

Appendix 2 Scales used by physician reviewers to classify the impact, causation and preventability of the adverse event; distribution of physical impairment and preventability results

After due consideration of the clinical details of the patient’s management, irrespective of preventability, and your responses to the questions above; what level of confidence do you have that the health care management caused the injury? [a score of at least four was required to indicate causation through healthcare management]		
1. Virtually no evidence of management causation		
2. Slight to modest evidence of management causation		
3. Management causation not likely (less than 50/50, but “close call”)		
4. Management causation more likely (more than 50/50, but “close call”)		
5. Moderate to strong evidence of management causation		
6. Virtually certain evidence of management causation		
Based on the evidence in the medical record, how would you judge the degree of physical impairment attributable to the adverse event on the day of discharge?	INAES event distribution	
	Unweighted	Weighted (95% CI)
None	12.6%	13.2% (9.2%-18.6%)
Minimal impairment, or recovery in 1 month, or both	32.4%	33.6% (26.2%-41.9%)
Moderate impairment, recovery in 1-6 months	21.9%	20.8% (15.9%-26.7%)
Moderate impairment, recovery in 6-12 months	5.7%	5.0% (2.6%-9.1%)
Permanent impairment, degree of disability ≤ 50%	9.3%	8.8% (5.1%-15.0%)
Permanent impairment, degree of disability > 50%	1.2%	1.1% (0.3%-4.4%)
Death	6.1%	6.7% (3.3%-12.9%)
Unable to determine	10.9%	10.9% (6.2%-18.5%)
Rate on a 6 point scale your confidence in the evidence for preventability [an adverse event was considered ‘preventable’ if it had a score of four or more]	INAES event distribution	
	Unweighted	Weighted (95% CI)
1. Virtually no evidence of preventability	8.5%	9.6% (5.0%-17.6%)
2. Slight to modest evidence for preventability	3.6%	3.6% (1.4%-8.7%)
3. Preventability not quite likely; less than 50-50 but close call	15.4%	14.1% (8.8%-22.0%)
4. Preventability more than likely; more than 50-50 but close call	38.5%	39.7% (33.3%-46.4%)
5. Strong evidence for preventability	25.9%	24.8% (17.4%-34.0%)
6. Virtually certain evidence for preventability	8.1%	8.3% (4.2%-15.5%)