

Development of an NSAID decision tool for perioperative pain management in adult orthopaedic patients: a modified Delphi study

Appendix 1

Risk of renal adverse events		Disagree			Undecided			Agree			Your round 1 scores	Group Likert scores - Median (IQR)				Please add comments/ references to support your score (optional)
		1	2	3	4	5	6	7	8	9		The whole group	Orthopaedic surgeons	Anaesthetists	Physicians	
Q1	Normal renal function, GFR ≥ 90 ml/min															
Q2	Mildly decreased renal function; GFR 60–89 ml/min															
Q3	Mildly moderately decreased renal function; GFR ≤ 59 ml/min															
Q4	Intraoperative concern of renal hypoperfusion (ex. due to > 500 ml blood loss + requiring vasopressor support in an elderly patient)															
Q5	Diabetes ± insulin dependent, well controlled (HbA1c ≤ 6.5%)															
Q6	Diabetes ± insulin dependent, poorly controlled (HbA1c > 6.5%)															
Risk of cardiovascular adverse events		1	2	3	4	5	6	7	8	9						
Q1	Acute coronary syndrome < 3 months ago															
Q2	Acute coronary syndrome ≥ 3 months ago															
Q3	Percutaneous/surgical coronary revascularisation < 3 months ago															
Q4	Percutaneous/surgical coronary revascularisation ≥ 3 months ago															
Q5	Chronic stable angina															
Q6	Well-controlled hypertention															
Q7	Poorly controlled hypertention															
Q8	Stroke/TCI < 3 months ago															
Q9	Stroke/TCI ≥ 3 months ago															
Q10	Heart failure (NYHA I–II)															
Q11	Heart failure (NYHA III–IV)															
Risk of gastrointestinal adverse events		1	2	3	4	5	6	7	8	9						
Q1	Heartburn caused by gastro-oesophageal reflux disease (GORD)															
Q2	Peptic ulcer disease															
Q3	GI-bleeding/perforation															
Q4	<i>Helicobacter pylori</i> -positive															
Q5	Concomitant use of low-dose aspirin (≤ 100 mg daily)															
Q6	Concomitant use of antiplatelet or anticoagulant treatment (other than low-dose aspirin)															
Q7	Concomitant use of low-dose corticosteroids (≤ 10 mg prednisone daily)															
Q8	Concomitant use of high-dose corticosteroids (> 10 mg prednisone daily)															
Q9	Concomitant use of selective serotonin reuptake inhibitors (SSRIs)															
Q10	Severe rheumatoid arthritis disability															
Risk of miscellaneous adverse events		1	2	3	4	5	6	7	8	9						
Q 1	Aspirin/NSAID-induced asthma or allergic reactions															
Q2	Inflammatory bowel disease (IBD)															
Q3	Impaired liver function															
Q4	Patients with non-union healing of bone															
Q5	Patients with an upper limb fracture															
Q6	Patients with a lower limb fracture															
Q7	Patients with an acute fracture known with high risk of problem healing (e.g. scaphoid)															
Q8	Multiple myeloma															
Q9	Bleeding disorders (e.g. haemophilia, von Willebrand disease, qualitative or quantitative platelet defects, etc.)															
Q10	Neutropenic patients															
Q11	Porphyria															
Q12	ASA 1 patients (healthy, no systemic comorbidities)															
Q13	< 65 years old															
Q14	65–75 years old															
Q15	> 75 years old															