

## Appendix 1, Excerpt A

**Abbreviations:** Phys1-3: Physicians from internal medicine department, EDphys-1-2: Physicians working in the emergency department, EDnurse1-3: Nurses working in the emergency department, AN: Anaesthetist, NurseAN: Nurse anaesthetist.

**Transcript key:** X: word not audible, XX: words not audible, [words]<sup>2</sup>: overlapping speech (the numbers indicate the order of the nearby overlap), -: unfinished words or sentences, (.): micropause, (3): seconds pause, @: laughter.

**Situation:** Patient is < 40 years old. Indication for hospital admission: cardiac arrest. Cardiopulmonary resuscitation (CPR) was performed and return of spontaneous circulation (ROSC) occurred prior to hospital transport. The patient was unconscious and breathing inadequately at ED arrival. Team-members are separated in two “working-groups” during this phase of work; ED nurse 1, nurse anaesthetist, ED physician 1, and the anaesthetist are all involved in patient related practical tasks (ECG, suctioning, establishing an arterial line and sedation), while ED physician 1, physicians 1, 2, and 3 from internal medicine, and ED nurse 2 are standing next to the logging-desk. Physician 3 is standing in a small distance from the latter group answering his telephone.

### Part 1, before the anaesthetist’s involvement in the CT decision.

Utterance number	Speaker	Utterance	Speakers actions	Other actions
276	Phys3	Yes. He is going to have a head CT-scan down here now. Is he?	Stands next to Phys1 and looks at Phys2. Holds phone to ear.	
277	EDphys1	Yes.	Standing outside the video frame	Phys3 and EDphys2 looks in direction of EDphys1. Phys2 shakes her head.
278	Phys2	Is he?	Shakes head. Turns towards EDphys1.	
279	EDphys1	Don’t you think so?		
280	Phys2	Why? (1) [Get him up to the ICU. Get him up to the ICU.] <sup>4</sup>	Shakes head. Turns towards EDphys1.	Phys1 turns towards EDphys1 and nods.

281	Phys3	[No, he doesn't have any X indication XX] <sup>4</sup>	Talks on the telephone, turns and walks away from the bed.	
282	EDphys1	Well-		Phys1's eyes follow the conversation between EDphys1 and Phys2.
283	Phys2	Or-? Don't you think XX?	Walks backward towards EDphys1. Stands next to EDphys1.	
284	EDphys1	Are we- Are we [100 % sure that] <sup>5</sup> it is the heart?		
285	NurseAN	[X suction X X.] <sup>5</sup>	Works with the patient's endotracheal tube. Moves to the patient-monitor and fetches the suction device	
286	Phys2	Jaah 100 (.) [but ] <sup>6</sup>	Looks at Phys1.	EDnurse1 looks at display on the ECG device
287	EDphys1	[It] <sup>6</sup> isn't hypoxia -	Standing outside the video frame	Phys1 and Phys2 are standing together with EDphys1.

288	Phys2	Yes, but you have this and this. I don't know myself, but anyway that XX CT [already.] <sup>7</sup>	Standing at the edge of the image. Looks at EDphys1 and ((points)) twice at something lying on the logging desk	Phys1 looks at Phys2 and nods.
289	EDphys1	[But we] <sup>7</sup> we would [like to have a XX] <sup>8</sup>		NurseAN suction secretions from the patient's mouth. AN is positioned close to the patient's right wrist - tries to insert an arterial line.
290	EDnurse1 is commenting on carrying out the ECG-test			
291	Phys2	Not necessarily a clear suspicion of that. (1) [Not because we have any clear suspicion of what it is then, but-] <sup>9</sup>		
292 293	NurseAN informs AN about the patient's moving his arm and AN to decides to give the patient a sedative			
294	Phys2	You can [investigate but I XX up to the ICU myself.] <sup>11</sup>  Do you want to get him to CT-scanning?	Looks at Phys3.	Phys1 looks at Phys2 while she is talking. Then turns toward Phys3. Phys3 nods his head.
295	NurseAN asks for confirmation on AN's ordination			

296	Phys3	No. [I don't want] <sup>12</sup> to interfere in that decision at all.	Looks at Phys2.	
297	AN	[XX] <sup>12</sup>	Looks at NurseAN.	
<b>Part 2, after the anaesthetist's involvement in the CT-decision.</b>				
298	EDphys1	OK. Is it an indication for inducing X hypothermia [then to] <sup>13</sup> to do a CT of the brain?		
299	Phys2	[No.] <sup>13</sup>		
300	Phys3	[No.] <sup>13</sup>		
301	AN	No.	Straightens back, lets go of the patient's left hand, turns and walks towards Phys1, EDphys1, Phys2 and Phys3.	Phys2 outside the video-frame. Phys1, and Phys2 turn towards AN. Phys1 is nods.
302	Phys2	No (.) no. I -		
303	AN	It's more out of- If there's doubt about the diagnosis [X] <sup>14</sup>	Moves towards EDphys1 and Phys3.	
304	NurseAN	[It is bleeding] <sup>14</sup> in the mouth here.	Suctions secretion from the patient's mouth.	
305	Phys2	Sedated. Get him up to the ICU.	Looks at AN.	Phys1 and Phys3 look alternately at AN and Phys2.
306	AN	Yes, but X XX.	Looks at Phys2.	

307	Phys1	X[X] <sup>15</sup>	Stands facing EDphys1.	Phys3 stands facing EDphys1.
308	Phys2	[Yes.] <sup>15</sup> True, that is more important.	Looks at AN.	Phys1 nods and turns towards the bed
309	NurseAN	Blood in the tube.	Suctions secretion from the patient's mouth.	
310	AN	But there's no rush to get him up to the ICU either.	Looks at Phys2.	EDphys2 looks at NurseAN. EDnurse1 is working with the ECG. The other team members are standing at the foot of the bed
311	Phys2	What?		
312	AN	There's no rush to get him [up to the ICU either] <sup>16</sup>	Looks at Phys2.	Phys3 leans forward towards AN while AN is speaking
313	EDnurse 1	[Out of paper.] <sup>16</sup>	Looks at ECG- machine.	
314	Phys2	[No.] <sup>16</sup> It's just- But is he awake X or isn't he. We're going to get him into hypothermia after all just get him up to the ICU. (2) If [you want to get him to CT then-] <sup>17</sup>	Looks at AN, Phys1 and Phys3.	AN is looks at Phys2 and nods while she is talking.
315	NurseAN	Did anyone hear that? [Is there anyone who heard] <sup>17</sup> [that there's blood in the tube?] <sup>18</sup>	Looks at AN.	

316	AN	[No but whether we should do a CT scan or not] <sup>18</sup> that's one thing. But there is no rush to get [X] <sup>19</sup>	Looks at Phys2.	
317	EDphys2	[Blood in the tube.] <sup>19</sup>	Looks at EDphys1.	
318	Phys2	[No, it's not] <sup>19</sup> like you have to sprint up to the ICU [but XX] <sup>20</sup> is a CT scan necessary?	Takes a step towards AN and lifts up both hands as she speaks	EDnurse1 loads the ECG machine with paper
319	EDphys1	[What?] <sup>20</sup>		
320	EDphys2	[Blood in the tube.] <sup>20</sup>	Looks at EDphys1 and points back towards the patient with his thumb	AN walks up to NurseAN
321	EDphys1	[Blood in the tube.] <sup>20</sup>		
322	NurseAN	[Look NAME (AN)] <sup>21</sup>	Looks at AN and continues suctioning	
323	Phys3	[What a CT can tell us] <sup>21</sup> is whether there are major signs of anoxic brain injury. And maybe whether there's an additional [component such as when -] <sup>22</sup>	Alternates between looking at Phys2 and at the patient.	
324	Phys1	[Blood gas. Has that been taken] <sup>22</sup> then?	Looks at EDphys2.	
325	EDphys2	No.		
326	Phys3	[XX] <sup>23</sup>	Looks at EDphys2 and then turns toward Phys1.	
327	Phys2	XX blood gas [X]. <sup>23</sup>	Shakes head slightly.	

328	Phys1	It would have been helpful to have a blood gas-		
329	EDnurse 1	[He] <sup>23</sup> is reacting a bit with his (.) hand here you see.		
330	EDphys2	Yes [X. Could you get] <sup>24</sup> [XX?] <sup>25</sup>	Looks at Phys1. Points towards the emergency table.	Phys1 goes to the emergency table and gets equipment for blood gas testing which he gives to EDphys2.
331	AN	[Isn't there any Propofol left?] <sup>24</sup> (2) [Give XX at least.] <sup>25</sup> (1) Have you got any Propofol then? Don't [we have anything?] <sup>26</sup> (.) [Have you got Propofol? X] <sup>27</sup>	Stands beside the anaesthesia table and looks at NurseAN.	
332	NurseAN	[What?] <sup>26</sup> (2) [It's over there] <sup>27</sup> [Over there on the table] <sup>28</sup>	Points towards the emergency table.	EDnurse1 takes out the Propofol syringe and hands it to NurseAN who passes it on to AN
333	Phys3	[X looks as though it's one of those-] <sup>24</sup> [One of those two.] <sup>25</sup> And if there's no (2) [risk of XX] <sup>26</sup> [that he's not cooled down so quickly-] <sup>27</sup>	Stands together with Phys2 at the left side of the bed.	
334	Phys2	[Yes but-] <sup>28</sup> (2) XX perhaps but that's exactly what is- Because he's not sedated at all (.) is he?		Phys3's telephone rings.

335	AN	[XX] <sup>29</sup>	Administers Propofol to the patient	
336	EDphys1	[No. Yes] <sup>29</sup> yes that is he has of course- was of course sedated during intubation then but [X-] <sup>30</sup>		
337	Phys2	[Yes yes] <sup>30</sup> but nothing more than that?		
338	NurseAN	Oh yes. [XX] <sup>31</sup> [XX] <sup>32</sup>	Looks downward at the suction catheter	
339	Phys3	[Hello.] <sup>31</sup>	Answers the telephone.	
340	EDphys1	[He is moving his extremities after all] <sup>31</sup>		
341	Phys2	[It doesn't matter] <sup>32</sup> because it doesn't mean anything		
342	Phys3	The answer is no. @ Thank you.	Answers the telephone. Stands next to Phys2.	
343	Phys2	But (.) XX make a decision. If we're going to get him to CT then we get him to CT. Not [XX] <sup>33</sup>	Shakes head. Looks out into the air.	
344	EDphys1	[Then we'll get] <sup>33</sup> that across the corridor here and then we'll go up.		
345	Phys3	What?	Looks at EDphys1.	
346	EDphys1	The alternative is to take the CT now here and then we'll take him up to the ICU.		AN is placing a gastrointestinal tube

347	Phys3	My recommendation is CT now if we can get it fast.		
348	EDnurse 3	Shall I go and check with CT now?	Standing outside the video frame.	
349	EDphys1	Yes.		