Supplementary Table 2. Inclusion and exclusion criteria

To be considered for ICU, the patient must satisfy at least one of these criteria:

- Requires invasive ventilatory support
 - o Refractory hypoxemia (SpO₂ < 90% on non-rebreather mask/FiO₂ > 0.85)
 - \circ Respiratory acidosis with pH < 7.2
 - o Clinical evidence of impending respiratory failure
 - o Inability to protect or maintain airway

Or

- Hypotension
 - o SBP < 90 or relative hypotension with clinical evidence of shock (altered level of consciousness, decreased urine output, or other end organ failure) refractory to volume resuscitation, requiring vasopressor/inotrope support that cannot be managed elsewhere

To be excluded from ICU (i.e. unlikely to benefit), the patient must satisfy at least one of these criteria:

- Age > 85 years
- Cardiac arrest
 - Unwitnessed cardiac arrest
 - Witnessed arrest non-responsive to electrical therapy
 - o Recurrent cardiac arrest
- Severe cognitive impairment
- Advanced untreatable neuromuscular disease
- Metastatic malignancy, if unstable or current chemotherapy
- Advanced and irreversible immunocompromise
- Severe and irreversible neurologic event/condition
- End-stage organ failure:
 - o Cardiac
 - NYHA class III or IV heart failure
 - o Lung
 - COPD with FEV1 < 25% predicted, baseline PaO₂ < 55mg, or secondary pulmonary hypertension
 - CF with postbronchodilator FEV1 < 30% predicted or baseline PaO₂ < 55mg
 - Pulmonary fibrosis with VC or TLC < 60% predicted, baseline PaO₂ < 55mmHg, or secondary pulmonary hypertension
 - Primary pulmonary hypertension with NYHA class III-IV heart failure, or right atrial pressure >10mmHg, or mean pulmonary arterial pressure > 50mmHg
 - o Liver
 - Child Pugh Score ≥ 7
- Has other severe conditions such as severe trauma, severe burns
- Requires transfusion of > 6 units PRBC in 24-hour period
- Elective palliative surgery

Adapted from: Christian M, Wax R, Lazar N. Critical Care During a Pandemic: Final Report of the Ontario Health Plan for an Influenza Pandemic (OHPIP) Working Group on Adult Critical Care Admission, Discharge and Triage Criteria. Toronto, 2006.