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Tourniquet Use Does Not Affect Functional Outcomes or Pain After Total Knee Arthroplasty. A Prospective, Double-Blinded, Randomized Controlled Trial http://dx.doi.org/10.2106/JBJS.18.00531

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Appendix 1. Inclusion and Exclusion Criteria

Inclusion Criteria	Exclusion Criteria
All primary total knee arthroplasties performed by surgeons included in this study	Age < 18 or >80
	Revision surgery BMI > 40
	Vascular calcifications or a diagnosis of Peripheral vascular disease*
	Baseline lower extremity strength less than 5/5
	History of preoperative narcotic use, defined as 7.5 MME** Q4hrs for one month preoperatively
	Functionally limiting spine disease
	Other functionally limiting lower extremity disease
	Patients who cannot perform baseline functional assessments
	Any allergy or contraindication to study protocol medications
	Post-traumatic arthritis
	Inflammatory arthritis
	Pregnancy
	Prisoners
	Patients receiving care as part of a worker's compensable injury

^{*}Vascular disease screening: documented history in electronic medical record, use of cilostazol, absence of vascular disease was confirmed during recruitment phone calls, visible calcifications on preoperative x-rays, patients with diminished pulses sent to vascular surgeon for further evaluation and were excluded from the study

^{**}MME – morphine milligram equivalents

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Appendix 2. Grading scale for difficulty of intraoperative visualization due to blood

0	No Difficulty
1	Some difficulty, but did not affect the case
2	Moderate difficulty
3	Severe difficulty