

## APPENDIX

**Definitions of unexpected perioperative events as captured by the medical record system.**

1. Hypoxia	Clinically significant oxygen desaturation to < 90% requiring change in management
2. Failed intubation	Multiple attempts and eventual failure in the placement of a tracheal tube into the trachea
3. Dental injury	Injuries to the patient within 7 days of their anaesthetics that required dental consultation and led to a recommendation to repair, stabilise, or extract involved dentition or supporting structures
4. Laryngospasm	Airway obstruction due to uncontrolled muscular contraction of laryngeal cords requiring treatment
5. Bronchospasm	Clinically significant wheezing and decrease airway entry during anaesthesia due to bronchial smooth muscle contraction requiring treatment
6. Arrhythmia	New or worsening disturbance of heart rhythm requiring new treatment or a change in treatment
7. Hypertension	Increase in systolic pressure to > 200 mmHg or diastolic pressure to > 110 mmHg with new antihypertensive or change in treatment required
8. Hypotension	Decrease in systolic pressure < 90 mmHg with treatment required
9. Haemorrhage	Unanticipated bleeding from the surgery requiring blood transfusion
10. Hypothermia	Core body temperature (oesophagus, tympanic membrane) verified to be < 35 degrees Celsius
11. Nerve injury	Clinically significant motor and/or sensory impairment after general anaesthesia, peripheral nerve block, or neuroaxial block
12. Drug adverse reaction	Harm associated with the use of given medication at a normal dose
13. Equipment failure	Failure of medical equipment related to the conduct of anaesthesia potentially resulting or actually resulting in patient harm
14. Unplanned high dependency unit (HDU) admit	Unanticipated HDU admission for medical, surgical or anaesthetic reasons
15. Unplanned intensive care unit (ICU) admit	Unanticipated ICU admission for medical, surgical or anaesthetic reasons
16. Post-anaesthesia care unit (PACU) > 2 hours	<p>a. Postoperative nausea and vomiting (PONV) – PACU stay for longer than 2 hours due to severe PONV necessitating treatment</p> <p>b. Pain – PACU stay for longer than 2 hours due to severe pain or visual analogue pain score &gt; 7/10</p> <p>c. Sedation – PACU stay for longer than 2 hours due to patient sedation (drowsy and difficult to rouse)</p>