

**DEVELOPMENT OF A NATIONAL CORE DATA SET FOR THE IRANIAN ICU PATIENT OUTCOME PREDICTION**Atashi A^{1,2}, Ahmadian L^{3*}, Rahmatinejad Z¹, Miri MM⁴, Nazeri N², Eslami S^{5,6,7}

1 :Student Research Committee, Department of Medical Informatics, Faculty of Medicine, Mashhad University of Medical Sciences, Mashhad, Iran;

2: Cancer Informatics Department, Breast Cancer Research Center, ACECR, Iran

3: Medical Informatics Research Center, Institute for Futures Studies in Health, Kerman University of Medical Sciences, Kerman, Iran (* corresponding author)

4: Emam Hossein Hospital, Shahid Beheshti Medical University, Tehran, Iran

5: Pharmaceutical Research Center, School of Pharmacy, Mashhad University of Medical Sciences, Mashhad, Iran

6: Department of Medical Informatics, Faculty of Medicine, Mashhad University of Medical Sciences, Mashhad, Iran

7: Department of Medical Informatics, Academic Medical Center, University of Amsterdam, Amsterdam, the Netherlands.

Correspondence:

Medical Informatics Research Center, Kerman university of Medical Sciences, Haftbagh Highway, Kerman, Iran
university Telefax: +98- 343- 31325406, P.O. Box: 7616911313, E-mail: ahmadianle@yahoo.com

TYPE OF ARTICLE: CONFERENCE ABSTRACT

ABSTRACT

Introduction: To define a core data set for ICU patients outcome prediction in Iran. This core data set will lead us to design ICU outcome prediction models with the most effective parameters.

Methods: A combination of literature review and expert consensus meetings were used. First, a literature review was performed by a general search in PubMed to find the most appropriate models for intensive care mortality prediction and their parameters. As the next step, in a national survey, experts from medical centers in all parts of Iran were asked to comment on a list of items retrieved from an earlier literature review study. In the next stage, a central committee of experts was installed. In four meetings the central committee discussed the newly suggested items and other parameters, which were known necessary by at least one-third of the experts. Each data item was examined separately and included/excluded by committee consensus.

Results: The combination of the literature review findings and experts' consensus resulted in a draft data set, including 26 data items. Ninety-two percent of data items in the draft data set were retrieved from the literature study, and the others were suggested by the experts. The final data set of 24 data items covers patient history and physical examination, chemistry, vital signs, oxygenations and some more specific parameters.

Conclusion: This data set was defined designed to develop a nationwide prognostic model for predicting ICU mortality and patients' length of stay. This data set opens the door for creating standardized approaches in data collection in the Iranian intensive care unit estimation of resource utility.

KEYWORDS: Minimum data set, Scoring system, Intensive care unit

Abstracts of First National Congress of Medical Informatics, Mashhad, Iran, February 2017

© 2017 The Authors. This is an open access article under the terms of the Creative Commons Attribution-NonCommercial-NoDerivs License, which permits use and distribution in any medium, provided the original work is properly cited, the use is non-commercial and no modifications or adaptations are made.