

Supplementary Appendix

This appendix has been provided by the authors to give readers additional information about their work.

Supplement to: Slichter SJ, Kaufman RM, Assmann SF, et al. Dose of prophylactic platelet transfusions and prevention of hemorrhage. *N Engl J Med* 2010;362:600-13.

Supplement: Platelet Dose Trial Bleeding Scale

	Grade 1	Grade 2	Grade 3
Oral and nasal	<ul style="list-style-type: none"> ➤ Oropharyngeal bleeding – total duration of all episodes in previous 24 hours \leq 30 minutes* ➤ Petechiae of oral mucosa ➤ Epistaxis – total duration of all episodes in previous 24 hours \leq 30 minutes* 	<ul style="list-style-type: none"> ➤ Oropharyngeal bleeding – total duration of all episodes in previous 24 hours $>$ 30 minutes* ➤ Epistaxis – total duration of all episodes in previous 24 hours $>$ 30 minutes* 	<ul style="list-style-type: none"> ◆ Any bleeding requiring RBC transfusion over routine transfusion needs**
Skin, soft tissue, musculoskeletal	<ul style="list-style-type: none"> ➤ Petechiae of skin ➤ Purpura \leq 1 inch diameter ➤ One or more spontaneous hematomas in the soft tissue or muscle $>$ 1 <i>inch</i> 	<ul style="list-style-type: none"> ➤ Purpura $>$ 1 inch diameter ➤ Spontaneous hematoma in deeper tissues ➤ Joint bleeding (confirmed by aspiration, imaging study or other accepted technique) 	<ul style="list-style-type: none"> ◆ Any bleeding requiring RBC transfusion over routine transfusion needs**
Gastrointestinal	<ul style="list-style-type: none"> ➤ Positive stool occult blood test [<i>This was not assessed in PLADO</i>] 	<ul style="list-style-type: none"> ➤ Melanotic stool ➤ Hematochezia – visible red blood mixed in stool, not requiring a transfusion ➤ Hematemesis – Grossly visible blood in emesis or in nasogastric drainage tube (not related or secondary to swallowed blood) 	<ul style="list-style-type: none"> ◆ Any bleeding requiring RBC transfusion over routine transfusion needs**

<p>Genitourinary</p>	<ul style="list-style-type: none"> ➤ Any biochemical or microscopic Hb/RBCs without red urine [<i>This was not assessed in PLADO</i>] ➤ Abnormal vaginal bleeding (Unexpected bleeding out of normal cycle OR Bleeding heavier than normal OR Breakthrough bleeding (patient on hormonal therapy to prevent bleeding)) with spotting 	<ul style="list-style-type: none"> ➤ Gross/visible hematuria without need for transfusion ➤ Abnormal vaginal bleeding (Unexpected bleeding out of normal cycle OR Bleeding heavier than normal OR Breakthrough bleeding (patient on hormonal therapy to prevent bleeding)) more than spotting 	<ul style="list-style-type: none"> ◆ Any bleeding requiring RBC transfusion over routine transfusion needs**
<p>Pulmonary</p>		<ul style="list-style-type: none"> ➤ Hemoptysis – Visible blood ➤ Blood in broncho-pulmonary lavage, or blood tinged sputum (excluding those with nose or oropharyngeal bleeding) 	<ul style="list-style-type: none"> ◆ Any bleeding requiring RBC transfusion over routine transfusion needs**
<p>Body Cavity</p>		<ul style="list-style-type: none"> ➤ Visible blood in body cavity fluid (e.g. red cells apparent in fluid aspirate) short of criteria for Grade 3 or 4 	<ul style="list-style-type: none"> ➤ Grossly bloody body cavity fluids and organ dysfunction with symptoms, and/or need to intervene (e.g. to aspirate), and/or need for transfusion
<p>Central Nervous System</p>		<ul style="list-style-type: none"> ➤ Retinal bleeding without visual impairment ➤ Lumbar puncture with blood (>5 RBC/μL in CSF on microscopic analysis and non-traumatic tap), no symptoms and no visible red color 	<ul style="list-style-type: none"> ➤ Lumbar puncture with visible red color in absence of symptoms, and non-traumatic tap

Invasive Sites		➤ Bleeding at invasive sites (venipuncture sites, intravenous lines or catheter exit sites): active oozing at site for a cumulative total of > 1 hour in the previous 24 hours	◆ Any bleeding requiring RBC transfusion over routine transfusion needs**
Hemodynamic Instability			➤ Any bleeding associated with moderate hemodynamic instability (hypotension; >30mmHg fall or >30% decrease in either systolic or diastolic blood pressure) and requiring RBC transfusion over routine transfusion needs**
<p>* Count actual bleeding (i.e. “running out” or need for basin, Kleenex, towel, etc.) not minor bleeding</p> <p>** Red cell transfusion must be specifically related to treatment of bleeding within 24 hours of onset of bleeding</p>			

GRADE 4:

- ◆ Any bleeding associated with severe hemodynamic instability (hypotension; >50mm/Hg fall or >50% decrease in either systolic or diastolic blood pressure, with associated tachycardia (heart rate increase of \geq 20% for 20 minutes) and requiring RBC transfusion over routine transfusion needs
- ◆ Fatal bleeding from any source
- ◆ Retinal bleeding with visual impairment (Visual impairment is defined as a field deficit, and patients with suspected visual impairment require an ophthalmologic consult for documentation)
- ◆ CNS symptoms with non-traumatic bloody lumbar puncture
- ◆ CNS bleeding on imaging study with or without dysfunction