

*Last content update on: November 14<sup>th</sup> 2022*

*Study:*

**Continuous Wireless Monitoring of Vital Signs and Automated Alerts of Postsurgical Patient Deterioration.**

NCT04640415

**Statistical analysis plan**

*Version 1*

**Primary Outcome Measure:**

*Cumulative duration*

*Cumulative duration of one or more deviations in vital signs. List of vital signs, and normal limits detailed in protocol, whichever comes first.*

Vital signs value deviations are calculated per 24 hours of monitoring time.

*[Time Frame: First 5 days from randomization or until discharge]*

**Secondary Outcome Measures:**

- *Frequency of sustained deviation alerts*

*Frequency of each of the sustained deviations in vital signs. List of vital signs, and normal limits detailed in protocol.*

Number of alarms are calculated as the number of alarms per 24 hours.

*[Time Frame: First 5 days from randomization or until discharge, whichever comes first]*

- *AE during the first 7 days and the first 30 days*
- *SAE during the first 7 days and the first 30 days*

**Tertiary Outcome Measures:**

1. *Length of hospital stay*

*Length of hospital stay*

*[Time Frame: 30 days from randomization and 6 months]*

2. *Patient related post-admission healthcare expenses*

*Total patient-related healthcare expenses in patients experiencing adverse clinical outcomes compared to patients without such outcomes and the effect of the study intervention on expenses*

*[Time Frame: 2 years]*

3. *Staff response time (intervention group only)*

*Time from the staff is notified by app, until they respond by selecting 'check on patient' in app*

*Stratified according to time of day*

*[Time Frame: Up to 5th postoperative day or until discharge, whichever comes first]*

### **Outcome analysis:**

- *Intention to treat analysis*
  - Patient outcomes are analyzed based on the randomization groups.
- *Per-protocol analysis*
  - Patients included in the intervention are those with:
    - intervention patients with alerts with at least one registered use of the app in relation to an alert, as indicated if the “attend”, “postpone/snooze” or “transfer” buttons have been used.
  - OR
  - intervention patients with no alerts, are also included in the intervention group.

AND

- at least 12 hours of monitoring with valid data transfer.
- Patients in the control-group are all patients from the control group with at least 12 hours of monitoring.

### **Data analysis:**

- Vital values: Gaps in vital value data were not imputed.  
Durations will be calculated in minutes per 24 hours (1440 minutes) of monitoring.
- Data will be presented with descriptive statistics.  
Categorical data will be tested with Fishers exact test.  
Continuous data will be tested with Wilcoxon Mann-Whitney U test.  
Time-till-event will be tested with cox-regression.
- For statistical tests and alpha of < 0.05 will be considered statistically significant.

**Table 1: Patient demographics**

	Control arm N = 200	Intervention arm N = 200
Age, mean		
Male, no (%)		
ASA class		
I		
II		
III		
>IV		
Smoking status		
Never smoked		
Former smoker		
Current smoker		
Pack years for former and current smokers (mean)		
Preexisting conditions, n (%)		
COPD		
Vascular insufficiency		
Chronic arterial hypertension		
Diabetes Mellitus		
Type of surgery		
Abdominal		
Vascular		
Urologic		
Orthopedic		

**Table 2: Primary outcomes - Cumulative duration of deviating vital values per 24 hours**

	Intention to treat analysis		
	Control arm N = 200	Intervention arm N = 200	p-value
<b>Total cumulative</b>			
<b>Respiratory</b>			
SpO <sub>2</sub> < 92 %			
SpO <sub>2</sub> < 88 %			
SpO <sub>2</sub> < 85 %			
SpO <sub>2</sub> < 80 %			
RF < 5 min <sup>-1</sup>			
RF < 11 min <sup>-1</sup>			
RF > 24 min <sup>-1</sup>			
RF > 30 min <sup>-1</sup>			
<b>Circulatory</b>			
HR < 30 min <sup>-1</sup>			
HR [30 - 40] min <sup>-1</sup>			
HR > 110 min <sup>-1</sup>			
HR > 130 min <sup>-1</sup>			
SBP < 70 mmHg			
SBP < 90 mmHg			
SBP > 180 mmHg			
SBP > 220 mmHg			

**Table 3: Secondary outcomes - Median number of alarms for sustained deviations per 24 hours. For control patients the number is the theoretical number of alarms a system would issue.**

	Control arm N = 200	Intervention arm N = 200	p-value
<b>Desaturation</b>			
SpO2 < 92 % for > 60 min			
SpO2 < 88 % for > 10min			
SpO2 < 85 % for > 5 min			
SpO2 < 80 % for > 1 min			
<b>Bradypnea</b>			
RF < 5 min <sup>-1</sup> for > 1 min			
RF < 11 min <sup>-1</sup> for > 15 min			
<b>Tachypnea</b>			
RF > 24 min <sup>-1</sup> for > 15 min			
RF > 30 min <sup>-1</sup> for > 5 min			
<b>Bradycardia</b>			
HR < 30 min <sup>-1</sup> for > 1 min			
HR [30 - 40] min <sup>-1</sup> for > 5 min			
<b>Tachycardia</b>			
HR > 110 min <sup>-1</sup> for > 60 min			
HR > 130 min <sup>-1</sup> for > 30 min			
<b>Hypotension</b>			
SBP < 70 mmHg for > 30 min			
SBP < 90 mmHg for > 60 min			
<b>Hypertension</b>			
SBP > 180 mmHg for > 60 min			
SBP > 220 mmHg for > 30 min			

**Table 4: Tertiary outcomes**

	Intention to treat analysis		Per protocol analysis	
	Control arm N = 200	Intervention arm N = 200	Control arm N = 280	Intervention arm N = 120
Serious Adverse Events at 7 days / n (%)	XX (xx %)	XX (xx %)	XX (xx %)	XX (xx %)
Serious Adverse Events at 30 days / n (%)	XX (xx %)	XX (xx %)	XX (xx %)	XX (xx %)
Death / n (%)	XX (xx %)	XX (xx %)	XX (xx %)	XX (xx %)
Length of stay / days [IQR]	X [X-XX]	X [X-XX]	X [X-XX]	X [X-XX]
Reoperation / n (%)	XX (xx %)	XX (xx %)	XX (xx %)	XX (xx %)