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| PICOs (Initially developed)  |
| PICO 1: When should laboratory monitoring be used in urgent surgery? |
| PICO 2: Which tests should be used: POCT vs. non-POCT measurements and which assays (i.e. concentration/functional measurements)? |
| PICO 3: Should antidotes use be based on laboratory values? |
| PICO 4: Should laboratory analysis be performed after reversal? Time frame of measurements (hours,.. days?) |
| PICO 5: Should reversal agents be used to manage DOAC-associated bleeding in urgent surgery? |
| PICO 6: Are reversal agents indicated for DOAC-treated patients with traumatic and non-traumatic ICH without need for surgery? |
| PICO 7: Should reversal agents be used to manage none-bleeding patients with an overdose of DOAC? |
| PICO 8: Does andexanet alfa or PCC be used to manage factor Xa inhibitor associated bleeding? |
| PICO 9: Does andexanet alfa or aPCC be used to manage factor Xa associated bleeding? |
| PICO 10: Does andexanet alfa or rFVIIa be used to manage factor Xa associated bleeding? |
| PICO 11: Does idarucizumab or PCC be used to manage dabigatran associated bleeding? |
| PICO 12: Does idarucizumab or aPCC be used to manage dabigatran associated bleeding? |
| PICO 13: Does idarucizumab or rFVIIa be used to manage dabigatran associated bleeding? |
| PICO 14: Should reversal agents be used before an invasive procedure including regional anaesthesia, aortic stent placement etc.? |

**Appendix 1**

Following the Euroanaesthesia conference, scientific queries of interest were defined by the authors and formulated into 14 PICOs (Population/Intervention/Comparison/ Outcome) by three authors (CvH, CFE, OG). These PICOs were revised and merged during a discussion process among all authors due to a great degree of overlap. The following PICOs were finally merged:

* PICO 8, 9 and 10 were merged (now PICO 7)
* PICO 11, 12 and 13 were merged (now PICO 8)

**Legend:** PCC: prothrombin complex concentrate; aPCC: activated prothrombin complex concentrate; rFVIIa: recombinant activated factor VII