

Appendix 2

Supplemental Material: RESULTS of VOTES (n= 23)

1) General Statement: ECTR is indicated in severe TI poisoning

	AGAINST			NEUTRAL			FOR				
Vote ratings	1	2	3	4	5	6	7	8	9	Median	DI
Distribution of votes	0	0	0	0	2	2	13	5	1	7	0.00

2) Indications of ECTR: ECTR is indicated if ANY of the following conditions are present:

A) If TI exposure is highly suspected on the basis of history or clinical features

	AGAINST			NEUTRAL			FOR				
	1	2	3	4	5	6	7	8	9	Median	DI
Distribution of votes	0	1	0	0	5	4	10	3	0	7	0.22

B) Assuming TI concentrations are readily available, if TI concentration is greater than...

	AGAINST			NEUTRAL			FOR				
	1	2	3	4	5	6	7	8	9	Median	DI
0.2 mg/L	2	5	5	2	7	1	0	0	0	3	0.62
0.4 mg/L	1	4	4	3	7	2	0	1	0	4	0.52
0.6 mg/L	0	1	3	3	9	3	2	1	0	5	0.24
0.8 mg/L	0	1	2	1	9	4	2	2	1	5	0.32
1.0 mg/L	0	0	0	2	2	3	10	3	2	7	0.15

3) Timing of ECTR: ECTR should be initiated as soon as possible, ideally within 24-48h of thallium exposure

	AGAINST			NEUTRAL			FOR				
	1	2	3	4	5	6	7	8	9	Median	DI
Distribution of votes	0	0	0	0	0	0	6	9	8	8	0.13

4) Cessation of ECTR: ECTR should be terminated when TI concentration is < 0.1 mg/L for a minimum duration of 72 hours

	AGAINST			NEUTRAL			FOR				
	1	2	3	4	5	6	7	8	9	Median	DI
Distribution of votes	0	0	1	1	5	4	6	3	2	6.5	0.42

5) a) Choice of ECTR: Intermittent hemodialysis is the preferred initial ECTR, especially after an acute ingestion

	AGAINST			NEUTRAL			FOR				
	1	2	3	4	5	6	7	8	9	Median	DI
Distribution of votes	0	0	0	0	2	2	10	6	3	7	0.16

b) Choice of ECTR: Intermittent hemoperfusion or continuous renal replacement modalities are valid alternatives if intermittent hemodialysis is not available

	AGAINST			NEUTRAL			FOR				
	1	2	3	4	5	6	7	8	9	Median	DI
Distribution of votes	0	0	0	0	1	4	10	5	3	7	0.16

6) Dialyzability: Thallium is not, slightly, moderately dialyzable, or dialyzable

	Not dialyzable	Slightly dialyzable	Moderately dialyzable	Dialyzable	Mode
Distribution of votes	0	19	3	1	Slightly D

DI = Disagreement Index