

**Hospital Resource and Clinical Management Guidelines for Hospital Healthcare Providers
When Routine Critical Care Resources Are Not Available**

TABLE TOP EXERCISE

PATIENT 1	
Name	Buddy Holly
Age	30
Gender	M
Weight	220 lbs
BMI	kg/m ²
Chief complaint	Cough, nausea, vomiting, fever
Working assessment	Influenza
Past medical history	Hypertension
Medications	Hydrochlorothiazide
Physical Assessment	
GCS	14
Pulse	120
BP	90/70 mmHg Dop <5
R	30
PaO ₂ /Fi O ₂	405 mmHg
Labs	
WBC count	26 cell/mm ²
Hemoglobin	13.8 g/dL
Platelets	140 x 10 ³ μL
Bilirubin	1.0 mg/dL
Creatinin	2.0 mg/dL
Imaging	
CXR	Bilateral patchy infiltrates

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TABLE TOP EXERCISE

PATIENT 2	
Name	Loretta Lynn
Age	55
Gender	F
Weight	98 lbs
BMI	kg/m ²
Chief complaint	Cough, nausea, vomiting, fever
Working assessment	Influenza
Past medical history	Breast cancer with metastatic disease
Medications	MS Contin, Percocet
Physical Assessment	
GCS	5
Pulse	118
BP	90/60 mmHg Dop 6
R	30
PaO ₂ /Fi O ₂	140 mmHg intubated
Labs	
WBC count	40 cell/mm ²
Hemoglobin	10 g/dL
Platelets	48 x 10 ³ μL
Bilirubin	4.0 mg/dL
Creatinin	3.8 mg/dL
Imaging	
CXR	Bilateral patchy infiltrates

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TABLE TOP EXERCISE

PATIENT 3	
Name	Elvis Presley
Age	12
Gender	M
Weight	75 lbs
BMI	kg/m ²
Chief complaint	Cough, nausea, vomiting, fever
Working assessment	Influenza
Past medical history	None
Medications	None
Physical Assessment	
GCS	15
Pulse	126
BP	98/60 mmHg
R	24
PaO ₂ /Fi O ₂	405 mmHg
Labs	
WBC count	22 cell/mm ²
Hemoglobin	15 g/dL
Platelets	300 x 10 ³ μL
Bilirubin	1.0 mg/dL
Creatinin	1.0 mg/dL
Imaging	
CXR	Normal

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TABLE TOP EXERCISE

PATIENT 4	
Name	Perry Como
Age	50
Gender	M
Weight	240 lbs
BMI	kg/m ²
Chief complaint	Cough, nausea, vomiting
Working assessment	Influenza
Past medical history	AFib, myocardial infarction, congestive heart failure NYHA II
Medications	Atenolol, warfarin, lisinopril
Physical Assessment	
GCS	14
Pulse	110 irr
BP	94/72 mmHg Dop 4
R	26
PaO ₂ /Fi O ₂	380 mmHg
Labs	
WBC count	24 cell/mm ²
Hemoglobin	12 g/dL
Platelets	150 x 10 ³ μL
Bilirubin	1.2 mg/dL
Creatinin	1.8 mg/dL
Imaging	
CXR	Small bilateral effusions

**Hospital Resource and Clinical Management Guidelines for Hospital Healthcare Providers
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TABLE TOP EXERCISE

PATIENT 5	
Name	Shirley MacLaine
Age	28
Gender	F
Weight	108 lbs
BMI	kg/m ²
Chief complaint	Cough, nausea, vomiting, fever
Working assessment	Influenza
Past medical history	Metastatic melanoma
Medications	MS Contin
Physical Assessment	
GCS	12
Pulse	130
BP	102/60 mmHg
R	28
PaO ₂ /Fi O ₂	405 mmHg
Labs	
WBC count	30 cell/mm ²
Hemoglobin	12 g/dL
Platelets	120 x 10 ³ μ L
Bilirubin	1.2 mg/dL
Creatinin	2.0 mg/dL
Imaging	
CXR	Diffuse patchy infiltrates

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TABLE TOP EXERCISE

PATIENT 6	
Name	Jeannie C Riley
Age	82
Gender	F
Weight	120 lbs
BMI	kg/m ²
Chief complaint	Cough, nausea, vomiting, fever
Working assessment	Influenza
Past medical history	Chronic renal failure, hypertension
Medications	Hydrochlorothiazide
Physical Assessment	
GCS	12
Pulse	124
BP	80/40 mmHg Dop 8
R	28
PaO ₂ /Fi O ₂	240 mmHg
Labs	
WBC count	30 cell/mm ²
Hemoglobin	10.8 g/dL
Platelets	95 x 10 ³ μ L
Bilirubin	2.0 mg/dL
Creatinin	3.6 mg/dL
Imaging	
CXR	Diffuse patchy infiltrates

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TABLE TOP EXERCISE

PATIENT 7	
Name	Tina Turner
Age	10
Gender	F
Weight	80 lbs
BMI	kg/m ²
Chief complaint	Cough, nausea, vomiting, fever
Working assessment	Influenza
Past medical history	None
Medications	None
Physical Assessment	
GCS	15
Pulse	124
BP	100/64 mmHg
R	24
PaO ₂ /Fi O ₂	405 mmHg
Labs	
WBC count	18 cell/mm ²
Hemoglobin	14 g/dL
Platelets	260 x 10 ³ μL
Bilirubin	1.0 mg/dL
Creatinin	1.0 mg/dL
Imaging	
CXR	Normal

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TABLE TOP EXERCISE

PATIENT 8	
Name	Lena Horne
Age	61
Gender	F
Weight	180 lbs
BMI	kg/m ²
Chief complaint	Cough, nausea, vomiting, fever
Working assessment	Influenza
Past medical history	Hypertension, diabetes mellitus, coronary artery disease
Medications	Atenolol, insulin, lisinopril
Physical Assessment	
GCS	14
Pulse	96
BP	88/64 mmHg Dop 5
R	24
PaO ₂ /Fi O ₂	340 mmHg
Labs	
WBC count	28 cell/mm ²
Hemoglobin	11.2 g/dL
Platelets	100 x 10 ³ μL
Bilirubin	2.0 mg/dL
Creatinin	2.0 mg/dL
Imaging	
CXR	Right middle lobe infiltrate

**Hospital Resource and Clinical Management Guidelines for Hospital Healthcare Providers
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TABLE TOP EXERCISE

PATIENT 9	
Name	Frankie Valli
Age	8
Gender	M
Weight	60 lbs
BMI	kg/m ²
Chief complaint	Cough, nausea, vomiting, fever
Working assessment	Influenza
Past medical history	None
Medications	None
Physical Assessment	
GCS	5
Pulse	138
BP	60/40 mmHg Dop 14
R	28
PaO ₂ /Fi O ₂	140 mmHg intubated
Labs	
WBC count	30 cell/mm ²
Hemoglobin	13 g/dL
Platelets	50 x 10 ³ μL
Bilirubin	6.0 mg/dL
Creatinin	3.5 mg/dL
Imaging	
CXR	Intubated, right multilobar infiltrate

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TABLE TOP EXERCISE

PATIENT 10	
Name	Ritchie Valens
Age	16
Gender	M
Weight	110 lbs
BMI	kg/m ²
Chief complaint	Cough, nausea, vomiting, fever
Working assessment	Influenza
Past medical history	None
Medications	None
Physical Assessment	
GCS	15
Pulse	132
BP	104/64 mmHg
R	30
PaO ₂ /Fi O ₂	405 mmHg
Labs	
WBC count	28 cell/mm ²
Hemoglobin	15 g/dL
Platelets	260 x 10 ³ μ L
Bilirubin	1.0 mg/dL
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Imaging	
CXR	Normal

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Past medical history	Hypertension
Medications	Hydrochlorothiazide
Physical Assessment	
GCS	14
Pulse	120
BP	90/70 mmHg Dop <5
R	30
PaO ₂ /Fi O ₂	405 mmHg
Labs	
WBC count	26 cell/mm ²
Hemoglobin	13.8 g/dL
Platelets	140 x 10 ³ μL
Bilirubin	1.0 mg/dL
Creatinin	2.0 mg/dL
Imaging	
CXR	Bilateral patchy infiltrates

Multi-principled Critical Care Resource Allocation Score (MCCRAS)								
PRINCIPLE	RATIONALE	POTENTIAL SCORE						ROW SCORE
		0	1	2	3	4	5	
Save the most lives	Best prognosis for short term survival SOFA score	SOFA 5 or less	SOFA 6-9	SOFA 10-13	SOFA 14-17	SOFA 18-21	SOFA 22-24	_____
Opportunity to live through phases of life	Priority to those who have not lived through life's stages Age in years	*Age 0-12	Age 13-20	Age 21-40	Age 41-60	Age 61-80	Age 81 or greater	_____
Maximizing most life-years	Best prognosis for long-term survival Comorbidities	No comorbid conditions	Likely limited impact on long-term survival	Likely moderate impact on long-term survival	Likely significant impact on long-term survival	Likely profound impact on long-term survival	Likely death within 1 year	_____
TOTAL SCORE Minimum total score = 0 Maximum total score = 15								_____

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Name	Loretta Lynn
Age	55
Gender	F
Weight	98 lbs
BMI	kg/m ²
Chief complaint	Cough, nausea, vomiting, fever
Working assessment	Influenza
Past medical history	Breast cancer with metastatic disease
Medications	MS Contin, Percocet
Physical Assessment	
GCS	5
Pulse	118
BP	90/60 mmHg Dop 6
R	30
PaO ₂ /Fi O ₂	140 mmHg intubated
Labs	
WBC count	40 cell/mm ²
Hemoglobin	10 g/dL
Platelets	48 x 10 ³ μL
Bilirubin	4.0 mg/dL
Creatinin	3.8 mg/dL
Imaging	
CXR	Bilateral patchy infiltrates

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Name	Elvis Presley
Age	12
Gender	M
Weight	75 lbs
BMI	kg/m ²
Chief complaint	Cough, nausea, vomiting, fever
Working assessment	Influenza
Past medical history	None
Medications	None
Physical Assessment	
GCS	15
Pulse	126
BP	98/60 mmHg
R	24
PaO ₂ /Fi O ₂	405 mmHg
Labs	
WBC count	22 cell/mm ²
Hemoglobin	15 g/dL
Platelets	300 x 10 ³ μL
Bilirubin	1.0 mg/dL
Creatinin	1.0 mg/dL
Imaging	
CXR	Normal

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Age	50
Gender	M
Weight	240 lbs
BMI	kg/m ²
Chief complaint	Cough, nausea, vomiting
Working assessment	Influenza
Past medical history	AFib, myocardial infarction, congestive heart failure NYHA II
Medications	Atenolol, warfarin, lisinopril
Physical Assessment	
GCS	14
Pulse	110 irr
BP	94/72 mmHg Dop 4
R	26
PaO ₂ /Fi O ₂	380 mmHg
Labs	
WBC count	24 cell/mm ²
Hemoglobin	12 g/dL
Platelets	150 x 10 ³ μL
Bilirubin	1.2 mg/dL
Creatinin	1.8 mg/dL
Imaging	
CXR	Small bilateral effusions

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PATIENT 5	
Name	Shirley MacLaine
Age	28
Gender	F
Weight	108 lbs
BMI	kg/m ²
Chief complaint	Cough, nausea, vomiting, fever
Working assessment	Influenza
Past medical history	Metastatic melanoma
Medications	MS Contin
Physical Assessment	
GCS	12
Pulse	130
BP	102/60 mmHg
R	28
PaO ₂ /Fi O ₂	405 mmHg
Labs	
WBC count	30 cell/mm ²
Hemoglobin	12 g/dL
Platelets	120 x 10 ³ μL
Bilirubin	1.2 mg/dL
Creatinin	2.0 mg/dL
Imaging	
CXR	Diffuse patchy infiltrates

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PATIENT 6	
Name	Jeannie C Riley
Age	82
Gender	F
Weight	120 lbs
BMI	kg/m ²
Chief complaint	Cough, nausea, vomiting, fever
Working assessment	Influenza
Past medical history	Chronic renal failure, hypertension
Medications	Hydrochlorothiazide
Physical Assessment	
GCS	12
Pulse	124
BP	80/40 mmHg Dop 8
R	28
PaO ₂ /Fi O ₂	240 mmHg
Labs	
WBC count	30 cell/mm ²
Hemoglobin	10.8 g/dL
Platelets	95 x 10 ³ μL
Bilirubin	2.0 mg/dL
Creatinin	3.6 mg/dL
Imaging	
CXR	Diffuse patchy infiltrates

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TABLE TOP EXERCISE

PATIENT 7	
Name	Tina Turner
Age	10
Gender	F
Weight	80 lbs
BMI	kg/m ²
Chief complaint	Cough, nausea, vomiting, fever
Working assessment	Influenza
Past medical history	None
Medications	None
Physical Assessment	
GCS	15
Pulse	124
BP	100/64 mmHg
R	24
PaO ₂ /Fi O ₂	405 mmHg
Labs	
WBC count	18 cell/mm ²
Hemoglobin	14 g/dL
Platelets	260 x 10 ³ μL
Bilirubin	1.0 mg/dL
Creatinin	1.0 mg/dL
Imaging	
CXR	Normal

Multi-principled Critical Care Resource Allocation Score (MCCRAS)								
PRINCIPLE	RATIONALE	POTENTIAL SCORE						ROW SCORE
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TABLE TOP EXERCISE

PATIENT 8	
Name	Lena Horne
Age	61
Gender	F
Weight	180 lbs
BMI	kg/m ²
Chief complaint	Cough, nausea, vomiting, fever
Working assessment	Influenza
Past medical history	Hypertension, diabetes mellitus, coronary artery disease
Medications	Atenolol, insulin, lisinopril
Physical Assessment	
GCS	14
Pulse	96
BP	88/64 mmHg Dop 5
R	24
PaO ₂ /Fi O ₂	340 mmHg
Labs	
WBC count	28 cell/mm ²
Hemoglobin	11.2 g/dL
Platelets	100 x 10 ³ μL
Bilirubin	2.0 mg/dL
Creatinin	2.0 mg/dL
Imaging	
CXR	Right middle lobe infiltrate

Multi-principled Critical Care Resource Allocation Score (MCCRAS)								
PRINCIPLE	RATIONALE	POTENTIAL SCORE						ROW SCORE
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TOTAL SCORE Minimum total score = 0 Maximum total score = 15								_____

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TABLE TOP EXERCISE

PATIENT 9	
Name	Frankie Valli
Age	8
Gender	M
Weight	60 lbs
BMI	kg/m ²
Chief complaint	Cough, nausea, vomiting, fever
Working assessment	Influenza
Past medical history	None
Medications	None
Physical Assessment	
GCS	5
Pulse	138
BP	60/40 mmHg Dop 14
R	28
PaO ₂ /Fi O ₂	140 mmHg intubated
Labs	
WBC count	30 cell/mm ²
Hemoglobin	13 g/dL
Platelets	50 x 10 ³ μL
Bilirubin	6.0 mg/dL
Creatinin	3.5 mg/dL
Imaging	
CXR	Intubated, right multilobar infiltrate

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PRINCIPLE	RATIONALE	POTENTIAL SCORE						ROW SCORE
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PATIENT 10	
Name	Ritchie Valens
Age	16
Gender	M
Weight	110 lbs
BMI	kg/m ²
Chief complaint	Cough, nausea, vomiting, fever
Working assessment	Influenza
Past medical history	None
Medications	None
Physical Assessment	
GCS	15
Pulse	132
BP	104/64 mmHg
R	30
PaO ₂ /Fi O ₂	405 mmHg
Labs	
WBC count	28 cell/mm ²
Hemoglobin	15 g/dL
Platelets	260 x 10 ³ μL
Bilirubin	1.0 mg/dL
Creatinin	1.0 mg/dL
Imaging	
CXR	Normal

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PATIENT 11	
Name	Ava Gardner
Age	30
Gender	F
Weight	180 lbs
BMI	kg/m ²
Chief complaint	Nausea, vomiting
Working assessment	Dehydrations, gravid
Past medical history	None, 24 weeks pregnant
Medications	Prenatal vitamins
Physical Assessment	
GCS	15
Pulse	120
BP	102/68 mmHg
R	18
PaO ₂ /Fi O ₂	405 mmHg
Labs	
WBC count	12 cell/mm ²
Hemoglobin	13 g/dL
Platelets	260 x 10 ³ μL
Bilirubin	1.0 mg/dL
Creatinin	1.0 mg/dL
Imaging	

Multi-principled Critical Care Resource Allocation Score (MCCRAS)								
PRINCIPLE	RATIONALE	POTENTIAL SCORE						ROW SCORE
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TABLE TOP EXERCISE

PATIENT 12	
Name	Sammy Davis Jr
Age	68
Gender	M
Weight	140 lbs
BMI	kg/m ²
Chief complaint	Left leg swelling
Working assessment	Deep venous thrombosis
Past medical history	Remote oral cancer, post radical neck surgery, tracheostomy
Medications	Aspirin
Physical Assessment	
GCS	15
Pulse	88
BP	140/84 mmHg
R	16
PaO ₂ /Fi O ₂	405 mmHg
Labs	
WBC count	12,000 cell/mm ²
Hemoglobin	14 g/dL
Platelets	280 x 10 ³ μL
Bilirubin	1.0 mg/dL
Creatinin	1.0 mg/dL
Imaging	
Doppler	Left leg + deep femoral vein clot

Multi-principled Critical Care Resource Allocation Score (MCCRAS)								
PRINCIPLE	RATIONALE	POTENTIAL SCORE						ROW SCORE
		0	1	2	3	4	5	
Save the most lives	Best prognosis for short term survival SOFA score	SOFA 5 or less	SOFA 6-9	SOFA 10-13	SOFA 14-17	SOFA 18-21	SOFA 22-24	_____
Opportunity to live through phases of life	Priority to those who have not lived through life's stages Age in years	*Age 0-12	Age 13-20	Age 21-40	Age 41-60	Age 61-80	Age 81 or greater	_____
Maximizing most life-years	Best prognosis for long-term survival Comorbidities	No comorbid conditions	Likely limited impact on long-term survival	Likely moderate impact on long-term survival	Likely significant impact on long-term survival	Likely profound impact on long-term survival	Likely death within 1 year	_____
TOTAL SCORE Minimum total score = 0 Maximum total score = 15								_____

**Hospital Resource and Clinical Management Guidelines for Hospital Healthcare Providers
When Routine Critical Care Resources Are Not Available**

TABLE TOP EXERCISE

PATIENT 13	
Name	Nat King Cole
Age	16
Gender	M
Weight	130 lbs
BMI	kg/m ²
Chief complaint	Shortness of breath, fever
Working assessment	Acute chest syndrome
Past medical history	Sickle cell disease
Medications	MS Contin
Physical Assessment	
GCS	8
Pulse	88
BP	116/82 mmHg
R	14
PaO ₂ /Fi O ₂	180 mmHg intubated
Labs	
WBC count	32 cell/mm ²
Hemoglobin	7.6 g/dL
Platelets	140 x 10 ³ μL
Bilirubin	3.0 mg/dL
Creatinin	2.0 mg/dL
Imaging	
CXR	Right middle and left lower lobe infiltrates

Multi-principled Critical Care Resource Allocation Score (MCCRAS)								
PRINCIPLE	RATIONALE	POTENTIAL SCORE						ROW SCORE
		0	1	2	3	4	5	
Save the most lives	Best prognosis for short term survival SOFA score	SOFA 5 or less	SOFA 6-9	SOFA 10-13	SOFA 14-17	SOFA 18-21	SOFA 22-24	_____
Opportunity to live through phases of life	Priority to those who have not lived through life's stages Age in years	*Age 0-12	Age 13-20	Age 21-40	Age 41-60	Age 61-80	Age 81 or greater	_____
Maximizing most life-years	Best prognosis for long-term survival Comorbidities	No comorbid conditions	Likely limited impact on long-term survival	Likely moderate impact on long-term survival	Likely significant impact on long-term survival	Likely profound impact on long-term survival	Likely death within 1 year	_____
TOTAL SCORE Minimum total score = 0 Maximum total score = 15								_____

**Hospital Resource and Clinical Management Guidelines for Hospital Healthcare Providers
When Routine Critical Care Resources Are Not Available**

TABLE TOP EXERCISE

PATIENT 14	
Name	Tammy Wynette
Age	84
Gender	F
Weight	140 lbs
BMI	kg/m ²
Chief complaint	Cough, nausea, vomiting, fever
Working assessment	Influenza
Past medical history	Hypertension, atrial fibrillation, transient ischemic attack
Medications	Aspirin, hydrochlorothiazide, metoprolol
Physical Assessment	
GCS	6
Pulse	128 irr
BP	98/70 mmHg Dop 8
R	30
PaO ₂ /Fi O ₂	88 mmHg intubated
Labs	
WBC count	28 cell/mm ²
Hemoglobin	11.6 g/dL
Platelets	140 x 10 ³ μL
Bilirubin	1.2 mg/dL
Creatinin	3.2 mg/dL
Imaging	
CXR	Intubated, bilateral patchy infiltrates

Multi-principled Critical Care Resource Allocation Score (MCCRAS)								
PRINCIPLE	RATIONALE	POTENTIAL SCORE						ROW SCORE
		0	1	2	3	4	5	
Save the most lives	Best prognosis for short term survival SOFA score	SOFA 5 or less	SOFA 6-9	SOFA 10-13	SOFA 14-17	SOFA 18-21	SOFA 22-24	_____
Opportunity to live through phases of life	Priority to those who have not lived through life's stages Age in years	*Age 0-12	Age 13-20	Age 21-40	Age 41-60	Age 61-80	Age 81 or greater	_____
Maximizing most life-years	Best prognosis for long-term survival Comorbidities	No comorbid conditions	Likely limited impact on long-term survival	Likely moderate impact on long-term survival	Likely significant impact on long-term survival	Likely profound impact on long-term survival	Likely death within 1 year	_____
TOTAL SCORE Minimum total score = 0 Maximum total score = 15								_____

**Hospital Resource and Clinical Management Guidelines for Hospital Healthcare Providers
When Routine Critical Care Resources Are Not Available**

TABLE TOP EXERCISE

PATIENT 15	
Name	Johnny Cash
Age	64
Gender	M
Weight	120 lbs
BMI	kg/m ²
Chief complaint	Motor vehicle crash
Working assessment	Multiple trauma
Past medical history	Liver transplant
Medications	Unknown
Physical Assessment	
GCS	4
Pulse	108
BP	100/88 mmHg
R	12
PaO ₂ /Fi O ₂	180 mmHg intubated
Labs	
WBC count	14 cell/mm ²
Hemoglobin	10 g/dL
Platelets	40 x 10 ³ μL
Bilirubin	8.0 mg/dL
Creatinin	3.8 mg/dL
Imaging	
CT abdomen	Large hematoma spleen and liver
CT head	Contusion left parietal lobe

Multi-principled Critical Care Resource Allocation Score (MCCRAS)								
PRINCIPLE	RATIONALE	POTENTIAL SCORE						ROW SCORE
		0	1	2	3	4	5	
Save the most lives	Best prognosis for short term survival SOFA score	SOFA 5 or less	SOFA 6-9	SOFA 10-13	SOFA 14-17	SOFA 18-21	SOFA 22-24	_____
Opportunity to live through phases of life	Priority to those who have not lived through life's stages Age in years	*Age 0-12	Age 13-20	Age 21-40	Age 41-60	Age 61-80	Age 81 or greater	_____
Maximizing most life-years	Best prognosis for long-term survival Comorbidities	No comorbid conditions	Likely limited impact on long-term survival	Likely moderate impact on long-term survival	Likely significant impact on long-term survival	Likely profound impact on long-term survival	Likely death within 1 year	_____
TOTAL SCORE Minimum total score = 0 Maximum total score = 15								_____

**Hospital Resource and Clinical Management Guidelines for Hospital Healthcare Providers
When Routine Critical Care Resources Are Not Available**

TABLE TOP EXERCISE

PATIENT 16	
Name	Dolly Parton
Age	88
Gender	F
Weight	195 lbs
BMI	kg/m ²
Chief complaint	Altered mental status
Working assessment	Diabetic ketoacidosis
Past medical history	Diabetes, hypertension, coronary artery disease, AMI, CHF
Medications	Insulin, aspirin, others unknown
Physical Assessment	
GCS	3
Pulse	130
BP	88/64 mmHg Dop 5
R	16
PaO ₂ /Fi O ₂	98 mmHg intubated
Labs	
WBC count	20 cell/mm ²
Hemoglobin	10 g/dL
Platelets	60 x 10 ³ μL
Bilirubin	4.0 mg/dL
Creatinin	8.0 mg/dL
Imaging	
CXR	Intubated, left lower lobe infiltrate, aspiration

Multi-principled Critical Care Resource Allocation Score (MCCRAS)								
PRINCIPLE	RATIONALE	POTENTIAL SCORE						ROW SCORE
		0	1	2	3	4	5	
Save the most lives	Best prognosis for short term survival SOFA score	SOFA 5 or less	SOFA 6-9	SOFA 10-13	SOFA 14-17	SOFA 18-21	SOFA 22-24	_____
Opportunity to live through phases of life	Priority to those who have not lived through life's stages Age in years	*Age 0-12	Age 13-20	Age 21-40	Age 41-60	Age 61-80	Age 81 or greater	_____
Maximizing most life-years	Best prognosis for long-term survival Comorbidities	No comorbid conditions	Likely limited impact on long-term survival	Likely moderate impact on long-term survival	Likely significant impact on long-term survival	Likely profound impact on long-term survival	Likely death within 1 year	_____
TOTAL SCORE Minimum total score = 0 Maximum total score = 15								_____

**Hospital Resource and Clinical Management Guidelines for Hospital Healthcare Providers
When Routine Critical Care Resources Are Not Available**

TABLE TOP EXERCISE

PATIENT 17	
Name	Johnny Mathis
Age	28
Gender	M
Weight	150 lbs
BMI	kg/m ²
Chief complaint	Left sided weakness
Working assessment	Cerebral vascular accident
Past medical history	Sickle cell disease
Medications	Percocet
Physical Assessment	
GCS	14
Pulse	108
BP	140/88 mmHg
R	14
PaO ₂ /Fi O ₂	405 mmHg
Labs	
WBC count	12 cell/mm ²
Hemoglobin	8.2 g/dL
Platelets	140 x 10 ³ μL
Bilirubin	3.0 mg/dL
Creatinin	1.6 mg/dL
Imaging	
CT head	Ischemia right temporal lobe

Multi-principled Critical Care Resource Allocation Score (MCCRAS)								
PRINCIPLE	RATIONALE	POTENTIAL SCORE						ROW SCORE
		0	1	2	3	4	5	
Save the most lives	Best prognosis for short term survival SOFA score	SOFA 5 or less	SOFA 6-9	SOFA 10-13	SOFA 14-17	SOFA 18-21	SOFA 22-24	_____
Opportunity to live through phases of life	Priority to those who have not lived through life's stages Age in years	*Age 0-12	Age 13-20	Age 21-40	Age 41-60	Age 61-80	Age 81 or greater	_____
Maximizing most life-years	Best prognosis for long-term survival Comorbidities	No comorbid conditions	Likely limited impact on long-term survival	Likely moderate impact on long-term survival	Likely significant impact on long-term survival	Likely profound impact on long-term survival	Likely death within 1 year	_____
TOTAL SCORE Minimum total score = 0 Maximum total score = 15								_____

**Hospital Resource and Clinical Management Guidelines for Hospital Healthcare Providers
When Routine Critical Care Resources Are Not Available**

TABLE TOP EXERCISE

PATIENT 18	
Name	Janis Joplin
Age	11
Gender	F
Weight	76 lbs
BMI	kg/m ²
Chief complaint	Shortness of breath, fever
Working assessment	Pneumonia
Past medical history	Asthma
Medications	Prednisone, Ventolin, Singulair
Physical Assessment	
GCS	14
Pulse	160
BP	100/76 mmHg
R	30
PaO ₂ /Fi O ₂	285 mmHg
Labs	
WBC count	28 cell/mm ²
Hemoglobin	14 g/dL
Platelets	240 x 10 ³ μL
Bilirubin	1.0 mg/dL
Creatinin	1.2 mg/dL
Imaging	
CXR	Right upper lobe infiltrate

Multi-principled Critical Care Resource Allocation Score (MCCRAS)								
PRINCIPLE	RATIONALE	POTENTIAL SCORE						ROW SCORE
		0	1	2	3	4	5	
Save the most lives	Best prognosis for short term survival SOFA score	SOFA 5 or less	SOFA 6-9	SOFA 10-13	SOFA 14-17	SOFA 18-21	SOFA 22-24	_____
Opportunity to live through phases of life	Priority to those who have not lived through life's stages Age in years	*Age 0-12	Age 13-20	Age 21-40	Age 41-60	Age 61-80	Age 81 or greater	_____
Maximizing most life-years	Best prognosis for long-term survival Comorbidities	No comorbid conditions	Likely limited impact on long-term survival	Likely moderate impact on long-term survival	Likely significant impact on long-term survival	Likely profound impact on long-term survival	Likely death within 1 year	_____
TOTAL SCORE Minimum total score = 0 Maximum total score = 15								_____

**Hospital Resource and Clinical Management Guidelines for Hospital Healthcare Providers
When Routine Critical Care Resources Are Not Available**

TABLE TOP EXERCISE

PATIENT 19	
Name	Chuck Berry
Age	22
Gender	M
Weight	155 lbs
BMI	kg/m ²
Chief complaint	Cough, nausea, vomiting, fever
Working assessment	Influenza
Past medical history	None
Medications	None
Physical Assessment	
GCS	15
Pulse	128
BP	100/84 mmHg
R	32
PaO ₂ /Fi O ₂	405 mmHg
Labs	
WBC count	28 cell/mm ²
Hemoglobin	14.2 g/dL
Platelets	200 x 10 ³ μL
Bilirubin	1.0 mg/dL
Creatinin	1.0 mg/dL
Imaging	
CXR	Normal

Multi-principled Critical Care Resource Allocation Score (MCCRAS)								
PRINCIPLE	RATIONALE	POTENTIAL SCORE						ROW SCORE
		0	1	2	3	4	5	
Save the most lives	Best prognosis for short term survival SOFA score	SOFA 5 or less	SOFA 6-9	SOFA 10-13	SOFA 14-17	SOFA 18-21	SOFA 22-24	_____
Opportunity to live through phases of life	Priority to those who have not lived through life's stages Age in years	*Age 0-12	Age 13-20	Age 21-40	Age 41-60	Age 61-80	Age 81 or greater	_____
Maximizing most life-years	Best prognosis for long-term survival Comorbidities	No comorbid conditions	Likely limited impact on long-term survival	Likely moderate impact on long-term survival	Likely significant impact on long-term survival	Likely profound impact on long-term survival	Likely death within 1 year	_____
TOTAL SCORE Minimum total score = 0 Maximum total score = 15								_____

**Hospital Resource and Clinical Management Guidelines for Hospital Healthcare Providers
When Routine Critical Care Resources Are Not Available**

TABLE TOP EXERCISE

PATIENT 20	
Name	Eddie Cochran
Age	17
Gender	M
Weight	135 lbs
BMI	kg/m ²
Chief complaint	Seizure
Working assessment	Status epilepticus
Past medical history	Seizure
Medications	Dilantin
Physical Assessment	
GCS	5
Pulse	108
BP	110/60 mmHg
R	16
PaO ₂ /Fi O ₂	340 mmHg intubated
Labs	
WBC count	18 cell/mm ²
Hemoglobin	15 g/dL
Platelets	295 x 10 ³ μL
Bilirubin	1.0 mg/dL
Creatinin	1.2 mg/dL
Imaging	
CT head	Normal
CXR	Normal, intubated

Multi-principled Critical Care Resource Allocation Score (MCCRAS)								
PRINCIPLE	RATIONALE	POTENTIAL SCORE						ROW SCORE
		0	1	2	3	4	5	
Save the most lives	Best prognosis for short term survival SOFA score	SOFA 5 or less	SOFA 6-9	SOFA 10-13	SOFA 14-17	SOFA 18-21	SOFA 22-24	_____
Opportunity to live through phases of life	Priority to those who have not lived through life's stages Age in years	*Age 0-12	Age 13-20	Age 21-40	Age 41-60	Age 61-80	Age 81 or greater	_____
Maximizing most life-years	Best prognosis for long-term survival Comorbidities	No comorbid conditions	Likely limited impact on long-term survival	Likely moderate impact on long-term survival	Likely significant impact on long-term survival	Likely profound impact on long-term survival	Likely death within 1 year	_____
TOTAL SCORE Minimum total score = 0 Maximum total score = 15								_____

**Hospital Resource and Clinical Management Guidelines for Hospital Healthcare Providers
When Routine Critical Care Resources Are Not Available**

TABLE TOP EXERCISE

PATIENT 21	
Name	Frank Sinatra
Age	39
Gender	M
Weight	160 lbs
BMI	kg/m ²
Chief complaint	Chest pain
Working assessment	Acute myocardial infarction
Past medical history	Asthma, cocaine use
Medications	Albuterol
Physical Assessment	
GCS	14
Pulse	96
BP	68/48 mmHg
R	20
PaO ₂ /Fi O ₂	405 mmHg
Labs	
WBC count	14 cell/mm ²
Hemoglobin	14 g/dL
Platelets	240 x 10 ³ μL
Bilirubin	1.0 mg/dL
Creatinin	1.6 mg/dL
Imaging	
EKG	Inferior wall myocardial infarction

Multi-principled Critical Care Resource Allocation Score (MCCRAS)								
PRINCIPLE	RATIONALE	POTENTIAL SCORE						ROW SCORE
		0	1	2	3	4	5	
Save the most lives	Best prognosis for short term survival SOFA score	SOFA 5 or less	SOFA 6-9	SOFA 10-13	SOFA 14-17	SOFA 18-21	SOFA 22-24	_____
Opportunity to live through phases of life	Priority to those who have not lived through life's stages Age in years	*Age 0-12	Age 13-20	Age 21-40	Age 41-60	Age 61-80	Age 81 or greater	_____
Maximizing most life-years	Best prognosis for long-term survival Comorbidities	No comorbid conditions	Likely limited impact on long-term survival	Likely moderate impact on long-term survival	Likely significant impact on long-term survival	Likely profound impact on long-term survival	Likely death within 1 year	_____
TOTAL SCORE Minimum total score = 0 Maximum total score = 15								_____

**Hospital Resource and Clinical Management Guidelines for Hospital Healthcare Providers
When Routine Critical Care Resources Are Not Available**

TABLE TOP EXERCISE

PATIENT 22	
Name	Marilyn Monroe
Age	42
Gender	F
Weight	220 lbs
BMI	kg/m ²
Chief complaint	Depression
Working assessment	Tylenol ingestion
Past medical history	Hypertension, ingestion, chronic renal failure
Medications	"Stopped taking"
Physical Assessment	
GCS	14
Pulse	120
BP	102/74 mmHg
R	18
PaO ₂ /Fi O ₂	405 mmHg
Labs	
WBC count	14 cell/mm ²
Hemoglobin	10 g/dL
Platelets	140 x 10 ³ μL
Bilirubin	14 mg/dL
Creatinin	4.8 mg/dL
Imaging	

Multi-principled Critical Care Resource Allocation Score (MCCRAS)								
PRINCIPLE	RATIONALE	POTENTIAL SCORE						ROW SCORE
		0	1	2	3	4	5	
Save the most lives	Best prognosis for short term survival SOFA score	SOFA 5 or less	SOFA 6-9	SOFA 10-13	SOFA 14-17	SOFA 18-21	SOFA 22-24	_____
Opportunity to live through phases of life	Priority to those who have not lived through life's stages Age in years	*Age 0-12	Age 13-20	Age 21-40	Age 41-60	Age 61-80	Age 81 or greater	_____
Maximizing most life-years	Best prognosis for long-term survival Comorbidities	No comorbid conditions	Likely limited impact on long-term survival	Likely moderate impact on long-term survival	Likely significant impact on long-term survival	Likely profound impact on long-term survival	Likely death within 1 year	_____
TOTAL SCORE Minimum total score = 0 Maximum total score = 15								_____

**Hospital Resource and Clinical Management Guidelines for Hospital Healthcare Providers
When Routine Critical Care Resources Are Not Available**

TABLE TOP EXERCISE

PATIENT 23	
Name	Dean Martin
Age	45
Gender	M
Weight	200 lbs
BMI	kg/m ²
Chief complaint	Cough, nausea, vomiting
Working assessment	Influenza
Past medical history	Hypertension, congestive heart failure
Medications	Lisinopril, metoprolol
Physical Assessment	
GCS	14
Pulse	98
BP	84/60 mmHg Dop 8
R	26
PaO ₂ /Fi O ₂	290 mmHg
Labs	
WBC count	22 cell/mm ²
Hemoglobin	14 g/dL
Platelets	300 x 10 ³ μL
Bilirubin	1.0 mg/dL
Creatinin	1.5 mg/dL
Imaging	
CXR	Right lower lobe infiltrate

Multi-principled Critical Care Resource Allocation Score (MCCRAS)								
PRINCIPLE	RATIONALE	POTENTIAL SCORE						ROW SCORE
		0	1	2	3	4	5	
Save the most lives	Best prognosis for short term survival SOFA score	SOFA 5 or less	SOFA 6-9	SOFA 10-13	SOFA 14-17	SOFA 18-21	SOFA 22-24	_____
Opportunity to live through phases of life	Priority to those who have not lived through life's stages Age in years	*Age 0-12	Age 13-20	Age 21-40	Age 41-60	Age 61-80	Age 81 or greater	_____
Maximizing most life-years	Best prognosis for long-term survival Comorbidities	No comorbid conditions	Likely limited impact on long-term survival	Likely moderate impact on long-term survival	Likely significant impact on long-term survival	Likely profound impact on long-term survival	Likely death within 1 year	_____
TOTAL SCORE Minimum total score = 0 Maximum total score = 15								_____

**Hospital Resource and Clinical Management Guidelines for Hospital Healthcare Providers
When Routine Critical Care Resources Are Not Available**

TABLE TOP EXERCISE

PATIENT 24	
Name	Cass Elliot
Age	17
Gender	F
Weight	120 lbs
BMI	kg/m ²
Chief complaint	Cough, nausea, vomiting, fever
Working assessment	Influenza
Past medical history	None
Medications	Tylenol
Physical Assessment	
GCS	15
Pulse	128
BP	108/70 mmHg
R	28
PaO ₂ /Fi O ₂	405 mmHg
Labs	
WBC count	20 cell/mm ²
Hemoglobin	15 g/dL
Platelets	265 x 10 ³ μL
Bilirubin	1 mg/dL
Creatinin	0.9 mg/dL
Imaging	
CXR	Normal

Multi-principled Critical Care Resource Allocation Score (MCCRAS)								
PRINCIPLE	RATIONALE	POTENTIAL SCORE						ROW SCORE
		0	1	2	3	4	5	
Save the most lives	Best prognosis for short term survival SOFA score	SOFA 5 or less	SOFA 6-9	SOFA 10-13	SOFA 14-17	SOFA 18-21	SOFA 22-24	_____
Opportunity to live through phases of life	Priority to those who have not lived through life's stages Age in years	*Age 0-12	Age 13-20	Age 21-40	Age 41-60	Age 61-80	Age 81 or greater	_____
Maximizing most life-years	Best prognosis for long-term survival Comorbidities	No comorbid conditions	Likely limited impact on long-term survival	Likely moderate impact on long-term survival	Likely significant impact on long-term survival	Likely profound impact on long-term survival	Likely death within 1 year	_____
TOTAL SCORE Minimum total score = 0 Maximum total score = 15								_____

**Hospital Resource and Clinical Management Guidelines for Hospital Healthcare Providers
When Routine Critical Care Resources Are Not Available**

TABLE TOP EXERCISE

PATIENT 25	
Name	Judy Garland
Age	10
Gender	F
Weight	60 lbs
BMI	kg/m ²
Chief complaint	Vomiting
Working assessment	Dehydration, bowel obstruction
Past medical history	Cerebral palsy, trach, vent dependent, seizure
Medications	Zantac, Baclofen, Dilantin
Physical Assessment	
GCS	8
Pulse	138
BP	90/60 mmHg Dop 8
R	32
PaO ₂ /Fi O ₂	88 mmHg intubated
Labs	
WBC count	36 cell/mm ²
Hemoglobin	13 g/dL
Platelets	140 x 10 ³ μL
Bilirubin	6.0 mg/dL
Creatinin	6.1 mg/dL
Imaging	
CXR	Trach, right lower lobe infiltrate, aspiration
CT abdomen	Small bowel obstruction

Multi-principled Critical Care Resource Allocation Score (MCCRAS)								
PRINCIPLE	RATIONALE	POTENTIAL SCORE						ROW SCORE
		0	1	2	3	4	5	
Save the most lives	Best prognosis for short term survival SOFA score	SOFA 5 or less	SOFA 6-9	SOFA 10-13	SOFA 14-17	SOFA 18-21	SOFA 22-24	_____
Opportunity to live through phases of life	Priority to those who have not lived through life's stages Age in years	*Age 0-12	Age 13-20	Age 21-40	Age 41-60	Age 61-80	Age 81 or greater	_____
Maximizing most life-years	Best prognosis for long-term survival Comorbidities	No comorbid conditions	Likely limited impact on long-term survival	Likely moderate impact on long-term survival	Likely significant impact on long-term survival	Likely profound impact on long-term survival	Likely death within 1 year	_____
TOTAL SCORE Minimum total score = 0 Maximum total score = 15								_____

**Hospital Resource and Clinical Management Guidelines for Hospital Healthcare Providers
When Routine Critical Care Resources Are Not Available**

TABLE TOP EXERCISE

PATIENT 26	
Name	Carmen Miranda
Age	42
Gender	F
Weight	215 lbs
BMI	kg/m ²
Chief complaint	Abdominal pain, nausea, vomiting
Working assessment	Gravid, eclampsia
Past medical history	27 weeks pregnant
Medications	None
Physical Assessment	
GCS	14
Pulse	106
BP	88/64 mmHg
R	18
PaO ₂ /Fi O ₂	405 mmHg
Labs	
WBC count	18 cell/mm ²
Hemoglobin	10 g/dL
Platelets	40 x 10 ³ μL
Bilirubin	9.0 mg/dL
Creatinin	6.0 mg/dL
Imaging	

Multi-principled Critical Care Resource Allocation Score (MCCRAS)								
PRINCIPLE	RATIONALE	POTENTIAL SCORE						ROW SCORE
		0	1	2	3	4	5	
Save the most lives	Best prognosis for short term survival SOFA score	SOFA 5 or less	SOFA 6-9	SOFA 10-13	SOFA 14-17	SOFA 18-21	SOFA 22-24	_____
Opportunity to live through phases of life	Priority to those who have not lived through life's stages Age in years	*Age 0-12	Age 13-20	Age 21-40	Age 41-60	Age 61-80	Age 81 or greater	_____
Maximizing most life-years	Best prognosis for long-term survival Comorbidities	No comorbid conditions	Likely limited impact on long-term survival	Likely moderate impact on long-term survival	Likely significant impact on long-term survival	Likely profound impact on long-term survival	Likely death within 1 year	_____
TOTAL SCORE Minimum total score = 0 Maximum total score = 15								_____

**Hospital Resource and Clinical Management Guidelines for Hospital Healthcare Providers
When Routine Critical Care Resources Are Not Available**

TABLE TOP EXERCISE

PATIENT 27	
Name	Ella Fitzgerald
Age	72
Gender	F
Weight	150 lbs
BMI	kg/m ²
Chief complaint	Fever
Working assessment	Urosepsis
Past medical history	Cerebral vascular accident with left sided paralysis
Medications	Unknown
Physical Assessment	
GCS	12
Pulse	110
BP	98/60 mmHg
R	18
PaO ₂ /Fi O ₂	405 mmHg
Labs	
WBC count	30 cell/mm ²
Hemoglobin	12 g/dL
Platelets	140 x 10 ³ μL
Bilirubin	1.0 mg/dL
Creatinin	1.6 mg/dL
Imaging	

Multi-principled Critical Care Resource Allocation Score (MCCRAS)								
PRINCIPLE	RATIONALE	POTENTIAL SCORE						ROW SCORE
		0	1	2	3	4	5	
Save the most lives	Best prognosis for short term survival SOFA score	SOFA 5 or less	SOFA 6-9	SOFA 10-13	SOFA 14-17	SOFA 18-21	SOFA 22-24	_____
Opportunity to live through phases of life	Priority to those who have not lived through life's stages Age in years	*Age 0-12	Age 13-20	Age 21-40	Age 41-60	Age 61-80	Age 81 or greater	_____
Maximizing most life-years	Best prognosis for long-term survival Comorbidities	No comorbid conditions	Likely limited impact on long-term survival	Likely moderate impact on long-term survival	Likely significant impact on long-term survival	Likely profound impact on long-term survival	Likely death within 1 year	_____
TOTAL SCORE Minimum total score = 0 Maximum total score = 15								_____

**Hospital Resource and Clinical Management Guidelines for Hospital Healthcare Providers
When Routine Critical Care Resources Are Not Available**

TABLE TOP EXERCISE

PATIENT 28	
Name	Roy Orbison
Age	66
Gender	M
Weight	200 lbs
BMI	kg/m ²
Chief complaint	Cough, nausea, vomiting, fever
Working assessment	Influenza
Past medical history	Cardiomyopathy, CHF, chronic renal failure
Medications	Unknown
Physical Assessment	
GCS	4
Pulse	120
BP	60/40 mmHg Dop 16
R	16
PaO ₂ /Fi O ₂	96 mmHg intubated
Labs	
WBC count	28 cell/mm ²
Hemoglobin	10.8 g/dL
Platelets	48 x 10 ³ μ L
Bilirubin	14 mg/dL
Creatinin	3.6 mg/dL
Imaging	
CXR	Intubated, bilateral patchy infiltrates

Multi-principled Critical Care Resource Allocation Score (MCCRAS)								
PRINCIPLE	RATIONALE	POTENTIAL SCORE						ROW SCORE
		0	1	2	3	4	5	
Save the most lives	Best prognosis for short term survival SOFA score	SOFA 5 or less	SOFA 6-9	SOFA 10-13	SOFA 14-17	SOFA 18-21	SOFA 22-24	_____
Opportunity to live through phases of life	Priority to those who have not lived through life's stages Age in years	*Age 0-12	Age 13-20	Age 21-40	Age 41-60	Age 61-80	Age 81 or greater	_____
Maximizing most life-years	Best prognosis for long-term survival Comorbidities	No comorbid conditions	Likely limited impact on long-term survival	Likely moderate impact on long-term survival	Likely significant impact on long-term survival	Likely profound impact on long-term survival	Likely death within 1 year	_____
TOTAL SCORE Minimum total score = 0 Maximum total score = 15								_____

**Hospital Resource and Clinical Management Guidelines for Hospital Healthcare Providers
When Routine Critical Care Resources Are Not Available**

TABLE TOP EXERCISE

PATIENT 29	
Name	Patsy Cline
Age	88
Gender	F
Weight	130 lbs
BMI	kg/m ²
Chief complaint	Altered mental status
Working assessment	Cerebral vascular accident
Past medical history	Hypertension
Medications	Lisinopril, aspirin
Physical Assessment	
GCS	4
Pulse	160
BP	198/120 mmHg
R	14
PaO ₂ /Fi O ₂	400 mmHg intubated
Labs	
WBC count	14 cell/mm ²
Hemoglobin	14 g/dL
Platelets	240 x 10 ³ μL
Bilirubin	1.0 mg/dL
Creatinin	1.1 mg/dL
Imaging	
CT head	Large intercranial hemorrhage with shift

Multi-principled Critical Care Resource Allocation Score (MCCRAS)								
PRINCIPLE	RATIONALE	POTENTIAL SCORE						ROW SCORE
		0	1	2	3	4	5	
Save the most lives	Best prognosis for short term survival SOFA score	SOFA 5 or less	SOFA 6-9	SOFA 10-13	SOFA 14-17	SOFA 18-21	SOFA 22-24	_____
Opportunity to live through phases of life	Priority to those who have not lived through life's stages Age in years	*Age 0-12	Age 13-20	Age 21-40	Age 41-60	Age 61-80	Age 81 or greater	_____
Maximizing most life-years	Best prognosis for long-term survival Comorbidities	No comorbid conditions	Likely limited impact on long-term survival	Likely moderate impact on long-term survival	Likely significant impact on long-term survival	Likely profound impact on long-term survival	Likely death within 1 year	_____
TOTAL SCORE Minimum total score = 0 Maximum total score = 15								_____

**Hospital Resource and Clinical Management Guidelines for Hospital Healthcare Providers
When Routine Critical Care Resources Are Not Available**

TABLE TOP EXERCISE

PATIENT 30	
Name	Bill Haley
Age	14
Gender	M
Weight	120 lbs
BMI	kg/m ²
Chief complaint	Struck by auto
Working assessment	Multiple trauma
Past medical history	None
Medications	None
Physical Assessment	
GCS	5
Pulse	108
BP	100/86 mmHg
R	16
PaO ₂ /Fi O ₂	200 mmHg intubated
Labs	
WBC count	14 cell/mm ²
Hemoglobin	12 g/dL
Platelets	40 x 10 ³ μL
Bilirubin	6.0 mg/dL
Creatinin	3.8 mg/dL
Imaging	
CXR	Intubated, pulmonary contusion
CT	Head: sm contusion L parietal, Abdo: spleen/liver hematoma

Multi-principled Critical Care Resource Allocation Score (MCCRAS)								
PRINCIPLE	RATIONALE	POTENTIAL SCORE						ROW SCORE
		0	1	2	3	4	5	
Save the most lives	Best prognosis for short term survival SOFA score	SOFA 5 or less	SOFA 6-9	SOFA 10-13	SOFA 14-17	SOFA 18-21	SOFA 22-24	_____
Opportunity to live through phases of life	Priority to those who have not lived through life's stages Age in years	*Age 0-12	Age 13-20	Age 21-40	Age 41-60	Age 61-80	Age 81 or greater	_____
Maximizing most life-years	Best prognosis for long-term survival Comorbidities	No comorbid conditions	Likely limited impact on long-term survival	Likely moderate impact on long-term survival	Likely significant impact on long-term survival	Likely profound impact on long-term survival	Likely death within 1 year	_____
TOTAL SCORE Minimum total score = 0 Maximum total score = 15								_____

Sequential Organ Failure Assessment (SOFA) Score						
VARIABLE	POTENTIAL SCORE					ROW SCORE
	0	1	2	3	4	
Glasgow Coma Score Use actual or if sedated, assumed score	15	13-14	10-12	6-9	5 or less	_____
Hypotension Adrenergic agents administered for at least 1 hour (µg/kg/min)	None	Mean Arterial BP less than 70 mm Hg	Dop 5 or less	Dop 6-15 or Epi/Norepi 0.1 or less	Dop greater than 15 or Epi/Norepi greater than 0.1	_____
PaO₂/FiO₂ mmHg	greater than 400	301-400	201-300	101-200 with respiratory support	100 or less with respiratory support	_____
Platelets x 10³/µL	greater than 150	101-150	51-100	21-50	20 or less	_____
Bilirubin (mg/dL)	less than 1.2	1.2-1.9	2.0-5.9	6.0-11.9	12 or greater	_____
Creatinine (mg/dL)	less than 1.2	1.2-1.9	2.0-3.4	3.5-4.9	5 or greater	_____
TOTAL SCORE Minimum total score = 0 Maximum total score = 24						_____

Glasgow Coma Score			
Criteria		Points	Subscore
Best Eye Response (4 possible points)	No eye opening	1	_____
	Open to pain	2	
	Open to verbal command	3	
	Open spontaneously	4	
Best Verbal Response (5 possible points)	No verbal response	1	_____
	Incomprehensible sounds	2	
	Inappropriate words	3	
	Disoriented	4	
	Oriented	5	
Best Motor Response (6 possible points)	No motor response	1	_____
	Extension to pain	2	
	Flexion to pain	3	
	Withdraws from pain	4	
	Localizes pain	5	
	Obeys commands	6	
Total Score (add 3 subscores; range 3 to 15):			_____

Revised Trauma Score				
Criteria	Score	Coded value	Weighting	Adjusted Score
Glasgow Coma Score	3	0	x 0.9368	_____
	4 to 5	1		
	6 to 8	2		
	9 to 12	3		
	13 to 16	4		
Systolic Blood Pressure (SBP)	0	0	x 0.7326	_____
	1 to 49	1		
	50 to 75	2		
	76 to 89	3		
	greater than 89	4		
Respiratory Rate (RR) in breaths per minute (BPM)	0	0	x 0.2908	_____
	1 to 5	1		
	6 to 9	2		
	greater than 29	3		
	10 to 29	4		
Revised Trauma Score calculation: (add 3 adjusted scores)				_____

**New York Heart Association (NYHA) Functional Classification System
For Congestive Heart Failure**

Class	Patient Symptoms
I (Mild)	Patients with cardiac disease but without resulting limitation of physical activity. Ordinary physical activity does not cause undue fatigue, palpitation, dyspnea or anginal pain.
II (Mild)	Patients with cardiac disease resulting in slight limitation of physical activity. They are comfortable at rest. Ordinary physical activity results in fatigue, palpitation, dyspnea or anginal pain
III (Moderate)	Patients with cardiac disease resulting in marked limitation of physical activity. They are comfortable at rest. Less than ordinary activity causes fatigue, palpitation, dyspnea or anginal pain.
IV (Severe)	Patients with cardiac disease resulting in inability to carry on any physical activity without discomfort. Symptoms of heart failure or the anginal syndrome may be present even at rest. If any physical activity is undertaken, discomfort increases.

Child-Pugh Score

Measure	1 point	2 points	3 points	Points Assigned
Bilirubin (total) μmol/L (mg/dL)	less than 34 (less than 2)	34-50 (2-3)	greater than 50 (greater than 3)	_____
Serum albumin (g/L)	greater than 35	28-35	less than 28	_____
INR	less than 1.7	1.71-2.20	greater than 2.20	_____
Ascites	None	Mild	Severe	_____
Hepatic encephalopathy	None	Grade I-II (or suppressed with medication)	Grade III-IV (or refractory)	_____
Total Score:				_____

Interpretation

Points	Class	One year survival
5-6	A	100%
7-9	B	81%
10-15	C	45%