeding rate?
34	eofullcaldt	Num	8	BEST12.	Patient reach full-calorie enteral feeding rate: Date (Day)
35	eofullcaltm	Num	8	TIME5.	Patient reach full-calorie enteral feeding rate: Date (Time)
36	hospdc	Num	8		Was patient discharged alive from study hospital (through Day 90)?

Num	Variable	Type	Len	Format	Label
37	hospdcc	Char	10	$10.	Was patient discharged alive from study hospital (through Day 90)?
38	hospdcdt	Num	8	BEST12.	If yes, give date: (Day)
39	sbtcrit	Num	8		Did patient meet criteria for spontaneous breathing trial (SBT) before day 29?
40	sbtcritc	Char	10	$10.	Did patient meet criteria for spontaneous breathing trial (SBT) before day 29?
41	sbtcritdt	Num	8	BEST12.	If yes, enter date FIRST met criteria (Day)
42	sbttol	Num	8		Did patient tolerate SBT?
43	sbttolc	Char	10	$10.	Did patient tolerate SBT?
44	sbttoldt	Num	8	BEST12.	Patient tolerated SBT, date & time (Day)
45	uab	Num	8		Did patient reach 48 hour UAB before day 29?
46	uabc	Char	10	$10.	Did patient reach 48 hour UAB before day 29?
47	uabdt	Num	8	BEST12.	Patient reached 48 hour UAB before day 29: Date (Day)
48	extub	Num	8		Was patient extubated before day 29?
49	extubc	Char	10	$10.	Was patient extubated before day 29?
50	extubdt	Num	8	BEST12.	Patient extubated before day 29: Date (Day)
51	trach	Num	8		Did Subject undergo tracheostomy prior to day 29?
52	trachc	Char	10	$10.	Did Subject undergo tracheostomy prior to day 29?
53	trachdt	Num	8	BEST12.	Subject underwent tracheostomy prior to day 29: Date (Day)
54	discharge1	Num	8		Discharged from ICU?
55	discharge1c	Char	20	$20.	Discharged from ICU?
56	dischargedt1	Num	8	BEST12.	If yes, date of ICU DC: (Day)
57	readmit1	Num	8		Readmitted to ICU?
58	readmit1c	Char	29	$29.	Readmitted to ICU?
59	readmitdt1	Num	8	BEST12.	If yes, date of ICU readmission: (Day)
60	discharge2	Num	8		Discharged from ICU?
61	discharge2c	Char	20	$20.	Discharged from ICU?
62	dischargedt2	Num	8	BEST12.	If yes, date of ICU DC: (Day)
63	readmit2	Num	8		Readmitted to ICU?
64	readmit2c	Char	29	$29.	Readmitted to ICU?
65	readmitdt2	Num	8	BEST12.	If yes, date of ICU readmission: (Day)
66	discharge3	Num	8		Discharged from ICU?
67	discharge3c	Char	20	$20.	Discharged from ICU?
68	dischargedt3	Num	8	BEST12.	If yes, date of ICU DC: (Day)
69	readmit3	Num	8		Readmitted to ICU?
70	readmit3c	Char	29	$29.	Readmitted to ICU?
71	readmitdt3	Num	8	BEST12.	If yes, date of ICU readmission: (Day)
72	discharge4	Num	8		Discharged from ICU?
73	discharge4c	Char	20	$20.	Discharged from ICU?
74	dischargedt4	Num	8	BEST12.	If yes, date of ICU DC: (Day)
75	readmit4	Num	8		Readmitted to ICU?

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

Num	Variable	Type	Len	Format	Label
115	statusx	Char	64	$64.	Patient Status (Not done)
116	withdrawnX	Char	64	$64.	Patient Withdrawn (Not done)
117	eoenrollX	Char	64	$64.	Did patient reach full-calorie enteral feeding rate? (Not Done)
118	sbtcritx	Char	64	$64.	Did patient meet criteria for spontaneous breathing trial? (Not Done)
119	sbttolx	Char	64	$64.	Patient tolerated SBT (Not Done)
120	uabx	Char	64	$64.	Did patient reach 48 hour UAB before day 29? (Not Done)
121	extubX	Char	64	$64.	Patient extubated before day 29 (Not Done)
122	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	visit	Num	8		
12	visitname	Char	1024	$1024.	Visit Name
13	vapdt	Num	8	BEST12.	VAP Date (Day)
14	infiltrate	Num	8		Chest radiograph shows new infiltrate that persisted for 48 hours?
15	infiltratec	Char	3	$3.	Chest radiograph shows new infiltrate that persisted for 48 hours?
16	feverleuk	Num	8		New fever or hypothermia or leukocytosis or leukopenia?
17	feverleukc	Char	3	$3.	New fever or hypothermia or leukocytosis or leukopenia?
18	pulminf	Num	8		Bacteriological confirmation of pulmonary infection?
19	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	simv_0	Num	8		SIMV
12	simvc_0	Char	4	$4.	SIMV
13	prvc_0	Num	8		PRVC (pressure regulated volume control) or equivalent
14	prvc2_0	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
15	pressup_0	Num	8		Pressure Support (y/n)
16	pressupc_0	Char	16	$16.	Pressure Support (y/n)
17	pressupcmH2O	Num	8		Pressure Support cmH2O
18	volassist_0	Num	8		Volume Assist/Control
19	volassistc_0	Char	21	$21.	Volume Assist/Control
20	presassist_0	Num	8		Pressure Assist (y/n)
21	presassistc_0	Char	15	$15.	Pressure Assist (y/n)
22	presascmH2O	Num	8		Pressure Assist cmH2O
23	pcirv_0	Num	8		PC IRV
24	pcirvc_0	Char	6	$6.	PC IRV
25	aprv_0	Num	8		Airway Pressure Release Ventilation (APRV)
26	aprvc_0	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
27	ventoth_0	Num	8		Other vent mode
28	ventothc_0	Char	5	$5.	Other vent mode
29	hfov_0	Num	8		HFOV
30	hfovc_0	Char	4	$4.	HFOV
31	othvent_0	Char	255	$255.	Enter other vent mode:
32	tidal_0	Num	8		Calculated Delivered Tidal Volume
33	setrate_0	Num	8		Set Rate
34	resp_0	Num	8		Total Respiratory Rate
35	minvent_0	Num	8		Total Minute Ventilation (L/min)
36	peep_0	Num	8		PEEP (cm H2O):

Num	Variable	Type	Len	Format	Label
37	fio2_0	Num	8		FiO2 prior to randomization
38	SpO2_0	Num	8		SpO2 prior to randomization
39	pplat_0	Num	8		Plateau Pressure (cm H2O):
40	pip_0	Num	8		Peak Inspiratory Pressure
41	meanair_0	Num	8		Mean airway pressure
42	tidalpost	Num	8		Calculated delivered tidal volume after vent change
43	pplatpost	Num	8		Plateau Pressure after vent change
44	peeppost	Num	8		PEEP after vent change
45	fio2abg_0	Num	8		FiO2 at time of ABG:
46	pao2abg_0	Num	8		PaO2 (cm H20):
47	paco2abg_0	Num	8		PaCO2 (cm H20):
48	phabg_0	Num	8		Arterial pH:
49	spo2abg_0	Num	8		SpO2 at time of ABG
50	ventX	Char	64	$64.	Vent Mode (Not Done)
51	tidalx_0	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 (L/min) (Not Done)
54	peepx_0	Char	64	$64.	PEEP (cm H2O): (Not Done)
55	fio2x_0	Char	64	$64.	FiO2 prior to randomization (Not Done)
56	SpO2x_0	Char	64	$64.	SpO2 prior to randomization (Not Done)
57	meanairX	Char	64	$64.	Mean airway pressure (Not Done)
58	pressupcmh2o_1	Num	8		Pressure Support cmH2O
59	presascmh2o_1	Num	8		Pressure Assist cmH2O
60	ventmodex_1	Char	64	$64.	Vent mode: (Not Done)
61	respx_1	Char	64	$64.	Total Respiratory Rate (Not Done)
62	minventx_1	Char	64	$64.	Total Minute Ventilation (Not Done)
63	meanairx_1	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
64	simv_1	Num	8		SIMV
65	simvc_1	Char	4	$4.	SIMV
66	prvc_1	Num	8		PRVC (pressure regulated volume control) or equivalent
67	prvc2_1	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
68	pressup_1	Num	8		Pressure Support (y/n)
69	pressupc_1	Char	16	$16.	Pressure Support (y/n)
70	volassist_1	Num	8		Volume Assist/Control
71	volassistc_1	Char	21	$21.	Volume Assist/Control
72	presassist_1	Num	8		Pressure Assist (y/n)
73	presassistc_1	Char	15	$15.	Pressure Assist (y/n)
74	pcirv_1	Num	8		PC IRV
75	pcirvc_1	Char	6	$6.	PC IRV

Num	Variable	Type	Len	Format	Label
76	aprv_1	Num	8		Airway Pressure Release Ventilation (APRV)
77	aprvc_1	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
78	ventoth_1	Num	8		Other vent mode
79	ventothc_1	Char	5	$5.	Other vent mode
80	hfov_1	Num	8		HFOV
81	hfovc_1	Char	4	$4.	HFOV
82	othvent_1	Char	255	$255.	Enter other vent mode:
83	tidal_1	Num	8		Calculated Delivered Tidal Volume
84	setrate_1	Num	8		Set Rate
85	resp_1	Num	8		Total Respiratory Rate
86	minvent_1	Num	8		Total Minute Ventilation
87	peep_1	Num	8		PEEP (cm H2O):
88	fio2_1	Num	8		FiO2 at 0800
89	SpO2_1	Num	8		SpO2 at 0800
90	pplat_1	Num	8		Plateau Pressure (cm H2O):
91	pip_1	Num	8		Peak Inspiratory Pressure
92	meanair_1	Num	8		Mean airway pressure (cm H2O)
93	fio2abg_1	Num	8		FiO2 at time of ABG:
94	pao2abg_1	Num	8		PaO2 (cm H20):
95	paco2abg_1	Num	8		PaCO2 (cm H20):
96	phabg_1	Num	8		Arterial pH:
97	spo2abg_1	Num	8		SpO2 at time of ABG
98	tidalx_1	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
99	peepx_1	Char	64	$64.	PEEP (cm H2O): (Not Done)
100	fio2x_1	Char	64	$64.	FiO2 at 0800 (Not Done)
101	SpO2x_1	Char	64	$64.	SpO2 at 0800 (Not Done)
102	pressupcmh2o_2	Num	8		Pressure Support cmH2O
103	presascmh2o_2	Num	8		Pressure Assist cmH2O
104	ventmodex_2	Char	64	$64.	Vent mode: (Not Done)
105	respx_2	Char	64	$64.	Total Respiratory Rate (Not Done)
106	minventx_2	Char	64	$64.	Total Minute Ventilation (Not Done)
107	meanairx_2	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
108	simv_2	Num	8		SIMV
109	simvc_2	Char	4	$4.	SIMV
110	prvc_2	Num	8		PRVC (pressure regulated volume control) or equivalent
111	prvc2_2	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
112	pressup_2	Num	8		Pressure Support (y/n)
113	pressupc_2	Char	16	$16.	Pressure Support (y/n)
114	volassist_2	Num	8		Volume Assist/Control

Num	Variable	Type	Len	Format	Label
115	volassistc_2	Char	21	$21.	Volume Assist/Control
116	presassist_2	Num	8		Pressure Assist (y/n)
117	presassistc_2	Char	15	$15.	Pressure Assist (y/n)
118	pcirv_2	Num	8		PC IRV
119	pcirvc_2	Char	6	$6.	PC IRV
120	aprv_2	Num	8		Airway Pressure Release Ventilation (APRV)
121	aprvc_2	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
122	ventoth_2	Num	8		Other vent mode
123	ventothc_2	Char	5	$5.	Other vent mode
124	hfov_2	Num	8		HFOV
125	hfovc_2	Char	4	$4.	HFOV
126	othvent_2	Char	255	$255.	Enter other vent mode:
127	tidal_2	Num	8		Calculated Delivered Tidal Volume
128	setrate_2	Num	8		Set Rate
129	resp_2	Num	8		Total Respiratory Rate
130	minvent_2	Num	8		Total Minute Ventilation
131	peep_2	Num	8		PEEP (cm H2O):
132	fio2_2	Num	8		FiO2 at 0800
133	SpO2_2	Num	8		SpO2 at 0800
134	pplat_2	Num	8		Plateau Pressure (cm H2O):
135	pip_2	Num	8		Peak Inspiratory Pressure
136	meanair_2	Num	8		Mean airway pressure (cm H2O)
137	fio2abg_2	Num	8		FiO2 at time of ABG:
138	pao2abg_2	Num	8		PaO2 (cm H20):
139	paco2abg_2	Num	8		PaCO2 (cm H20):
140	phabg_2	Num	8		Arterial pH:
141	spo2abg_2	Num	8		SpO2 at time of ABG
142	tidalx_2	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
143	peepx_2	Char	64	$64.	PEEP (cm H2O): (Not Done)
144	fio2x_2	Char	64	$64.	FiO2 at 0800 (Not Done)
145	SpO2x_2	Char	64	$64.	SpO2 at 0800 (Not Done)
146	pressupcmh2o_3	Num	8		Pressure Support cmH2O
147	presascmh2o_3	Num	8		Pressure Assist cmH2O
148	ventmodex_3	Char	64	$64.	Vent mode: (Not Done)
149	respx_3	Char	64	$64.	Total Respiratory Rate (Not Done)
150	minventx_3	Char	64	$64.	Total Minute Ventilation (Not Done)
151	meanairx_3	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
152	simv_3	Num	8		SIMV
153	simvc_3	Char	4	$4.	SIMV

Num	Variable	Type	Len	Format	Label
154	prvc_3	Num	8		PRVC (pressure regulated volume control) or equivalent
155	prvc2_3	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
156	pressup_3	Num	8		Pressure Support (y/n)
157	pressupc_3	Char	16	$16.	Pressure Support (y/n)
158	volassist_3	Num	8		Volume Assist/Control
159	volassistc_3	Char	21	$21.	Volume Assist/Control
160	presassist_3	Num	8		Pressure Assist (y/n)
161	presassistc_3	Char	15	$15.	Pressure Assist (y/n)
162	pcirv_3	Num	8		PC IRV
163	pcirvc_3	Char	6	$6.	PC IRV
164	aprv_3	Num	8		Airway Pressure Release Ventilation (APRV)
165	aprvc_3	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
166	ventoth_3	Num	8		Other vent mode
167	ventothc_3	Char	5	$5.	Other vent mode
168	hfov_3	Num	8		HFOV
169	hfovc_3	Char	4	$4.	HFOV
170	othvent_3	Char	255	$255.	Enter other vent mode:
171	tidal_3	Num	8		Calculated Delivered Tidal Volume
172	setrate_3	Num	8		Set Rate
173	resp_3	Num	8		Total Respiratory Rate
174	minvent_3	Num	8		Total Minute Ventilation
175	peep_3	Num	8		PEEP (cm H2O):
176	fio2_3	Num	8		FiO2 at 0800
177	SpO2_3	Num	8		SpO2 at 0800
178	pplat_3	Num	8		Plateau Pressure (cm H2O):
179	pip_3	Num	8		Peak Inspiratory Pressure
180	meanair_3	Num	8		Mean airway pressure (cm H2O)
181	fio2abg_3	Num	8		FiO2 at time of ABG:
182	pao2abg_3	Num	8		PaO2 (cm H20):
183	paco2abg_3	Num	8		PaCO2 (cm H20):
184	phabg_3	Num	8		Arterial pH:
185	spo2abg_3	Num	8		SpO2 at time of ABG
186	tidalx_3	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
187	peepx_3	Char	64	$64.	PEEP (cm H2O): (Not Done)
188	fio2x_3	Char	64	$64.	FiO2 at 0800 (Not Done)
189	SpO2x_3	Char	64	$64.	SpO2 at 0800 (Not Done)
190	pressupcmh2o_4	Num	8		Pressure Support cmH2O
191	presascmh2o_4	Num	8		Pressure Assist cmH2O
192	ventmodex_4	Char	64	$64.	Vent mode: (Not Done)

Num	Variable	Type	Len	Format	Label
193	respx_4	Char	64	$64.	Total Respiratory Rate (Not Done)
194	minventx_4	Char	64	$64.	Total Minute Ventilation (Not Done)
195	meanairx_4	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
196	simv_4	Num	8		SIMV
197	simvc_4	Char	4	$4.	SIMV
198	prvc_4	Num	8		PRVC (pressure regulated volume control) or equivalent
199	prvc2_4	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
200	pressup_4	Num	8		Pressure Support (y/n)
201	pressupc_4	Char	16	$16.	Pressure Support (y/n)
202	volassist_4	Num	8		Volume Assist/Control
203	volassistc_4	Char	21	$21.	Volume Assist/Control
204	presassist_4	Num	8		Pressure Assist (y/n)
205	presassistc_4	Char	15	$15.	Pressure Assist (y/n)
206	pcirv_4	Num	8		PC IRV
207	pcirvc_4	Char	6	$6.	PC IRV
208	aprv_4	Num	8		Airway Pressure Release Ventilation (APRV)
209	aprvc_4	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
210	ventoth_4	Num	8		Other vent mode
211	ventothc_4	Char	5	$5.	Other vent mode
212	hfov_4	Num	8		HFOV
213	hfovc_4	Char	4	$4.	HFOV
214	othvent_4	Char	255	$255.	Enter other vent mode:
215	tidal_4	Num	8		Calculated Delivered Tidal Volume
216	setrate_4	Num	8		Set Rate
217	resp_4	Num	8		Total Respiratory Rate
218	minvent_4	Num	8		Total Minute Ventilation
219	peep_4	Num	8		PEEP (cm H2O):
220	fio2_4	Num	8		FiO2 at 0800
221	SpO2_4	Num	8		SpO2 at 0800
222	pplat_4	Num	8		Plateau Pressure (cm H2O):
223	pip_4	Num	8		Peak Inspiratory Pressure
224	meanair_4	Num	8		Mean airway pressure (cm H2O)
225	fio2abg_4	Num	8		FiO2 at time of ABG:
226	pao2abg_4	Num	8		PaO2 (cm H20):
227	paco2abg_4	Num	8		PaCO2 (cm H20):
228	phabg_4	Num	8		Arterial pH:
229	spo2abg_4	Num	8		SpO2 at time of ABG
230	tidalx_4	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
231	peepx_4	Char	64	$64.	PEEP (cm H2O): (Not Done)

Num	Variable	Type	Len	Format	Label
232	fio2x_4	Char	64	$64.	FiO2 at 0800 (Not Done)
233	SpO2x_4	Char	64	$64.	SpO2 at 0800 (Not Done)
234	pressupcmh2o_7	Num	8		Pressure Support cmH2O
235	presascmh2o_7	Num	8		Pressure Assist cmH2O
236	ventmodex_7	Char	64	$64.	Vent mode: (Not Done)
237	respx_7	Char	64	$64.	Total Respiratory Rate (Not Done)
238	minventx_7	Char	64	$64.	Total Minute Ventilation (Not Done)
239	meanairx_7	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
240	simv_7	Num	8		SIMV
241	simvc_7	Char	4	$4.	SIMV
242	prvc_7	Num	8		PRVC (pressure regulated volume control) or equivalent
243	prvc2_7	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
244	pressup_7	Num	8		Pressure Support (y/n)
245	pressupc_7	Char	16	$16.	Pressure Support (y/n)
246	volassist_7	Num	8		Volume Assist/Control
247	volassistc_7	Char	21	$21.	Volume Assist/Control
248	presassist_7	Num	8		Pressure Assist (y/n)
249	presassistc_7	Char	15	$15.	Pressure Assist (y/n)
250	pcirv_7	Num	8		PC IRV
251	pcirvc_7	Char	6	$6.	PC IRV
252	aprv_7	Num	8		Airway Pressure Release Ventilation (APRV)
253	aprvc_7	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
254	ventoth_7	Num	8		Other vent mode
255	ventothc_7	Char	5	$5.	Other vent mode
256	hfov_7	Num	8		HFOV
257	hfovc_7	Char	4	$4.	HFOV
258	othvent_7	Char	255	$255.	Enter other vent mode:
259	tidal_7	Num	8		Calculated Delivered Tidal Volume
260	setrate_7	Num	8		Set Rate
261	resp_7	Num	8		Total Respiratory Rate
262	minvent_7	Num	8		Total Minute Ventilation
263	peep_7	Num	8		PEEP (cm H2O):
264	fio2_7	Num	8		FiO2 at 0800
265	SpO2_7	Num	8		SpO2 at 0800
266	pplat_7	Num	8		Plateau Pressure (cm H2O):
267	pip_7	Num	8		Peak Inspiratory Pressure
268	meanair_7	Num	8		Mean airway pressure (cm H2O)
269	fio2abg_7	Num	8		FiO2 at time of ABG:
270	pao2abg_7	Num	8		PaO2 (cm H20):

Num	Variable	Type	Len	Format	Label
271	paco2abg_7	Num	8		PaCO2 (cm H20):
272	phabg_7	Num	8		Arterial pH:
273	spo2abg_7	Num	8		SpO2 at time of ABG
274	tidalx_7	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
275	peepx_7	Char	64	$64.	PEEP (cm H2O): (Not Done)
276	fio2x_7	Char	64	$64.	FiO2 at 0800 (Not Done)
277	SpO2x_7	Char	64	$64.	SpO2 at 0800 (Not Done)
278	pressupcmh2o_12	Num	8		Pressure Support cmH2O
279	presascmh2o_12	Num	8		Pressure Assist cmH2O
280	ventmodex_12	Char	64	$64.	Vent mode: (Not Done)
281	respx_12	Char	64	$64.	Total Respiratory Rate (Not Done)
282	minventx_12	Char	64	$64.	Total Minute Ventilation (Not Done)
283	meanairx_12	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
284	simv_12	Num	8		SIMV
285	simvc_12	Char	4	$4.	SIMV
286	prvc_12	Num	8		PRVC (pressure regulated volume control) or equivalent
287	prvc2_12	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
288	pressup_12	Num	8		Pressure Support (y/n)
289	pressupc_12	Char	16	$16.	Pressure Support (y/n)
290	volassist_12	Num	8		Volume Assist/Control
291	volassistc_12	Char	21	$21.	Volume Assist/Control
292	presassist_12	Num	8		Pressure Assist (y/n)
293	presassistc_12	Char	15	$15.	Pressure Assist (y/n)
294	pcirv_12	Num	8		PC IRV
295	pcirvc_12	Char	6	$6.	PC IRV
296	aprv_12	Num	8		Airway Pressure Release Ventilation (APRV)
297	aprvc_12	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
298	ventoth_12	Num	8		Other vent mode
299	ventothc_12	Char	5	$5.	Other vent mode
300	hfov_12	Num	8		HFOV
301	hfovc_12	Char	4	$4.	HFOV
302	othvent_12	Char	255	$255.	Enter other vent mode:
303	tidal_12	Num	8		Calculated Delivered Tidal Volume
304	setrate_12	Num	8		Set Rate
305	resp_12	Num	8		Total Respiratory Rate
306	minvent_12	Num	8		Total Minute Ventilation
307	peep_12	Num	8		PEEP (cm H2O):
308	fio2_12	Num	8		FiO2 at 0800
309	SpO2_12	Num	8		SpO2 at 0800

Num	Variable	Type	Len	Format	Label
310	pplat_12	Num	8		Plateau Pressure (cm H2O):
311	pip_12	Num	8		Peak Inspiratory Pressure
312	meanair_12	Num	8		Mean airway pressure (cm H2O)
313	fio2abg_12	Num	8		FiO2 at time of ABG:
314	pao2abg_12	Num	8		PaO2 (cm H20):
315	paco2abg_12	Num	8		PaCO2 (cm H20):
316	phabg_12	Num	8		Arterial pH:
317	spo2abg_12	Num	8		SpO2 at time of ABG
318	tidalx_12	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
319	peepx_12	Char	64	$64.	PEEP (cm H2O): (Not Done)
320	fio2x_12	Char	64	$64.	FiO2 at 0800 (Not Done)
321	SpO2x_12	Char	64	$64.	SpO2 at 0800 (Not Done)
322	pressupcmh2o_21	Num	8		Pressure Support cmH2O
323	presascmh2o_21	Num	8		Pressure Assist cmH2O
324	ventmodex_21	Char	64	$64.	Vent mode: (Not Done)
325	respx_21	Char	64	$64.	Total Respiratory Rate (Not Done)
326	minventx_21	Char	64	$64.	Total Minute Ventilation (Not Done)
327	meanairx_21	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
328	simv_21	Num	8		SIMV
329	simvc_21	Char	4	$4.	SIMV
330	prvc_21	Num	8		PRVC (pressure regulated volume control) or equivalent
331	prvc2_21	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
332	pressup_21	Num	8		Pressure Support (y/n)
333	pressupc_21	Char	16	$16.	Pressure Support (y/n)
334	volassist_21	Num	8		Volume Assist/Control
335	volassistc_21	Char	21	$21.	Volume Assist/Control
336	presassist_21	Num	8		Pressure Assist (y/n)
337	presassistc_21	Char	15	$15.	Pressure Assist (y/n)
338	pcirv_21	Num	8		PC IRV
339	pcirvc_21	Char	6	$6.	PC IRV
340	aprv_21	Num	8		Airway Pressure Release Ventilation (APRV)
341	aprvc_21	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
342	ventoth_21	Num	8		Other vent mode
343	ventothc_21	Char	5	$5.	Other vent mode
344	hfov_21	Num	8		HFOV
345	hfovc_21	Char	4	$4.	HFOV
346	othvent_21	Char	255	$255.	Enter other vent mode:
347	tidal_21	Num	8		Calculated Delivered Tidal Volume
348	setrate_21	Num	8		Set Rate

Num	Variable	Type	Len	Format	Label
349	resp_21	Num	8		Total Respiratory Rate
350	minvent_21	Num	8		Total Minute Ventilation
351	peep_21	Num	8		PEEP (cm H2O):
352	fio2_21	Num	8		FiO2 at 0800
353	SpO2_21	Num	8		SpO2 at 0800
354	pplat_21	Num	8		Plateau Pressure (cm H2O):
355	pip_21	Num	8		Peak Inspiratory Pressure
356	meanair_21	Num	8		Mean airway pressure (cm H2O)
357	fio2abg_21	Num	8		FiO2 at time of ABG:
358	pao2abg_21	Num	8		PaO2 (cm H20):
359	paco2abg_21	Num	8		PaCO2 (cm H20):
360	phabg_21	Num	8		Arterial pH:
361	spo2abg_21	Num	8		SpO2 at time of ABG
362	tidalx_21	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
363	peepx_21	Char	64	$64.	PEEP (cm H2O): (Not Done)
364	fio2x_21	Char	64	$64.	FiO2 at 0800 (Not Done)
365	SpO2x_21	Char	64	$64.	SpO2 at 0800 (Not Done)
366	pressupcmh2o_28	Num	8		Pressure Support cmH2O
367	presascmh2o_28	Num	8		Pressure Assist cmH2O
368	ventmodex_28	Char	64	$64.	Vent mode: (Not Done)
369	respx_28	Char	64	$64.	Total Respiratory Rate (Not Done)
370	minventx_28	Char	64	$64.	Total Minute Ventilation (Not Done)
371	meanairx_28	Char	64	$64.	Mean airway pressure (cm H2O) (Not Done)
372	simv_28	Num	8		SIMV
373	simvc_28	Char	4	$4.	SIMV
374	prvc_28	Num	8		PRVC (pressure regulated volume control) or equivalent
375	prvc2_28	Char	54	$54.	PRVC (pressure regulated volume control) or equivalent
376	pressup_28	Num	8		Pressure Support (y/n)
377	pressupc_28	Char	16	$16.	Pressure Support (y/n)
378	volassist_28	Num	8		Volume Assist/Control
379	volassistc_28	Char	21	$21.	Volume Assist/Control
380	presassist_28	Num	8		Pressure Assist (y/n)
381	presassistc_28	Char	15	$15.	Pressure Assist (y/n)
382	pcirv_28	Num	8		PC IRV
383	pcirvc_28	Char	6	$6.	PC IRV
384	aprv_28	Num	8		Airway Pressure Release Ventilation (APRV)
385	aprvc_28	Char	42	$42.	Airway Pressure Release Ventilation (APRV)
386	ventoth_28	Num	8		Other vent mode
387	ventothc_28	Char	5	$5.	Other vent mode

Num	Variable	Type	Len	Format	Label
388	hfov_28	Num	8		HFOV
389	hfovc_28	Char	4	$4.	HFOV
390	othvent_28	Char	255	$255.	Enter other vent mode:
391	tidal_28	Num	8		Calculated Delivered Tidal Volume
392	setrate_28	Num	8		Set Rate
393	resp_28	Num	8		Total Respiratory Rate
394	minvent_28	Num	8		Total Minute Ventilation
395	peep_28	Num	8		PEEP (cm H2O):
396	fio2_28	Num	8		FiO2 at 0800
397	SpO2_28	Num	8		SpO2 at 0800
398	pplat_28	Num	8		Plateau Pressure (cm H2O):
399	pip_28	Num	8		Peak Inspiratory Pressure
400	meanair_28	Num	8		Mean airway pressure (cm H2O)
401	fio2abg_28	Num	8		FiO2 at time of ABG:
402	pao2abg_28	Num	8		PaO2 (cm H20):
403	paco2abg_28	Num	8		PaCO2 (cm H20):
404	phabg_28	Num	8		Arterial pH:
405	spo2abg_28	Num	8		SpO2 at time of ABG
406	tidalx_28	Char	64	$64.	Calculated Delivered Tidal Volume (Not Done)
407	peepx_28	Char	64	$64.	PEEP (cm H2O): (Not Done)
408	fio2x_28	Char	64	$64.	FiO2 at 0800 (Not Done)
409	SpO2x_28	Char	64	$64.	SpO2 at 0800 (Not Done)

Data Set Name: vent_pf_long.sas7bdat

Num	Variable	Type	Len	Format	Label
1	ptid	Char	13	$13.	ptid
2	omegachar	Char	12		
3	eden	Char	20		
4	pf1	Num	8		
5	pf2	Num	8		
6	pf3	Num	8		
7	pf4	Num	8		
8	pf7	Num	8		
9	pf12	Num	8		
10	pf21	Num	8		
11	pf28	Num	8		

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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	ipatrox	Char	64		
12	hrate_0	Num	8		Heart Rate (beats/min):
13	sysbp_0	Num	8		Systolic BP (mmHg):
14	diabp_0	Num	8		Diastolic BP (mmHg)
15	cvp_0	Num	8		Central Venous Pressure (mmHg):
16	map	Num	8		Mean Arterial Pressure (mmHg):
17	temp_0	Num	8		Temperature (C)
18	height	Num	8		Measured Height (cm)
19	weight	Num	8		Measured Weight (Kg)
20	pbw	Char	255	$255.	Predicted Body Weight
21	vaso_0	Num	8		IV Vasopressors or inotropes in 24 hrs preceding randomization
22	vasoc_0	Char	3	$3.	IV Vasopressors or inotropes in 24 hrs preceding randomization
23	dobut_0	Num	8		Dobutamine Infusion Rate
24	dobutu_0	Char	9	$9.	Dobutamine Units
25	dopa_0	Num	8		Dopamine Infusion Rate:
26	dopau_0	Char	9	$9.	Dopamine Units
27	norepi_0	Num	8		Norepinephrine Infusion Rate
28	norepiu_0	Char	9	$9.	Norepinephrine Units
29	epi_0	Num	8		Epinephrine Infusion Rate
30	epiu_0	Char	9	$9.	Epinephrine Units
31	vasorate_0	Num	8		Vasopressin Infusion Rate
32	neosyn_0	Num	8		Neosynephrine (phenylephrine) Infusion Rate
33	neosynu_0	Char	9	$9.	Neosynephrine (phenylephrine) Units
34	vasooth_0	Char	50	$50.	Other Vasopressor
35	betablock_0	Num	8		Beta blockers (IV, PO, PGT) in 24 hours preceding randomization?
36	betablockc_0	Char	3	$3.	Beta blockers (IV, PO, PGT) in 24 hours preceding randomization?

Num	Variable	Type	Len	Format	Label
37	hratex_0	Char	64	$64.	Heart Rate (beats/min): (Not done)
38	sysbpx_0	Char	64	$64.	Systolic BP (mmHg): (Not Done)
39	diabpx_0	Char	64	$64.	Diastolic BP (mmHg) (Not Done)
40	tempx_0	Char	64	$64.	Temperature (C) (Not Done)
41	heightx	Char	64	$64.	Measured Height (cm) (Not Done)
42	vasox_0	Char	64	$64.	IV Vasopressors or inotropes in 24 hrs preceding randomization (Not Done)
43	betablockx_0	Char	64	$64.	Beta blockers (IV, PO, PGT) in 24 hours preceding randomization? (Not Done)
44	cxrquads_1	Num	8		CXR: Number of quadrants with infiltrates
45	cort20_1	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
46	cort20c_1	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
47	ipatro_1	Num	8		Aerosolized or MDI delivered ipatropium?
48	ipatroc_1	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
49	ipadose_1	Num	8		Yes: Enter total number of doses this day:
50	nsbetag_1	Num	8		Non-study beta-agonist aerosol this day?
51	nsbetagc_1	Char	85	$85.	Non-study beta-agonist aerosol this day?
52	nsbetagdose_1	Num	8		Yes: Enter total dose in mg this day
53	nsbetagx_1	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
54	hrate_1	Num	8		Heart Rate (beat/min):
55	sysbp_1	Num	8		Systolic BP (mmHg):
56	diabp_1	Num	8		Diastolic BP (mmHg):
57	temp_1	Num	8		Temperature (Celcius):
58	cvp_1	Num	8		CVP (mmHg):
59	vaso_1	Num	8		Vasopressors/inotropes this day?
60	vasoc_1	Char	3	$3.	Vasopressors/inotropes this day?
61	dobut_1	Num	8		IV Dobutamine Infusion Rate:
62	dobutu_1	Char	9	$9.	IV Dobutamine Infusion Rate Units
63	dopa_1	Num	8		IV Dopamine Infusion Rate:
64	dopau_1	Char	9	$9.	IV Dopamine Infusion Rate Units
65	norepi_1	Num	8		IV Norepinephrine Infusion Rate:
66	norepiu_1	Char	9	$9.	IV Norepinephrine Infusion Rate Units
67	epi_1	Num	8		IV Epinephrine Infusion Rate:
68	epiu_1	Char	9	$9.	ug/kg/min or ug/min
69	vasorate_1	Num	8		IV Vasopressin Infusion Rate (units/min):
70	neosyn_1	Num	8		IV Neosynephrine Infusion Rate:
71	neosynu_1	Char	9	$9.	IV Neosynephrine Infusion Rate Units
72	vasooth_1	Char	50	$50.	If Other Please Specify:
73	betablock_1	Num	8		Beta Blockers (IV, PO, PGT) this day?

Num	Variable	Type	Len	Format	Label
74	betablockc_1	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
75	hratex_1	Char	64	$64.	Heart Rate (beat/min): (Not Done)
76	sysbpx_1	Char	64	$64.	Systolic BP (mmHg): (Not Done)
77	diabpx_1	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
78	tempx_1	Char	64	$64.	Temperature (Celcius): (Not Done)
79	vasox_1	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
80	betablockx_1	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
81	cxrquads_2	Num	8		CXR: Number of quadrants with infiltrates
82	cort20_2	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
83	cort20c_2	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
84	ipatro_2	Num	8		Aerosolized or MDI delivered ipatropium?
85	ipatroc_2	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
86	ipadose_2	Num	8		Yes: Enter total number of doses this day:
87	nsbetag_2	Num	8		Non-study beta-agonist aerosol this day?
88	nsbetagc_2	Char	85	$85.	Non-study beta-agonist aerosol this day?
89	nsbetagdose_2	Num	8		Yes: Enter total dose in mg this day
90	nsbetagx_2	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
91	hrate_2	Num	8		Heart Rate (beat/min):
92	sysbp_2	Num	8		Systolic BP (mmHg):
93	diabp_2	Num	8		Diastolic BP (mmHg):
94	temp_2	Num	8		Temperature (Celcius):
95	cvp_2	Num	8		CVP (mmHg):
96	vaso_2	Num	8		Vasopressors/inotropes this day?
97	vasoc_2	Char	3	$3.	Vasopressors/inotropes this day?
98	dobut_2	Num	8		IV Dobutamine Infusion Rate:
99	dobutu_2	Char	9	$9.	IV Dobutamine Infusion Rate Units
100	dopa_2	Num	8		IV Dopamine Infusion Rate:
101	dopau_2	Char	9	$9.	IV Dopamine Infusion Rate Units
102	norepi_2	Num	8		IV Norepinephrine Infusion Rate:
103	norepiu_2	Char	9	$9.	IV Norepinephrine Infusion Rate Units
104	epi_2	Num	8		IV Epinephrine Infusion Rate:
105	epiu_2	Char	9	$9.	ug/kg/min or ug/min
106	vasorate_2	Num	8		IV Vasopressin Infusion Rate (units/min):
107	neosyn_2	Num	8		IV Neosynephrine Infusion Rate:
108	neosynu_2	Char	9	$9.	IV Neosynephrine Infusion Rate Units
109	vasooth_2	Char	50	$50.	If Other Please Specify:
110	betablock_2	Num	8		Beta Blockers (IV, PO, PGT) this day?

Num	Variable	Type	Len	Format	Label
111	betablockc_2	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
112	hratex_2	Char	64	$64.	Heart Rate (beat/min): (Not Done)
113	sysbpx_2	Char	64	$64.	Systolic BP (mmHg): (Not Done)
114	diabpx_2	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
115	tempx_2	Char	64	$64.	Temperature (Celcius): (Not Done)
116	vasox_2	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
117	betablockx_2	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
118	cxrquads_3	Num	8		CXR: Number of quadrants with infiltrates
119	cort20_3	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
120	cort20c_3	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
121	ipatro_3	Num	8		Aerosolized or MDI delivered ipatropium?
122	ipatroc_3	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
123	ipadose_3	Num	8		Yes: Enter total number of doses this day:
124	nsbetag_3	Num	8		Non-study beta-agonist aerosol this day?
125	nsbetagc_3	Char	85	$85.	Non-study beta-agonist aerosol this day?
126	nsbetagdose_3	Num	8		Yes: Enter total dose in mg this day
127	nsbetagx_3	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
128	hrate_3	Num	8		Heart Rate (beat/min):
129	sysbp_3	Num	8		Systolic BP (mmHg):
130	diabp_3	Num	8		Diastolic BP (mmHg):
131	temp_3	Num	8		Temperature (Celcius):
132	cvp_3	Num	8		CVP (mmHg):
133	vaso_3	Num	8		Vasopressors/inotropes this day?
134	vasoc_3	Char	3	$3.	Vasopressors/inotropes this day?
135	dobut_3	Num	8		IV Dobutamine Infusion Rate:
136	dobutu_3	Char	9	$9.	IV Dobutamine Infusion Rate Units
137	dopa_3	Num	8		IV Dopamine Infusion Rate:
138	dopau_3	Char	9	$9.	IV Dopamine Infusion Rate Units
139	norepi_3	Num	8		IV Norepinephrine Infusion Rate:
140	norepiu_3	Char	9	$9.	IV Norepinephrine Infusion Rate Units
141	epi_3	Num	8		IV Epinephrine Infusion Rate:
142	epiu_3	Char	9	$9.	ug/kg/min or ug/min
143	vasorate_3	Num	8		IV Vasopressin Infusion Rate (units/min):
144	neosyn_3	Num	8		IV Neosynephrine Infusion Rate:
145	neosynu_3	Char	9	$9.	IV Neosynephrine Infusion Rate Units
146	vasooth_3	Char	50	$50.	If Other Please Specify:
147	betablock_3	Num	8		Beta Blockers (IV, PO, PGT) this day?

Num	Variable	Type	Len	Format	Label
148	betablockc_3	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
149	hratex_3	Char	64	$64.	Heart Rate (beat/min): (Not Done)
150	sysbpx_3	Char	64	$64.	Systolic BP (mmHg): (Not Done)
151	diabpx_3	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
152	tempx_3	Char	64	$64.	Temperature (Celcius): (Not Done)
153	vasox_3	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
154	betablockx_3	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
155	cxrquads_4	Num	8		CXR: Number of quadrants with infiltrates
156	cort20_4	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
157	cort20c_4	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
158	ipatro_4	Num	8		Aerosolized or MDI delivered ipatropium?
159	ipatroc_4	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
160	ipadose_4	Num	8		Yes: Enter total number of doses this day:
161	nsbetag_4	Num	8		Non-study beta-agonist aerosol this day?
162	nsbetagc_4	Char	85	$85.	Non-study beta-agonist aerosol this day?
163	nsbetagdose_4	Num	8		Yes: Enter total dose in mg this day
164	nsbetagx_4	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
165	hrate_4	Num	8		Heart Rate (beat/min):
166	sysbp_4	Num	8		Systolic BP (mmHg):
167	diabp_4	Num	8		Diastolic BP (mmHg):
168	temp_4	Num	8		Temperature (Celcius):
169	cvp_4	Num	8		CVP (mmHg):
170	vaso_4	Num	8		Vasopressors/inotropes this day?
171	vasoc_4	Char	3	$3.	Vasopressors/inotropes this day?
172	dobut_4	Num	8		IV Dobutamine Infusion Rate:
173	dobutu_4	Char	9	$9.	IV Dobutamine Infusion Rate Units
174	dopa_4	Num	8		IV Dopamine Infusion Rate:
175	dopau_4	Char	9	$9.	IV Dopamine Infusion Rate Units
176	norepi_4	Num	8		IV Norepinephrine Infusion Rate:
177	norepiu_4	Char	9	$9.	IV Norepinephrine Infusion Rate Units
178	epi_4	Num	8		IV Epinephrine Infusion Rate:
179	epiu_4	Char	9	$9.	ug/kg/min or ug/min
180	vasorate_4	Num	8		IV Vasopressin Infusion Rate (units/min):
181	neosyn_4	Num	8		IV Neosynephrine Infusion Rate:
182	neosynu_4	Char	9	$9.	IV Neosynephrine Infusion Rate Units
183	vasooth_4	Char	50	$50.	If Other Please Specify:
184	betablock_4	Num	8		Beta Blockers (IV, PO, PGT) this day?

Num	Variable	Type	Len	Format	Label
185	betablockc_4	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
186	hratex_4	Char	64	$64.	Heart Rate (beat/min): (Not Done)
187	sysbpx_4	Char	64	$64.	Systolic BP (mmHg): (Not Done)
188	diabpx_4	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
189	tempx_4	Char	64	$64.	Temperature (Celcius): (Not Done)
190	vasox_4	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
191	betablockx_4	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
192	cxrquads_5	Num	8		CXR: Number of quadrants with infiltrates
193	cort20_5	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
194	cort20c_5	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
195	ipatro_5	Num	8		Aerosolized or MDI delivered ipatropium?
196	ipatroc_5	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
197	ipadose_5	Num	8		Yes: Enter total number of doses this day:
198	nsbetag_5	Num	8		Non-study beta-agonist aerosol this day?
199	nsbetagc_5	Char	85	$85.	Non-study beta-agonist aerosol this day?
200	nsbetagdose_5	Num	8		Yes: Enter total dose in mg this day
201	nsbetagx_5	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
202	hrate_5	Num	8		Heart Rate (beat/min):
203	sysbp_5	Num	8		Systolic BP (mmHg):
204	diabp_5	Num	8		Diastolic BP (mmHg):
205	temp_5	Num	8		Temperature (Celcius):
206	cvp_5	Num	8		CVP (mmHg):
207	vaso_5	Num	8		Vasopressors/inotropes this day?
208	vasoc_5	Char	3	$3.	Vasopressors/inotropes this day?
209	dobut_5	Num	8		IV Dobutamine Infusion Rate:
210	dobutu_5	Char	9	$9.	IV Dobutamine Infusion Rate Units
211	dopa_5	Num	8		IV Dopamine Infusion Rate:
212	dopau_5	Char	9	$9.	IV Dopamine Infusion Rate Units
213	norepi_5	Num	8		IV Norepinephrine Infusion Rate:
214	norepiu_5	Char	9	$9.	IV Norepinephrine Infusion Rate Units
215	epi_5	Num	8		IV Epinephrine Infusion Rate:
216	epiu_5	Char	9	$9.	ug/kg/min or ug/min
217	vasorate_5	Num	8		IV Vasopressin Infusion Rate (units/min):
218	neosyn_5	Num	8		IV Neosynephrine Infusion Rate:
219	neosynu_5	Char	9	$9.	IV Neosynephrine Infusion Rate Units
220	vasooth_5	Char	50	$50.	If Other Please Specify:
221	betablock_5	Num	8		Beta Blockers (IV, PO, PGT) this day?

Num	Variable	Type	Len	Format	Label
222	betablockc_5	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
223	hratex_5	Char	64	$64.	Heart Rate (beat/min): (Not Done)
224	sysbpx_5	Char	64	$64.	Systolic BP (mmHg): (Not Done)
225	diabpx_5	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
226	tempx_5	Char	64	$64.	Temperature (Celcius): (Not Done)
227	vasox_5	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
228	betablockx_5	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
229	cxrquads_6	Num	8		CXR: Number of quadrants with infiltrates
230	cort20_6	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
231	cort20c_6	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
232	ipatro_6	Num	8		Aerosolized or MDI delivered ipatropium?
233	ipatroc_6	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
234	ipadose_6	Num	8		Yes: Enter total number of doses this day:
235	nsbetag_6	Num	8		Non-study beta-agonist aerosol this day?
236	nsbetagc_6	Char	85	$85.	Non-study beta-agonist aerosol this day?
237	nsbetagdose_6	Num	8		Yes: Enter total dose in mg this day
238	nsbetagx_6	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
239	hrate_6	Num	8		Heart Rate (beat/min):
240	sysbp_6	Num	8		Systolic BP (mmHg):
241	diabp_6	Num	8		Diastolic BP (mmHg):
242	temp_6	Num	8		Temperature (Celcius):
243	cvp_6	Num	8		CVP (mmHg):
244	vaso_6	Num	8		Vasopressors/inotropes this day?
245	vasoc_6	Char	3	$3.	Vasopressors/inotropes this day?
246	dobut_6	Num	8		IV Dobutamine Infusion Rate:
247	dobutu_6	Char	9	$9.	IV Dobutamine Infusion Rate Units
248	dopa_6	Num	8		IV Dopamine Infusion Rate:
249	dopau_6	Char	9	$9.	IV Dopamine Infusion Rate Units
250	norepi_6	Num	8		IV Norepinephrine Infusion Rate:
251	norepiu_6	Char	9	$9.	IV Norepinephrine Infusion Rate Units
252	epi_6	Num	8		IV Epinephrine Infusion Rate:
253	epiu_6	Char	9	$9.	ug/kg/min or ug/min
254	vasorate_6	Num	8		IV Vasopressin Infusion Rate (units/min):
255	neosyn_6	Num	8		IV Neosynephrine Infusion Rate:
256	neosynu_6	Char	9	$9.	IV Neosynephrine Infusion Rate Units
257	vasooth_6	Char	50	$50.	If Other Please Specify:
258	betablock_6	Num	8		Beta Blockers (IV, PO, PGT) this day?

Num	Variable	Type	Len	Format	Label
259	betablockc_6	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
260	hratex_6	Char	64	$64.	Heart Rate (beat/min): (Not Done)
261	sysbpx_6	Char	64	$64.	Systolic BP (mmHg): (Not Done)
262	diabpx_6	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
263	tempx_6	Char	64	$64.	Temperature (Celcius): (Not Done)
264	vasox_6	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
265	betablockx_6	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
266	cxrquads_7	Num	8		CXR: Number of quadrants with infiltrates
267	cort20_7	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
268	cort20c_7	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
269	ipatro_7	Num	8		Aerosolized or MDI delivered ipatropium?
270	ipatroc_7	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
271	ipadose_7	Num	8		Yes: Enter total number of doses this day:
272	nsbetag_7	Num	8		Non-study beta-agonist aerosol this day?
273	nsbetagc_7	Char	85	$85.	Non-study beta-agonist aerosol this day?
274	nsbetagdose_7	Num	8		Yes: Enter total dose in mg this day
275	nsbetagx_7	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
276	hrate_7	Num	8		Heart Rate (beat/min):
277	sysbp_7	Num	8		Systolic BP (mmHg):
278	diabp_7	Num	8		Diastolic BP (mmHg):
279	temp_7	Num	8		Temperature (Celcius):
280	cvp_7	Num	8		CVP (mmHg):
281	vaso_7	Num	8		Vasopressors/inotropes this day?
282	vasoc_7	Char	3	$3.	Vasopressors/inotropes this day?
283	dobut_7	Num	8		IV Dobutamine Infusion Rate:
284	dobutu_7	Char	9	$9.	IV Dobutamine Infusion Rate Units
285	dopa_7	Num	8		IV Dopamine Infusion Rate:
286	dopau_7	Char	9	$9.	IV Dopamine Infusion Rate Units
287	norepi_7	Num	8		IV Norepinephrine Infusion Rate:
288	norepiu_7	Char	9	$9.	IV Norepinephrine Infusion Rate Units
289	epi_7	Num	8		IV Epinephrine Infusion Rate:
290	epiu_7	Char	9	$9.	ug/kg/min or ug/min
291	vasorate_7	Num	8		IV Vasopressin Infusion Rate (units/min):
292	neosyn_7	Num	8		IV Neosynephrine Infusion Rate:
293	neosynu_7	Char	9	$9.	IV Neosynephrine Infusion Rate Units
294	vasooth_7	Char	50	$50.	If Other Please Specify:
295	betablock_7	Num	8		Beta Blockers (IV, PO, PGT) this day?

Num	Variable	Type	Len	Format	Label
296	betablockc_7	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
297	hratex_7	Char	64	$64.	Heart Rate (beat/min): (Not Done)
298	sysbpx_7	Char	64	$64.	Systolic BP (mmHg): (Not Done)
299	diabpx_7	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
300	tempx_7	Char	64	$64.	Temperature (Celcius): (Not Done)
301	vasox_7	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
302	betablockx_7	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
303	cxrquads_8	Num	8		CXR: Number of quadrants with infiltrates
304	cort20_8	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
305	cort20c_8	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
306	ipatro_8	Num	8		Aerosolized or MDI delivered ipatropium?
307	ipatroc_8	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
308	ipadose_8	Num	8		Yes: Enter total number of doses this day:
309	nsbetag_8	Num	8		Non-study beta-agonist aerosol this day?
310	nsbetagc_8	Char	85	$85.	Non-study beta-agonist aerosol this day?
311	nsbetagdose_8	Num	8		Yes: Enter total dose in mg this day
312	nsbetagx_8	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
313	hrate_8	Num	8		Heart Rate (beat/min):
314	sysbp_8	Num	8		Systolic BP (mmHg):
315	diabp_8	Num	8		Diastolic BP (mmHg):
316	temp_8	Num	8		Temperature (Celcius):
317	cvp_8	Num	8		CVP (mmHg):
318	vaso_8	Num	8		Vasopressors/inotropes this day?
319	vasoc_8	Char	3	$3.	Vasopressors/inotropes this day?
320	dobut_8	Num	8		IV Dobutamine Infusion Rate:
321	dobutu_8	Char	9	$9.	IV Dobutamine Infusion Rate Units
322	dopa_8	Num	8		IV Dopamine Infusion Rate:
323	dopau_8	Char	9	$9.	IV Dopamine Infusion Rate Units
324	norepi_8	Num	8		IV Norepinephrine Infusion Rate:
325	norepiu_8	Char	9	$9.	IV Norepinephrine Infusion Rate Units
326	epi_8	Num	8		IV Epinephrine Infusion Rate:
327	epiu_8	Char	9	$9.	ug/kg/min or ug/min
328	vasorate_8	Num	8		IV Vasopressin Infusion Rate (units/min):
329	neosyn_8	Num	8		IV Neosynephrine Infusion Rate:
330	neosynu_8	Char	9	$9.	IV Neosynephrine Infusion Rate Units
331	vasooth_8	Char	50	$50.	If Other Please Specify:
332	betablock_8	Num	8		Beta Blockers (IV, PO, PGT) this day?

Num	Variable	Type	Len	Format	Label
333	betablockc_8	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
334	hratex_8	Char	64	$64.	Heart Rate (beat/min): (Not Done)
335	sysbpx_8	Char	64	$64.	Systolic BP (mmHg): (Not Done)
336	diabpx_8	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
337	tempx_8	Char	64	$64.	Temperature (Celcius): (Not Done)
338	vasox_8	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
339	betablockx_8	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
340	cxrquads_9	Num	8		CXR: Number of quadrants with infiltrates
341	cort20_9	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
342	cort20c_9	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
343	ipatro_9	Num	8		Aerosolized or MDI delivered ipatropium?
344	ipatroc_9	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
345	ipadose_9	Num	8		Yes: Enter total number of doses this day:
346	nsbetag_9	Num	8		Non-study beta-agonist aerosol this day?
347	nsbetagc_9	Char	85	$85.	Non-study beta-agonist aerosol this day?
348	nsbetagdose_9	Num	8		Yes: Enter total dose in mg this day
349	nsbetagx_9	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
350	hrate_9	Num	8		Heart Rate (beat/min):
351	sysbp_9	Num	8		Systolic BP (mmHg):
352	diabp_9	Num	8		Diastolic BP (mmHg):
353	temp_9	Num	8		Temperature (Celcius):
354	cvp_9	Num	8		CVP (mmHg):
355	vaso_9	Num	8		Vasopressors/inotropes this day?
356	vasoc_9	Char	3	$3.	Vasopressors/inotropes this day?
357	dobut_9	Num	8		IV Dobutamine Infusion Rate:
358	dobutu_9	Char	9	$9.	IV Dobutamine Infusion Rate Units
359	dopa_9	Num	8		IV Dopamine Infusion Rate:
360	dopau_9	Char	9	$9.	IV Dopamine Infusion Rate Units
361	norepi_9	Num	8		IV Norepinephrine Infusion Rate:
362	norepiu_9	Char	9	$9.	IV Norepinephrine Infusion Rate Units
363	epi_9	Num	8		IV Epinephrine Infusion Rate:
364	epiu_9	Char	9	$9.	ug/kg/min or ug/min
365	vasorate_9	Num	8		IV Vasopressin Infusion Rate (units/min):
366	neosyn_9	Num	8		IV Neosynephrine Infusion Rate:
367	neosynu_9	Char	9	$9.	IV Neosynephrine Infusion Rate Units
368	vasooth_9	Char	50	$50.	If Other Please Specify:
369	betablock_9	Num	8		Beta Blockers (IV, PO, PGT) this day?

Num	Variable	Type	Len	Format	Label
370	betablockc_9	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
371	hratex_9	Char	64	$64.	Heart Rate (beat/min): (Not Done)
372	sysbpx_9	Char	64	$64.	Systolic BP (mmHg): (Not Done)
373	diabpx_9	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
374	tempx_9	Char	64	$64.	Temperature (Celcius): (Not Done)
375	vasox_9	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
376	betablockx_9	Char	64	$64.	Beta Blockers (IV, PO, PGT) this day? (Not Done)
377	cxrquads_10	Num	8		CXR: Number of quadrants with infiltrates
378	cort20_10	Num	8		IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
379	cort20c_10	Char	3	$3.	IV or PO corticosteroids totaling more than 20 mg methylprednisolone equivalents given this calendar date?
380	ipatro_10	Num	8		Aerosolized or MDI delivered ipatropium?
381	ipatroc_10	Char	50	$50.	Aerosolized or MDI delivered ipatropium?
382	ipadose_10	Num	8		Yes: Enter total number of doses this day:
383	nsbetag_10	Num	8		Non-study beta-agonist aerosol this day?
384	nsbetagc_10	Char	85	$85.	Non-study beta-agonist aerosol this day?
385	nsbetagdose_10	Num	8		Yes: Enter total dose in mg this day
386	nsbetagx_10	Char	64	$64.	Non-study beta-agonist aerosol this day? (Not Done)
387	hrate_10	Num	8		Heart Rate (beat/min):
388	sysbp_10	Num	8		Systolic BP (mmHg):
389	diabp_10	Num	8		Diastolic BP (mmHg):
390	temp_10	Num	8		Temperature (Celcius):
391	cvp_10	Num	8		CVP (mmHg):
392	vaso_10	Num	8		Vasopressors/inotropes this day?
393	vasoc_10	Char	3	$3.	Vasopressors/inotropes this day?
394	dobut_10	Num	8		IV Dobutamine Infusion Rate:
395	dobutu_10	Char	9	$9.	IV Dobutamine Infusion Rate Units
396	dopa_10	Num	8		IV Dopamine Infusion Rate:
397	dopau_10	Char	9	$9.	IV Dopamine Infusion Rate Units
398	norepi_10	Num	8		IV Norepinephrine Infusion Rate:
399	norepiu_10	Char	9	$9.	IV Norepinephrine Infusion Rate Units
400	epi_10	Num	8		IV Epinephrine Infusion Rate:
401	epiu_10	Char	9	$9.	ug/kg/min or ug/min
402	vasorate_10	Num	8		IV Vasopressin Infusion Rate (units/min):
403	neosyn_10	Num	8		IV Neosynephrine Infusion Rate:
404	neosynu_10	Char	9	$9.	IV Neosynephrine Infusion Rate Units
405	vasooth_10	Char	50	$50.	If Other Please Specify:
406	betablock_10	Num	8		Beta Blockers (IV, PO, PGT) this day?

Num	Variable	Type	Len	Format	Label
407	betablockc_10	Char	3	$3.	Beta Blockers (IV, PO, PGT) this day?
408	hratex_10	Char	64	$64.	Heart Rate (beat/min): (Not Done)
409	sysbpx_10	Char	64	$64.	Systolic BP (mmHg): (Not Done)
410	diabpx_10	Char	64	$64.	Diastolic BP (mmHg): (Not Done)
411	tempx_10	Char	64	$64.	Temperature (Celcius): (Not Done)
412	vasox_10	Char	64	$64.	Vasopressors/inotropes this day? (Not Done)
413	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	alta	Char	20		
5	omega	Char	20		
6	omegachar	Char	12		
7	eden	Char	20		
8	altapatient	Num	8		
9	omegapatient	Num	8		
10	edenpatient	Num	8		
11	proprate	Num	8		Propofol infusion rate at time of randomization
12	feedgrp	Num	8		Enteral Feeding Group
13	feedgrpc	Char	12	$12.	Enteral Feeding Group
14	prebasefeed	Num	8		In the 12 hours prior to enrollment, did patient receive any enteral feedings?
15	prebasefeedc	Char	72	$72.	In the 12 hours prior to enrollment, did patient receive any enteral feedings?
16	prebasevol	Num	8		Yes, enter total volume of enteral feeds in 12 hours prior to enrollment
17	feedinitdt	Num	8	BEST12.	Date and time of initiation of protocol specified enteral feeds (Day)
18	feedinittm	Num	8	TIME5.	Date and time of initiation of protocol specified enteral feeds (Time)
19	recfeed_0	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
20	recfeedc_0	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
21	goalrate_0	Num	8		Tube feeding goal rate
22	goalchange_0	Num	8		Did the goal rate change during the 24 hour period?
23	goalchangec_0	Char	19	$19.	Did the goal rate change during the 24 hour period?
24	newgoal_0	Num	8		New goal rate
25	brand1_0	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
26	brand1vol_0	Num	8		Total volume of enteral formula 1 infused for 24 hour period
27	brand2_0	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
28	brand2vol_0	Num	8		Total volume of enteral formula 2 infused for 24 hour period
29	feedhrs_0	Num	8		Number of hours enteral tube feeds on for this 24 hour period
30	feedoff_0	Num	8		Feeds turned off for > 30 minutes within 24 hour period
31	feedoffc_0	Char	61	$61.	Feeds turned off for > 30 minutes within 24 hour period
32	planext_0	Num	8		Planned Extubation
33	planextc_0	Char	18	$18.	Planned Extubation
34	giint_0	Num	8		GI Intolerance
35	giintc_0	Char	14	$14.	GI Intolerance
36	invbside_0	Num	8		Invasive bedside procedure

Num	Variable	Type	Len	Format	Label
37	invbsidec_0	Char	26	$26.	Invasive bedside procedure
38	surgery	Num	8		Surgery
39	surgeryc	Char	7	$7.	Surgery
40	leftfloor_0	Num	8		Patient left the floor
41	leftfloorc_0	Char	22	$22.	Patient left the floor
42	care_0	Num	8		Nursing Care(ie bathing, HOB down)
43	carec_0	Char	34	$34.	Nursing Care(ie bathing, HOB down)
44	medadm_0	Num	8		Medical Administration
45	medadmc_0	Char	22	$22.	Medical Administration
46	feedoffoth_0	Num	8		Other reason feed turned off:
47	feedoffothc_0	Char	5	$5.	Other reason feed turned off:
48	feedoffreas_0	Char	255	$255.	Other reason feed turned off: Reason
49	giintoleden_0	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
50	giintoledenc_0	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
51	diarrhea_0	Num	8		Diarrhea
52	diarrheac_0	Char	8	$8.	Diarrhea
53	vomiting_0	Num	8		Vomiting
54	vomitingc_0	Char	8	$8.	Vomiting
55	aspiration_0	Num	8		Aspiration
56	aspirationc_0	Char	10	$10.	Aspiration
57	elevresid	Num	8		Elevated Residuals
58	elevresidc	Char	18	$18.	Elevated Residuals
59	regurg_0	Num	8		Regurgitation
60	regurgc_0	Char	13	$13.	Regurgitation
61	constipation	Num	8		Constipation
62	constipationc	Char	12	$12.	Constipation
63	cramping	Num	8		Abdominal distention or cramping
64	crampingc	Char	32	$32.	Abdominal distention or cramping
65	feedsite_0	Num	8		Insertion site of feeding tube:
66	feedsitec_0	Char	12	$12.	Insertion site of feeding tube:
67	tubesize_0	Num	8		Feeding tube size
68	tubesizec_0	Char	10	$10.	Feeding tube size
69	distalpos_0	Num	8		Distal position of feeding tube
70	distalposc_0	Char	12	$12.	Distal position of feeding tube
71	distalconf_0	Num	8		Was distal position confirmed during this 24 hour period?
72	distalconfc_0	Char	19	$19.	Was distal position confirmed during this 24 hour period?
73	distalhow_0	Num	8		How distal position confirmed

Num	Variable	Type	Len	Format	Label
74	distalhowc_0	Char	15	$15.	How distal position confirmed
75	distaloth_0	Char	40	$40.	How distal position confirmed: other
76	fullcal_0	Num	8		Was rate advanced to full-calorie rate during this calendar day?
77	fullcalc_0	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
78	fullcaltm_0	Num	8	TIMEAMPM.	time full calorie reached
79	pronevent_0	Num	8		Prone ventilation between randomization and midnight?
80	proneventc_0	Char	3	$3.	Prone ventilation between randomization and midnight?
81	propratex	Char	64	$64.	Propofol infusion rate at time of randomization (Not Done)
82	feedgrpx	Char	64	$64.	Enteral Feeding Group (Not Done)
83	prebasefeedx	Char	64	$64.	In the 12 hours prior to enrollment, did patient receive any enteral feedings? (Not Done)
84	feedinitdtmx	Char	64	$64.	Date and time of initiation of protocol specified enteral feeds (Not Done)
85	recfeedx_0	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
86	goalratex_0	Char	64	$64.	Tube feeding goal rate (Not Done)
87	goalchangex_0	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
88	brand1x_0	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period (Not Done)
89	feedhrsx_0	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
90	feedoffX	Char	64	$64.	Feeds turned off for > 30 minutes within 24 hour period (Not Done)
91	giintoledenx_0	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
92	feedsiteX	Char	64	$64.	Insertion site of feeding tube: (Not Done)
93	tubesizeX	Char	64	$64.	Feeding tube size (Not Done)
94	distalposX	Char	64	$64.	Distal position of feeding tube (Not Done)
95	distalconfx_0	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
96	fullcalx_0	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
97	surg_1	Num	8		Surgery
98	surgc_1	Char	7	$7.	Surgery
99	residual_1	Num	8		Elevated Residuals
100	residualc_1	Char	18	$18.	Elevated Residuals
101	const_1	Num	8		Constipation
102	constc_1	Char	12	$12.	Constipation
103	cramp_1	Num	8		Abdominal distention or cramping
104	crampc_1	Char	32	$32.	Abdominal distention or cramping
105	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)
106	feedsitex_1	Char	64	$64.	Insertion site of feeding tube (Not Done)
107	tubesizex_1	Char	64	$64.	Feeding tube size (Not Done)
108	distalposx_1	Char	64	$64.	Distal position of feeding tube (Not Done)
109	proneventx_1	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)

Num	Variable	Type	Len	Format	Label
110	recfeed_1	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
111	recfeedc_1	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
112	goalrate_1	Num	8		Tube feeding goal rate
113	goalchange_1	Num	8		Did the goal rate change during the 24 hour period?
114	goalchangec_1	Char	19	$19.	Did the goal rate change during the 24 hour period?
115	newgoal_1	Num	8		Yes, new goal rate
116	brand1_1	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
117	brand1vol_1	Num	8		Total volume of enteral formula 1 infused for 24 hour period
118	brand2_1	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
119	brand2vol_1	Num	8		Total volume of enteral formula 2 infused for 24 hour period
120	feedhrs_1	Num	8		Number of hours enteral tube feeds on for this 24 hour period
121	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?
122	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?
123	planext_1	Num	8		Planned Extubation
124	planextc_1	Char	18	$18.	Planned Extubation
125	giint_1	Num	8		GI Intolerance
126	giintc_1	Char	14	$14.	GI Intolerance
127	invbside_1	Num	8		Invasive bedside procedure
128	invbsidec_1	Char	26	$26.	Invasive bedside procedure
129	leftfloor_1	Num	8		Patient left the floor
130	leftfloorc_1	Char	22	$22.	Patient left the floor
131	care_1	Num	8		Nursing Care (i.e. bathing, HOB down)
132	carec_1	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
133	medadm_1	Num	8		Medical Administration
134	medadmc_1	Char	22	$22.	Medical Administration
135	feedoffoth_1	Num	8		Other reason feed turned off:
136	feedoffothc_1	Char	5	$5.	Other reason feed turned off:
137	feedoffreas_1	Char	255	$255.	Other reason feed turned off: Reason
138	giintoleden_1	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
139	giintoledenc_1	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
140	diarrhea_1	Num	8		Diarrhea
141	diarrheac_1	Char	8	$8.	Diarrhea
142	vomiting_1	Num	8		Vomiting
143	vomitingc_1	Char	8	$8.	Vomiting
144	aspiration_1	Num	8		Aspiration
145	aspirationc_1	Char	10	$10.	Aspiration

Num	Variable	Type	Len	Format	Label
146	regurg_1	Num	8		Regurgitation
147	regurgc_1	Char	13	$13.	Regurgitation
148	feedsite_1	Num	8		Insertion site of feeding tube
149	feedsitec_1	Char	12	$12.	Insertion site of feeding tube
150	tubesize_1	Num	8		Feeding tube size
151	tubesizec_1	Char	10	$10.	Feeding tube size
152	distalpos_1	Num	8		Distal position of feeding tube
153	distalposc_1	Char	12	$12.	Distal position of feeding tube
154	distalconf_1	Num	8		Was distal position confirmed during this 24 hour period?
155	distalconfc_1	Char	19	$19.	Was distal position confirmed during this 24 hour period?
156	distalhow_1	Num	8		Yes, how confirmed:
157	distalhowc_1	Char	15	$15.	Yes, how confirmed:
158	distaloth_1	Char	40	$40.	Yes, how confirmed: Other
159	fullcal_1	Num	8		Was rate advanced to full-calorie rate during this calendar day?
160	fullcalc_1	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
161	fullcaltm_1	Num	8	TIMEAMPM.	Yes, time full calorie reached:
162	pronevent_1	Num	8		Prone ventilation this 24 hour period?
163	proneventc_1	Char	3	$3.	Prone ventilation this 24 hour period?
164	recfeedx_1	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
165	goalratex_1	Char	64	$64.	Tube feeding goal rate (Not Done)
166	goalchangex_1	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
167	brand1x_1	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
168	feedhrsx_1	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
169	giintoledenx_1	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
170	distalconfx_1	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
171	fullcalx_1	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
172	surg_2	Num	8		Surgery
173	surgc_2	Char	7	$7.	Surgery
174	residual_2	Num	8		Elevated Residuals
175	residualc_2	Char	18	$18.	Elevated Residuals
176	const_2	Num	8		Constipation
177	constc_2	Char	12	$12.	Constipation
178	cramp_2	Num	8		Abdominal distention or cramping
179	crampc_2	Char	32	$32.	Abdominal distention or cramping
180	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)
181	feedsitex_2	Char	64	$64.	Insertion site of feeding tube (Not Done)
182	tubesizex_2	Char	64	$64.	Feeding tube size (Not Done)

Num	Variable	Type	Len	Format	Label
183	distalposx_2	Char	64	$64.	Distal position of feeding tube (Not Done)
184	proneventx_2	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
185	recfeed_2	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
186	recfeedc_2	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
187	goalrate_2	Num	8		Tube feeding goal rate
188	goalchange_2	Num	8		Did the goal rate change during the 24 hour period?
189	goalchangec_2	Char	19	$19.	Did the goal rate change during the 24 hour period?
190	newgoal_2	Num	8		Yes, new goal rate
191	brand1_2	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
192	brand1vol_2	Num	8		Total volume of enteral formula 1 infused for 24 hour period
193	brand2_2	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
194	brand2vol_2	Num	8		Total volume of enteral formula 2 infused for 24 hour period
195	feedhrs_2	Num	8		Number of hours enteral tube feeds on for this 24 hour period
196	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?
197	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?
198	planext_2	Num	8		Planned Extubation
199	planextc_2	Char	18	$18.	Planned Extubation
200	giint_2	Num	8		GI Intolerance
201	giintc_2	Char	14	$14.	GI Intolerance
202	invbside_2	Num	8		Invasive bedside procedure
203	invbsidec_2	Char	26	$26.	Invasive bedside procedure
204	leftfloor_2	Num	8		Patient left the floor
205	leftfloorc_2	Char	22	$22.	Patient left the floor
206	care_2	Num	8		Nursing Care (i.e. bathing, HOB down)
207	carec_2	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
208	medadm_2	Num	8		Medical Administration
209	medadmc_2	Char	22	$22.	Medical Administration
210	feedoffoth_2	Num	8		Other reason feed turned off:
211	feedoffothc_2	Char	5	$5.	Other reason feed turned off:
212	feedoffreas_2	Char	255	$255.	Other reason feed turned off: Reason
213	giintoleden_2	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
214	giintoledenc_2	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
215	diarrhea_2	Num	8		Diarrhea
216	diarrheac_2	Char	8	$8.	Diarrhea
217	vomiting_2	Num	8		Vomiting
218	vomitingc_2	Char	8	$8.	Vomiting

Num	Variable	Type	Len	Format	Label
219	aspiration_2	Num	8		Aspiration
220	aspirationc_2	Char	10	$10.	Aspiration
221	regurg_2	Num	8		Regurgitation
222	regurgc_2	Char	13	$13.	Regurgitation
223	feedsite_2	Num	8		Insertion site of feeding tube
224	feedsitec_2	Char	12	$12.	Insertion site of feeding tube
225	tubesize_2	Num	8		Feeding tube size
226	tubesizec_2	Char	10	$10.	Feeding tube size
227	distalpos_2	Num	8		Distal position of feeding tube
228	distalposc_2	Char	12	$12.	Distal position of feeding tube
229	distalconf_2	Num	8		Was distal position confirmed during this 24 hour period?
230	distalconfc_2	Char	19	$19.	Was distal position confirmed during this 24 hour period?
231	distalhow_2	Num	8		Yes, how confirmed:
232	distalhowc_2	Char	15	$15.	Yes, how confirmed:
233	distaloth_2	Char	40	$40.	Yes, how confirmed: Other
234	fullcal_2	Num	8		Was rate advanced to full-calorie rate during this calendar day?
235	fullcalc_2	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
236	fullcaltm_2	Num	8	TIMEAMPM.	Yes, time full calorie reached:
237	pronevent_2	Num	8		Prone ventilation this 24 hour period?
238	proneventc_2	Char	3	$3.	Prone ventilation this 24 hour period?
239	recfeedx_2	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
240	goalratex_2	Char	64	$64.	Tube feeding goal rate (Not Done)
241	goalchangex_2	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
242	brand1x_2	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
243	feedhrsx_2	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
244	giintoledenx_2	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
245	distalconfx_2	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
246	fullcalx_2	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
247	surg_3	Num	8		Surgery
248	surgc_3	Char	7	$7.	Surgery
249	residual_3	Num	8		Elevated Residuals
250	residualc_3	Char	18	$18.	Elevated Residuals
251	const_3	Num	8		Constipation
252	constc_3	Char	12	$12.	Constipation
253	cramp_3	Num	8		Abdominal distention or cramping
254	crampc_3	Char	32	$32.	Abdominal distention or cramping
255	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)

Num	Variable	Type	Len	Format	Label
256	feedsitex_3	Char	64	$64.	Insertion site of feeding tube (Not Done)
257	tubesizex_3	Char	64	$64.	Feeding tube size (Not Done)
258	distalposx_3	Char	64	$64.	Distal position of feeding tube (Not Done)
259	proneventx_3	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
260	recfeed_3	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
261	recfeedc_3	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
262	goalrate_3	Num	8		Tube feeding goal rate
263	goalchange_3	Num	8		Did the goal rate change during the 24 hour period?
264	goalchangec_3	Char	19	$19.	Did the goal rate change during the 24 hour period?
265	newgoal_3	Num	8		Yes, new goal rate
266	brand1_3	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
267	brand1vol_3	Num	8		Total volume of enteral formula 1 infused for 24 hour period
268	brand2_3	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
269	brand2vol_3	Num	8		Total volume of enteral formula 2 infused for 24 hour period
270	feedhrs_3	Num	8		Number of hours enteral tube feeds on for this 24 hour period
271	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?
272	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?
273	planext_3	Num	8		Planned Extubation
274	planextc_3	Char	18	$18.	Planned Extubation
275	giint_3	Num	8		GI Intolerance
276	giintc_3	Char	14	$14.	GI Intolerance
277	invbside_3	Num	8		Invasive bedside procedure
278	invbsidec_3	Char	26	$26.	Invasive bedside procedure
279	leftfloor_3	Num	8		Patient left the floor
280	leftfloorc_3	Char	22	$22.	Patient left the floor
281	care_3	Num	8		Nursing Care (i.e. bathing, HOB down)
282	carec_3	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
283	medadm_3	Num	8		Medical Administration
284	medadmc_3	Char	22	$22.	Medical Administration
285	feedoffoth_3	Num	8		Other reason feed turned off:
286	feedoffothc_3	Char	5	$5.	Other reason feed turned off:
287	feedoffreas_3	Char	255	$255.	Other reason feed turned off: Reason
288	giintoleden_3	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
289	giintoledenc_3	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
290	diarrhea_3	Num	8		Diarrhea
291	diarrheac_3	Char	8	$8.	Diarrhea

Num	Variable	Type	Len	Format	Label
292	vomiting_3	Num	8		Vomiting
293	vomitingc_3	Char	8	$8.	Vomiting
294	aspiration_3	Num	8		Aspiration
295	aspirationc_3	Char	10	$10.	Aspiration
296	regurg_3	Num	8		Regurgitation
297	regurgc_3	Char	13	$13.	Regurgitation
298	feedsite_3	Num	8		Insertion site of feeding tube
299	feedsitec_3	Char	12	$12.	Insertion site of feeding tube
300	tubesize_3	Num	8		Feeding tube size
301	tubesizec_3	Char	10	$10.	Feeding tube size
302	distalpos_3	Num	8		Distal position of feeding tube
303	distalposc_3	Char	12	$12.	Distal position of feeding tube
304	distalconf_3	Num	8		Was distal position confirmed during this 24 hour period?
305	distalconfc_3	Char	19	$19.	Was distal position confirmed during this 24 hour period?
306	distalhow_3	Num	8		Yes, how confirmed:
307	distalhowc_3	Char	15	$15.	Yes, how confirmed:
308	distaloth_3	Char	40	$40.	Yes, how confirmed: Other
309	fullcal_3	Num	8		Was rate advanced to full-calorie rate during this calendar day?
310	fullcalc_3	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
311	fullcaltm_3	Num	8	TIMEAMPM.	Yes, time full calorie reached:
312	pronevent_3	Num	8		Prone ventilation this 24 hour period?
313	proneventc_3	Char	3	$3.	Prone ventilation this 24 hour period?
314	recfeedx_3	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
315	goalratex_3	Char	64	$64.	Tube feeding goal rate (Not Done)
316	goalchangex_3	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
317	brand1x_3	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
318	feedhrsx_3	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
319	giintoledenx_3	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
320	distalconfx_3	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
321	fullcalx_3	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
322	surg_4	Num	8		Surgery
323	surgc_4	Char	7	$7.	Surgery
324	residual_4	Num	8		Elevated Residuals
325	residualc_4	Char	18	$18.	Elevated Residuals
326	const_4	Num	8		Constipation
327	constc_4	Char	12	$12.	Constipation
328	cramp_4	Num	8		Abdominal distention or cramping

Num	Variable	Type	Len	Format	Label
329	crampc_4	Char	32	$32.	Abdominal distention or cramping
330	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)
331	feedsitex_4	Char	64	$64.	Insertion site of feeding tube (Not Done)
332	tubesizex_4	Char	64	$64.	Feeding tube size (Not Done)
333	distalposx_4	Char	64	$64.	Distal position of feeding tube (Not Done)
334	proneventx_4	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
335	recfeed_4	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
336	recfeedc_4	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
337	goalrate_4	Num	8		Tube feeding goal rate
338	goalchange_4	Num	8		Did the goal rate change during the 24 hour period?
339	goalchangec_4	Char	19	$19.	Did the goal rate change during the 24 hour period?
340	newgoal_4	Num	8		Yes, new goal rate
341	brand1_4	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
342	brand1vol_4	Num	8		Total volume of enteral formula 1 infused for 24 hour period
343	brand2_4	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
344	brand2vol_4	Num	8		Total volume of enteral formula 2 infused for 24 hour period
345	feedhrs_4	Num	8		Number of hours enteral tube feeds on for this 24 hour period
346	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?
347	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?
348	planext_4	Num	8		Planned Extubation
349	planextc_4	Char	18	$18.	Planned Extubation
350	giint_4	Num	8		GI Intolerance
351	giintc_4	Char	14	$14.	GI Intolerance
352	invbside_4	Num	8		Invasive bedside procedure
353	invbsidec_4	Char	26	$26.	Invasive bedside procedure
354	leftfloor_4	Num	8		Patient left the floor
355	leftfloorc_4	Char	22	$22.	Patient left the floor
356	care_4	Num	8		Nursing Care (i.e. bathing, HOB down)
357	carec_4	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
358	medadm_4	Num	8		Medical Administration
359	medadmc_4	Char	22	$22.	Medical Administration
360	feedoffoth_4	Num	8		Other reason feed turned off:
361	feedoffothc_4	Char	5	$5.	Other reason feed turned off:
362	feedoffreas_4	Char	255	$255.	Other reason feed turned off: Reason
363	giintoleden_4	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
364	giintoledenc_4	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
365	diarrhea_4	Num	8		Diarrhea
366	diarrheac_4	Char	8	$8.	Diarrhea
367	vomiting_4	Num	8		Vomiting
368	vomitingc_4	Char	8	$8.	Vomiting
369	aspiration_4	Num	8		Aspiration
370	aspirationc_4	Char	10	$10.	Aspiration
371	regurg_4	Num	8		Regurgitation
372	regurgc_4	Char	13	$13.	Regurgitation
373	feedsite_4	Num	8		Insertion site of feeding tube
374	feedsitec_4	Char	12	$12.	Insertion site of feeding tube
375	tubesize_4	Num	8		Feeding tube size
376	tubesizec_4	Char	10	$10.	Feeding tube size
377	distalpos_4	Num	8		Distal position of feeding tube
378	distalposc_4	Char	12	$12.	Distal position of feeding tube
379	distalconf_4	Num	8		Was distal position confirmed during this 24 hour period?
380	distalconfc_4	Char	19	$19.	Was distal position confirmed during this 24 hour period?
381	distalhow_4	Num	8		Yes, how confirmed:
382	distalhowc_4	Char	15	$15.	Yes, how confirmed:
383	distaloth_4	Char	40	$40.	Yes, how confirmed: Other
384	fullcal_4	Num	8		Was rate advanced to full-calorie rate during this calendar day?
385	fullcalc_4	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
386	fullcaltm_4	Num	8	TIMEAMPM.	Yes, time full calorie reached:
387	pronevent_4	Num	8		Prone ventilation this 24 hour period?
388	proneventc_4	Char	3	$3.	Prone ventilation this 24 hour period?
389	recfeedx_4	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
390	goalratex_4	Char	64	$64.	Tube feeding goal rate (Not Done)
391	goalchangex_4	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
392	brand1x_4	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
393	feedhrsx_4	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
394	giintoledenx_4	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
395	distalconfx_4	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
396	fullcalx_4	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
397	surg_5	Num	8		Surgery
398	surgc_5	Char	7	$7.	Surgery
399	residual_5	Num	8		Elevated Residuals
400	residualc_5	Char	18	$18.	Elevated Residuals

Num	Variable	Type	Len	Format	Label
401	const_5	Num	8		Constipation
402	constc_5	Char	12	$12.	Constipation
403	cramp_5	Num	8		Abdominal distention or cramping
404	crampc_5	Char	32	$32.	Abdominal distention or cramping
405	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)
406	feedsitex_5	Char	64	$64.	Insertion site of feeding tube (Not Done)
407	tubesizex_5	Char	64	$64.	Feeding tube size (Not Done)
408	distalposx_5	Char	64	$64.	Distal position of feeding tube (Not Done)
409	proneventx_5	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
410	recfeed_5	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
411	recfeedc_5	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
412	goalrate_5	Num	8		Tube feeding goal rate
413	goalchange_5	Num	8		Did the goal rate change during the 24 hour period?
414	goalchangec_5	Char	19	$19.	Did the goal rate change during the 24 hour period?
415	newgoal_5	Num	8		Yes, new goal rate
416	brand1_5	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
417	brand1vol_5	Num	8		Total volume of enteral formula 1 infused for 24 hour period
418	brand2_5	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
419	brand2vol_5	Num	8		Total volume of enteral formula 2 infused for 24 hour period
420	feedhrs_5	Num	8		Number of hours enteral tube feeds on for this 24 hour period
421	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?
422	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?
423	planext_5	Num	8		Planned Extubation
424	planextc_5	Char	18	$18.	Planned Extubation
425	giint_5	Num	8		GI Intolerance
426	giintc_5	Char	14	$14.	GI Intolerance
427	invbside_5	Num	8		Invasive bedside procedure
428	invbsidec_5	Char	26	$26.	Invasive bedside procedure
429	leftfloor_5	Num	8		Patient left the floor
430	leftfloorc_5	Char	22	$22.	Patient left the floor
431	care_5	Num	8		Nursing Care (i.e. bathing, HOB down)
432	carec_5	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
433	medadm_5	Num	8		Medical Administration
434	medadmc_5	Char	22	$22.	Medical Administration
435	feedoffoth_5	Num	8		Other reason feed turned off:
436	feedoffothc_5	Char	5	$5.	Other reason feed turned off:
437	feedoffreas_5	Char	255	$255.	Other reason feed turned off: Reason

Num	Variable	Type	Len	Format	Label
438	giintoleden_5	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
439	giintoledenc_5	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
440	diarrhea_5	Num	8		Diarrhea
441	diarrheac_5	Char	8	$8.	Diarrhea
442	vomiting_5	Num	8		Vomiting
443	vomitingc_5	Char	8	$8.	Vomiting
444	aspiration_5	Num	8		Aspiration
445	aspirationc_5	Char	10	$10.	Aspiration
446	regurg_5	Num	8		Regurgitation
447	regurgc_5	Char	13	$13.	Regurgitation
448	feedsite_5	Num	8		Insertion site of feeding tube
449	feedsitec_5	Char	12	$12.	Insertion site of feeding tube
450	tubesize_5	Num	8		Feeding tube size
451	tubesizec_5	Char	10	$10.	Feeding tube size
452	distalpos_5	Num	8		Distal position of feeding tube
453	distalposc_5	Char	12	$12.	Distal position of feeding tube
454	distalconf_5	Num	8		Was distal position confirmed during this 24 hour period?
455	distalconfc_5	Char	19	$19.	Was distal position confirmed during this 24 hour period?
456	distalhow_5	Num	8		Yes, how confirmed:
457	distalhowc_5	Char	15	$15.	Yes, how confirmed:
458	distaloth_5	Char	40	$40.	Yes, how confirmed: Other
459	fullcal_5	Num	8		Was rate advanced to full-calorie rate during this calendar day?
460	fullcalc_5	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
461	fullcaltm_5	Num	8	TIMEAMPM.	Yes, time full calorie reached:
462	pronevent_5	Num	8		Prone ventilation this 24 hour period?
463	proneventc_5	Char	3	$3.	Prone ventilation this 24 hour period?
464	recfeedx_5	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
465	goalratex_5	Char	64	$64.	Tube feeding goal rate (Not Done)
466	goalchangex_5	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
467	brand1x_5	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
468	feedhrsx_5	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
469	giintoledenx_5	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
470	distalconfx_5	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
471	fullcalx_5	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
472	surg_6	Num	8		Surgery
473	surgc_6	Char	7	$7.	Surgery

Num	Variable	Type	Len	Format	Label
474	residual_6	Num	8		Elevated Residuals
475	residualc_6	Char	18	$18.	Elevated Residuals
476	const_6	Num	8		Constipation
477	constc_6	Char	12	$12.	Constipation
478	cramp_6	Num	8		Abdominal distention or cramping
479	crampc_6	Char	32	$32.	Abdominal distention or cramping
480	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)
481	feedsitex_6	Char	64	$64.	Insertion site of feeding tube (Not Done)
482	tubesizex_6	Char	64	$64.	Feeding tube size (Not Done)
483	distalposx_6	Char	64	$64.	Distal position of feeding tube (Not Done)
484	proneventx_6	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
485	recfeed_6	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
486	recfeedc_6	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
487	goalrate_6	Num	8		Tube feeding goal rate
488	goalchange_6	Num	8		Did the goal rate change during the 24 hour period?
489	goalchangec_6	Char	19	$19.	Did the goal rate change during the 24 hour period?
490	newgoal_6	Num	8		Yes, new goal rate
491	brand1_6	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
492	brand1vol_6	Num	8		Total volume of enteral formula 1 infused for 24 hour period
493	brand2_6	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
494	brand2vol_6	Num	8		Total volume of enteral formula 2 infused for 24 hour period
495	feedhrs_6	Num	8		Number of hours enteral tube feeds on for this 24 hour period
496	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?
497	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?
498	planext_6	Num	8		Planned Extubation
499	planextc_6	Char	18	$18.	Planned Extubation
500	giint_6	Num	8		GI Intolerance
501	giintc_6	Char	14	$14.	GI Intolerance
502	invbside_6	Num	8		Invasive bedside procedure
503	invbsidec_6	Char	26	$26.	Invasive bedside procedure
504	leftfloor_6	Num	8		Patient left the floor
505	leftfloorc_6	Char	22	$22.	Patient left the floor
506	care_6	Num	8		Nursing Care (i.e. bathing, HOB down)
507	carec_6	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
508	medadm_6	Num	8		Medical Administration
509	medadmc_6	Char	22	$22.	Medical Administration
510	feedoffoth_6	Num	8		Other reason feed turned off:

Num	Variable	Type	Len	Format	Label
511	feedoffothc_6	Char	5	$5.	Other reason feed turned off:
512	feedoffreas_6	Char	255	$255.	Other reason feed turned off: Reason
513	giintoleden_6	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
514	giintoledenc_6	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
515	diarrhea_6	Num	8		Diarrhea
516	diarrheac_6	Char	8	$8.	Diarrhea
517	vomiting_6	Num	8		Vomiting
518	vomitingc_6	Char	8	$8.	Vomiting
519	aspiration_6	Num	8		Aspiration
520	aspirationc_6	Char	10	$10.	Aspiration
521	regurg_6	Num	8		Regurgitation
522	regurgc_6	Char	13	$13.	Regurgitation
523	feedsite_6	Num	8		Insertion site of feeding tube
524	feedsitec_6	Char	12	$12.	Insertion site of feeding tube
525	tubesize_6	Num	8		Feeding tube size
526	tubesizec_6	Char	10	$10.	Feeding tube size
527	distalpos_6	Num	8		Distal position of feeding tube
528	distalposc_6	Char	12	$12.	Distal position of feeding tube
529	distalconf_6	Num	8		Was distal position confirmed during this 24 hour period?
530	distalconfc_6	Char	19	$19.	Was distal position confirmed during this 24 hour period?
531	distalhow_6	Num	8		Yes, how confirmed:
532	distalhowc_6	Char	15	$15.	Yes, how confirmed:
533	distaloth_6	Char	40	$40.	Yes, how confirmed: Other
534	fullcal_6	Num	8		Was rate advanced to full-calorie rate during this calendar day?
535	fullcalc_6	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
536	fullcaltm_6	Num	8	TIMEAMPM.	Yes, time full calorie reached:
537	pronevent_6	Num	8		Prone ventilation this 24 hour period?
538	proneventc_6	Char	3	$3.	Prone ventilation this 24 hour period?
539	recfeedx_6	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
540	goalratex_6	Char	64	$64.	Tube feeding goal rate (Not Done)
541	goalchangex_6	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
542	brand1x_6	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
543	feedhrsx_6	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
544	giintoledenx_6	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
545	distalconfx_6	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
546	fullcalx_6	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)

Num	Variable	Type	Len	Format	Label
547	surg_7	Num	8		Surgery
548	surgc_7	Char	7	$7.	Surgery
549	residual_7	Num	8		Elevated Residuals
550	residualc_7	Char	18	$18.	Elevated Residuals
551	const_7	Num	8		Constipation
552	constc_7	Char	12	$12.	Constipation
553	cramp_7	Num	8		Abdominal distention or cramping
554	crampc_7	Char	32	$32.	Abdominal distention or cramping
555	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)
556	feedsitex_7	Char	64	$64.	Insertion site of feeding tube (Not Done)
557	tubesizex_7	Char	64	$64.	Feeding tube size (Not Done)
558	distalposx_7	Char	64	$64.	Distal position of feeding tube (Not Done)
559	proneventx_7	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
560	recfeed_7	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
561	recfeedc_7	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
562	goalrate_7	Num	8		Tube feeding goal rate
563	goalchange_7	Num	8		Did the goal rate change during the 24 hour period?
564	goalchangec_7	Char	19	$19.	Did the goal rate change during the 24 hour period?
565	newgoal_7	Num	8		Yes, new goal rate
566	brand1_7	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
567	brand1vol_7	Num	8		Total volume of enteral formula 1 infused for 24 hour period
568	brand2_7	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
569	brand2vol_7	Num	8		Total volume of enteral formula 2 infused for 24 hour period
570	feedhrs_7	Num	8		Number of hours enteral tube feeds on for this 24 hour period
571	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?
572	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?
573	planext_7	Num	8		Planned Extubation
574	planextc_7	Char	18	$18.	Planned Extubation
575	giint_7	Num	8		GI Intolerance
576	giintc_7	Char	14	$14.	GI Intolerance
577	invbside_7	Num	8		Invasive bedside procedure
578	invbsidec_7	Char	26	$26.	Invasive bedside procedure
579	leftfloor_7	Num	8		Patient left the floor
580	leftfloorc_7	Char	22	$22.	Patient left the floor
581	care_7	Num	8		Nursing Care (i.e. bathing, HOB down)
582	carec_7	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
583	medadm_7	Num	8		Medical Administration

Num	Variable	Type	Len	Format	Label
584	medadmc_7	Char	22	$22.	Medical Administration
585	feedoffoth_7	Num	8		Other reason feed turned off:
586	feedoffothc_7	Char	5	$5.	Other reason feed turned off:
587	feedoffreas_7	Char	255	$255.	Other reason feed turned off: Reason
588	giintoleden_7	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
589	giintoledenc_7	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
590	diarrhea_7	Num	8		Diarrhea
591	diarrheac_7	Char	8	$8.	Diarrhea
592	vomiting_7	Num	8		Vomiting
593	vomitingc_7	Char	8	$8.	Vomiting
594	aspiration_7	Num	8		Aspiration
595	aspirationc_7	Char	10	$10.	Aspiration
596	regurg_7	Num	8		Regurgitation
597	regurgc_7	Char	13	$13.	Regurgitation
598	feedsite_7	Num	8		Insertion site of feeding tube
599	feedsitec_7	Char	12	$12.	Insertion site of feeding tube
600	tubesize_7	Num	8		Feeding tube size
601	tubesizec_7	Char	10	$10.	Feeding tube size
602	distalpos_7	Num	8		Distal position of feeding tube
603	distalposc_7	Char	12	$12.	Distal position of feeding tube
604	distalconf_7	Num	8		Was distal position confirmed during this 24 hour period?
605	distalconfc_7	Char	19	$19.	Was distal position confirmed during this 24 hour period?
606	distalhow_7	Num	8		Yes, how confirmed:
607	distalhowc_7	Char	15	$15.	Yes, how confirmed:
608	distaloth_7	Char	40	$40.	Yes, how confirmed: Other
609	fullcal_7	Num	8		Was rate advanced to full-calorie rate during this calendar day?
610	fullcalc_7	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
611	fullcaltm_7	Num	8	TIMEAMPM.	Yes, time full calorie reached:
612	pronevent_7	Num	8		Prone ventilation this 24 hour period?
613	proneventc_7	Char	3	$3.	Prone ventilation this 24 hour period?
614	recfeedx_7	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
615	goalratex_7	Char	64	$64.	Tube feeding goal rate (Not Done)
616	goalchangex_7	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
617	brand1x_7	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
618	feedhrsx_7	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
619	giintoledenx_7	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)

Num	Variable	Type	Len	Format	Label
620	distalconfx_7	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
621	fullcalx_7	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
622	surg_8	Num	8		Surgery
623	surgc_8	Char	7	$7.	Surgery
624	residual_8	Num	8		Elevated Residuals
625	residualc_8	Char	18	$18.	Elevated Residuals
626	const_8	Num	8		Constipation
627	constc_8	Char	12	$12.	Constipation
628	cramp_8	Num	8		Abdominal distention or cramping
629	crampc_8	Char	32	$32.	Abdominal distention or cramping
630	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)
631	feedsitex_8	Char	64	$64.	Insertion site of feeding tube (Not Done)
632	tubesizex_8	Char	64	$64.	Feeding tube size (Not Done)
633	distalposx_8	Char	64	$64.	Distal position of feeding tube (Not Done)
634	proneventx_8	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
635	recfeed_8	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
636	recfeedc_8	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
637	goalrate_8	Num	8		Tube feeding goal rate
638	goalchange_8	Num	8		Did the goal rate change during the 24 hour period?
639	goalchangec_8	Char	19	$19.	Did the goal rate change during the 24 hour period?
640	newgoal_8	Num	8		Yes, new goal rate
641	brand1_8	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
642	brand1vol_8	Num	8		Total volume of enteral formula 1 infused for 24 hour period
643	brand2_8	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
644	brand2vol_8	Num	8		Total volume of enteral formula 2 infused for 24 hour period
645	feedhrs_8	Num	8		Number of hours enteral tube feeds on for this 24 hour period
646	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?
647	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?
648	planext_8	Num	8		Planned Extubation
649	planextc_8	Char	18	$18.	Planned Extubation
650	giint_8	Num	8		GI Intolerance
651	giintc_8	Char	14	$14.	GI Intolerance
652	invbside_8	Num	8		Invasive bedside procedure
653	invbsidec_8	Char	26	$26.	Invasive bedside procedure
654	leftfloor_8	Num	8		Patient left the floor
655	leftfloorc_8	Char	22	$22.	Patient left the floor
656	care_8	Num	8		Nursing Care (i.e. bathing, HOB down)

Num	Variable	Type	Len	Format	Label
657	carec_8	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
658	medadm_8	Num	8		Medical Administration
659	medadmc_8	Char	22	$22.	Medical Administration
660	feedoffoth_8	Num	8		Other reason feed turned off:
661	feedoffothc_8	Char	5	$5.	Other reason feed turned off:
662	feedoffreas_8	Char	255	$255.	Other reason feed turned off: Reason
663	giintoleden_8	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
664	giintoledenc_8	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
665	diarrhea_8	Num	8		Diarrhea
666	diarrheac_8	Char	8	$8.	Diarrhea
667	vomiting_8	Num	8		Vomiting
668	vomitingc_8	Char	8	$8.	Vomiting
669	aspiration_8	Num	8		Aspiration
670	aspirationc_8	Char	10	$10.	Aspiration
671	regurg_8	Num	8		Regurgitation
672	regurgc_8	Char	13	$13.	Regurgitation
673	feedsite_8	Num	8		Insertion site of feeding tube
674	feedsitec_8	Char	12	$12.	Insertion site of feeding tube
675	tubesize_8	Num	8		Feeding tube size
676	tubesizec_8	Char	10	$10.	Feeding tube size
677	distalpos_8	Num	8		Distal position of feeding tube
678	distalposc_8	Char	12	$12.	Distal position of feeding tube
679	distalconf_8	Num	8		Was distal position confirmed during this 24 hour period?
680	distalconfc_8	Char	19	$19.	Was distal position confirmed during this 24 hour period?
681	distalhow_8	Num	8		Yes, how confirmed:
682	distalhowc_8	Char	15	$15.	Yes, how confirmed:
683	distaloth_8	Char	40	$40.	Yes, how confirmed: Other
684	fullcal_8	Num	8		Was rate advanced to full-calorie rate during this calendar day?
685	fullcalc_8	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
686	fullcaltm_8	Num	8	TIMEAMPM.	Yes, time full calorie reached:
687	pronevent_8	Num	8		Prone ventilation this 24 hour period?
688	proneventc_8	Char	3	$3.	Prone ventilation this 24 hour period?
689	recfeedx_8	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
690	goalratex_8	Char	64	$64.	Tube feeding goal rate (Not Done)
691	goalchangex_8	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
692	brand1x_8	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
693	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
694	giintoledenx_8	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
695	distalconfx_8	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
696	fullcalx_8	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
697	surg_9	Num	8		Surgery
698	surgc_9	Char	7	$7.	Surgery
699	residual_9	Num	8		Elevated Residuals
700	residualc_9	Char	18	$18.	Elevated Residuals
701	const_9	Num	8		Constipation
702	constc_9	Char	12	$12.	Constipation
703	cramp_9	Num	8		Abdominal distention or cramping
704	crampc_9	Char	32	$32.	Abdominal distention or cramping
705	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)
706	feedsitex_9	Char	64	$64.	Insertion site of feeding tube (Not Done)
707	tubesizex_9	Char	64	$64.	Feeding tube size (Not Done)
708	distalposx_9	Char	64	$64.	Distal position of feeding tube (Not Done)
709	proneventx_9	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
710	recfeed_9	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
711	recfeedc_9	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
712	goalrate_9	Num	8		Tube feeding goal rate
713	goalchange_9	Num	8		Did the goal rate change during the 24 hour period?
714	goalchangec_9	Char	19	$19.	Did the goal rate change during the 24 hour period?
715	newgoal_9	Num	8		Yes, new goal rate
716	brand1_9	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
717	brand1vol_9	Num	8		Total volume of enteral formula 1 infused for 24 hour period
718	brand2_9	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
719	brand2vol_9	Num	8		Total volume of enteral formula 2 infused for 24 hour period
720	feedhrs_9	Num	8		Number of hours enteral tube feeds on for this 24 hour period
721	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?
722	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?
723	planext_9	Num	8		Planned Extubation
724	planextc_9	Char	18	$18.	Planned Extubation
725	giint_9	Num	8		GI Intolerance
726	giintc_9	Char	14	$14.	GI Intolerance
727	invbside_9	Num	8		Invasive bedside procedure
728	invbsidec_9	Char	26	$26.	Invasive bedside procedure
729	leftfloor_9	Num	8		Patient left the floor

Num	Variable	Type	Len	Format	Label
730	leftfloorc_9	Char	22	$22.	Patient left the floor
731	care_9	Num	8		Nursing Care (i.e. bathing, HOB down)
732	carec_9	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
733	medadm_9	Num	8		Medical Administration
734	medadmc_9	Char	22	$22.	Medical Administration
735	feedoffoth_9	Num	8		Other reason feed turned off:
736	feedoffothc_9	Char	5	$5.	Other reason feed turned off:
737	feedoffreas_9	Char	255	$255.	Other reason feed turned off: Reason
738	giintoleden_9	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
739	giintoledenc_9	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
740	diarrhea_9	Num	8		Diarrhea
741	diarrheac_9	Char	8	$8.	Diarrhea
742	vomiting_9	Num	8		Vomiting
743	vomitingc_9	Char	8	$8.	Vomiting
744	aspiration_9	Num	8		Aspiration
745	aspirationc_9	Char	10	$10.	Aspiration
746	regurg_9	Num	8		Regurgitation
747	regurgc_9	Char	13	$13.	Regurgitation
748	feedsite_9	Num	8		Insertion site of feeding tube
749	feedsitec_9	Char	12	$12.	Insertion site of feeding tube
750	tubesize_9	Num	8		Feeding tube size
751	tubesizec_9	Char	10	$10.	Feeding tube size
752	distalpos_9	Num	8		Distal position of feeding tube
753	distalposc_9	Char	12	$12.	Distal position of feeding tube
754	distalconf_9	Num	8		Was distal position confirmed during this 24 hour period?
755	distalconfc_9	Char	19	$19.	Was distal position confirmed during this 24 hour period?
756	distalhow_9	Num	8		Yes, how confirmed:
757	distalhowc_9	Char	15	$15.	Yes, how confirmed:
758	distaloth_9	Char	40	$40.	Yes, how confirmed: Other
759	fullcal_9	Num	8		Was rate advanced to full-calorie rate during this calendar day?
760	fullcalc_9	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
761	fullcaltm_9	Num	8	TIMEAMPM.	Yes, time full calorie reached:
762	pronevent_9	Num	8		Prone ventilation this 24 hour period?
763	proneventc_9	Char	3	$3.	Prone ventilation this 24 hour period?
764	recfeedx_9	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
765	goalratex_9	Char	64	$64.	Tube feeding goal rate (Not Done)
766	goalchangex_9	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)

Num	Variable	Type	Len	Format	Label
767	brand1x_9	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
768	feedhrsx_9	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
769	giintoledenx_9	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
770	distalconfx_9	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
771	fullcalx_9	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
772	surg_10	Num	8		Surgery
773	surgc_10	Char	7	$7.	Surgery
774	residual_10	Num	8		Elevated Residuals
775	residualc_10	Char	18	$18.	Elevated Residuals
776	const_10	Num	8		Constipation
777	constc_10	Char	12	$12.	Constipation
778	cramp_10	Num	8		Abdominal distention or cramping
779	crampc_10	Char	32	$32.	Abdominal distention or cramping
780	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)
781	feedsitex_10	Char	64	$64.	Insertion site of feeding tube (Not Done)
782	tubesizex_10	Char	64	$64.	Feeding tube size (Not Done)
783	distalposx_10	Char	64	$64.	Distal position of feeding tube (Not Done)
784	proneventx_10	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
785	recfeed_10	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
786	recfeedc_10	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
787	goalrate_10	Num	8		Tube feeding goal rate
788	goalchange_10	Num	8		Did the goal rate change during the 24 hour period?
789	goalchangec_10	Char	19	$19.	Did the goal rate change during the 24 hour period?
790	newgoal_10	Num	8		Yes, new goal rate
791	brand1_10	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
792	brand1vol_10	Num	8		Total volume of enteral formula 1 infused for 24 hour period
793	brand2_10	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
794	brand2vol_10	Num	8		Total volume of enteral formula 2 infused for 24 hour period
795	feedhrs_10	Num	8		Number of hours enteral tube feeds on for this 24 hour period
796	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?
797	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?
798	planext_10	Num	8		Planned Extubation
799	planextc_10	Char	18	$18.	Planned Extubation
800	giint_10	Num	8		GI Intolerance
801	giintc_10	Char	14	$14.	GI Intolerance
802	invbside_10	Num	8		Invasive bedside procedure

Num	Variable	Type	Len	Format	Label
803	invbsidec_10	Char	26	$26.	Invasive bedside procedure
804	leftfloor_10	Num	8		Patient left the floor
805	leftfloorc_10	Char	22	$22.	Patient left the floor
806	care_10	Num	8		Nursing Care (i.e. bathing, HOB down)
807	carec_10	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
808	medadm_10	Num	8		Medical Administration
809	medadmc_10	Char	22	$22.	Medical Administration
810	feedoffoth_10	Num	8		Other reason feed turned off:
811	feedoffothc_10	Char	5	$5.	Other reason feed turned off:
812	feedoffreas_10	Char	255	$255.	Other reason feed turned off: Reason
813	giintoleden_10	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
814	giintoledenc_10	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
815	diarrhea_10	Num	8		Diarrhea
816	diarrheac_10	Char	8	$8.	Diarrhea
817	vomiting_10	Num	8		Vomiting
818	vomitingc_10	Char	8	$8.	Vomiting
819	aspiration_10	Num	8		Aspiration
820	aspirationc_10	Char	10	$10.	Aspiration
821	regurg_10	Num	8		Regurgitation
822	regurgc_10	Char	13	$13.	Regurgitation
823	feedsite_10	Num	8		Insertion site of feeding tube
824	feedsitec_10	Char	12	$12.	Insertion site of feeding tube
825	tubesize_10	Num	8		Feeding tube size
826	tubesizec_10	Char	10	$10.	Feeding tube size
827	distalpos_10	Num	8		Distal position of feeding tube
828	distalposc_10	Char	12	$12.	Distal position of feeding tube
829	distalconf_10	Num	8		Was distal position confirmed during this 24 hour period?
830	distalconfc_10	Char	19	$19.	Was distal position confirmed during this 24 hour period?
831	distalhow_10	Num	8		Yes, how confirmed:
832	distalhowc_10	Char	15	$15.	Yes, how confirmed:
833	distaloth_10	Char	40	$40.	Yes, how confirmed: Other
834	fullcal_10	Num	8		Was rate advanced to full-calorie rate during this calendar day?
835	fullcalc_10	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
836	fullcaltm_10	Num	8	TIMEAMPM.	Yes, time full calorie reached:
837	pronevent_10	Num	8		Prone ventilation this 24 hour period?
838	proneventc_10	Char	3	$3.	Prone ventilation this 24 hour period?
839	recfeedx_10	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
840	goalratex_10	Char	64	$64.	Tube feeding goal rate (Not Done)
841	goalchangex_10	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
842	brand1x_10	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
843	feedhrsx_10	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
844	giintoledenx_10	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
845	distalconfx_10	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
846	fullcalx_10	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
847	surg_11	Num	8		Surgery
848	surgc_11	Char	7	$7.	Surgery
849	residual_11	Num	8		Elevated Residuals
850	residualc_11	Char	18	$18.	Elevated Residuals
851	const_11	Num	8		Constipation
852	constc_11	Char	12	$12.	Constipation
853	cramp_11	Num	8		Abdominal distention or cramping
854	crampc_11	Char	32	$32.	Abdominal distention or cramping
855	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)
856	feedsitex_11	Char	64	$64.	Insertion site of feeding tube (Not Done)
857	tubesizex_11	Char	64	$64.	Feeding tube size (Not Done)
858	distalposx_11	Char	64	$64.	Distal position of feeding tube (Not Done)
859	proneventx_11	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
860	recfeed_11	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
861	recfeedc_11	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
862	goalrate_11	Num	8		Tube feeding goal rate
863	goalchange_11	Num	8		Did the goal rate change during the 24 hour period?
864	goalchangec_11	Char	19	$19.	Did the goal rate change during the 24 hour period?
865	newgoal_11	Num	8		Yes, new goal rate
866	brand1_11	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
867	brand1vol_11	Num	8		Total volume of enteral formula 1 infused for 24 hour period
868	brand2_11	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
869	brand2vol_11	Num	8		Total volume of enteral formula 2 infused for 24 hour period
870	feedhrs_11	Num	8		Number of hours enteral tube feeds on for this 24 hour period
871	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?
872	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?
873	planext_11	Num	8		Planned Extubation
874	planextc_11	Char	18	$18.	Planned Extubation
875	giint_11	Num	8		GI Intolerance

Num	Variable	Type	Len	Format	Label
876	giintc_11	Char	14	$14.	GI Intolerance
877	invbside_11	Num	8		Invasive bedside procedure
878	invbsidec_11	Char	26	$26.	Invasive bedside procedure
879	leftfloor_11	Num	8		Patient left the floor
880	leftfloorc_11	Char	22	$22.	Patient left the floor
881	care_11	Num	8		Nursing Care (i.e. bathing, HOB down)
882	carec_11	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
883	medadm_11	Num	8		Medical Administration
884	medadmc_11	Char	22	$22.	Medical Administration
885	feedoffoth_11	Num	8		Other reason feed turned off:
886	feedoffothc_11	Char	5	$5.	Other reason feed turned off:
887	feedoffreas_11	Char	255	$255.	Other reason feed turned off: Reason
888	giintoleden_11	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
889	giintoledenc_11	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
890	diarrhea_11	Num	8		Diarrhea
891	diarrheac_11	Char	8	$8.	Diarrhea
892	vomiting_11	Num	8		Vomiting
893	vomitingc_11	Char	8	$8.	Vomiting
894	aspiration_11	Num	8		Aspiration
895	aspirationc_11	Char	10	$10.	Aspiration
896	regurg_11	Num	8		Regurgitation
897	regurgc_11	Char	13	$13.	Regurgitation
898	feedsite_11	Num	8		Insertion site of feeding tube
899	feedsitec_11	Char	12	$12.	Insertion site of feeding tube
900	tubesize_11	Num	8		Feeding tube size
901	tubesizec_11	Char	10	$10.	Feeding tube size
902	distalpos_11	Num	8		Distal position of feeding tube
903	distalposc_11	Char	12	$12.	Distal position of feeding tube
904	distalconf_11	Num	8		Was distal position confirmed during this 24 hour period?
905	distalconfc_11	Char	19	$19.	Was distal position confirmed during this 24 hour period?
906	distalhow_11	Num	8		Yes, how confirmed:
907	distalhowc_11	Char	15	$15.	Yes, how confirmed:
908	distaloth_11	Char	40	$40.	Yes, how confirmed: Other
909	fullcal_11	Num	8		Was rate advanced to full-calorie rate during this calendar day?
910	fullcalc_11	Char	31	$31.	Was rate advanced to full-calorie rate during this calendar day?
911	fullcaltm_11	Num	8	TIMEAMPM.	Yes, time full calorie reached:
912	pronevent_11	Num	8		Prone ventilation this 24 hour period?

Num	Variable	Type	Len	Format	Label
913	proneventc_11	Char	3	$3.	Prone ventilation this 24 hour period?
914	recfeedx_11	Char	64	$64.	Did patient receive enteral tube feedings for any part of this 24 hour period? (Not Done)
915	goalratex_11	Char	64	$64.	Tube feeding goal rate (Not Done)
916	goalchangex_11	Char	64	$64.	Did the goal rate change during the 24 hour period? (Not Done)
917	brand1x_11	Char	64	$64.	Enteral Feeding Formula Brand 1 for this 24 hour period
918	feedhrsx_11	Char	64	$64.	Number of hours enteral tube feeds on for this 24 hour period (Not Done)
919	giintoledenx_11	Char	64	$64.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period? (Not Done)
920	distalconfx_11	Char	64	$64.	Was distal position confirmed during this 24 hour period? (Not Done)
921	fullcalx_11	Char	64	$64.	Was rate advanced to full-calorie rate during this calendar day? (Not Done)
922	surg_12	Num	8		Surgery
923	surgc_12	Char	7	$7.	Surgery
924	residual_12	Num	8		Elevated Residuals
925	residualc_12	Char	18	$18.	Elevated Residuals
926	const_12	Num	8		Constipation
927	constc_12	Char	12	$12.	Constipation
928	cramp_12	Num	8		Abdominal distention or cramping
929	crampc_12	Char	32	$32.	Abdominal distention or cramping
930	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)
931	feedsitex_12	Char	64	$64.	Insertion site of feeding tube (Not Done)
932	tubesizex_12	Char	64	$64.	Feeding tube size (Not Done)
933	distalposx_12	Char	64	$64.	Distal position of feeding tube (Not Done)
934	proneventx_12	Char	64	$64.	Prone ventilation this 24 hour period? (Not Done)
935	recfeed_12	Num	8		Did patient receive enteral tube feedings for any part of this 24 hour period?
936	recfeedc_12	Char	3	$3.	Did patient receive enteral tube feedings for any part of this 24 hour period?
937	goalrate_12	Num	8		Tube feeding goal rate
938	goalchange_12	Num	8		Did the goal rate change during the 24 hour period?
939	goalchangec_12	Char	19	$19.	Did the goal rate change during the 24 hour period?
940	newgoal_12	Num	8		Yes, new goal rate
941	brand1_12	Char	40	$40.	Enteral Feeding Formula Brand 1 for this 24 hour period
942	brand1vol_12	Num	8		Total volume of enteral formula 1 infused for 24 hour period
943	brand2_12	Char	40	$40.	Enteral Feeding Formula Brand 2 for this 24 hour period
944	brand2vol_12	Num	8		Total volume of enteral formula 2 infused for 24 hour period
945	feedhrs_12	Num	8		Number of hours enteral tube feeds on for this 24 hour period
946	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?
947	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?

Num	Variable	Type	Len	Format	Label
948	planext_12	Num	8		Planned Extubation
949	planextc_12	Char	18	$18.	Planned Extubation
950	giint_12	Num	8		GI Intolerance
951	giintc_12	Char	14	$14.	GI Intolerance
952	invbside_12	Num	8		Invasive bedside procedure
953	invbsidec_12	Char	26	$26.	Invasive bedside procedure
954	leftfloor_12	Num	8		Patient left the floor
955	leftfloorc_12	Char	22	$22.	Patient left the floor
956	care_12	Num	8		Nursing Care (i.e. bathing, HOB down)
957	carec_12	Char	34	$34.	Nursing Care (i.e. bathing, HOB down)
958	medadm_12	Num	8		Medical Administration
959	medadmc_12	Char	22	$22.	Medical Administration
960	feedoffoth_12	Num	8		Other reason feed turned off:
961	feedoffothc_12	Char	5	$5.	Other reason feed turned off:
962	feedoffreas_12	Char	255	$255.	Other reason feed turned off: Reason
963	giintoleden_12	Num	8		Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
964	giintoledenc_12	Char	61	$61.	Did the patient have any GI intolerances (as defined by EDEN protocol) for the 24 hour period?
965	diarrhea_12	Num	8		Diarrhea
966	diarrheac_12	Char	8	$8.	Diarrhea
967	vomiting_12	Num	8		Vomiting
968	vomitingc_12	Char	8	$8.	Vomiting
969	aspiration_12	Num	8		Aspiration
970	aspirationc_12	Char	10	$10.	Aspiration
971	regurg_12	Num	8		Regurgitation
972	regurgc_12	Char	13	$13.	Regurgitation
973	feedsite_12	Num	8		Insertion site of feeding tube
974	feedsitec_12	Char	12	$12.	Insertion site of feeding tube
975	tubesize_12	Num	8		Feeding tube size
976	tubesizec_12	Char	10	$10.	Feeding tube size
977	distalpos_12	Num	8		Distal position of feeding tube
978	distalposc_12	Char	12	$12.	Distal position of feeding tube
979	distalconf_12	Num	8		Was distal position confirmed during this 24 hour period?
980	distalconfc_12	Char	19	$19.	Was distal position confirmed during this 24 hour period?
981	distalhow_12	Num	8		Yes, how confirmed:
982	distalhowc_12	Char	15	$15.	Yes, how confirmed:
983	distaloth_12	Char	40	$40.	Yes, how confirmed: Other
984	fullcal_12	Num	8		Was rate advanced to full-calorie rate during this calendar day?

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