High Risk Clinical Indicators Checklist (check all that apply)*	
Respiratory	 Mean airway pressure >20 cm H₂0 Fi02>80% on positive pressure ventilation Pulmonary hypertension requiring iNO therapy Intubation/Extubation of known difficult airway
Circulatory	 Bleeding requiring >20 mL/kg pRBCs or whole blood within last 24 hours Hemodynamically significant arrhythmia within last 24 hours Severe cardiac dysfunction (EF <20% or A-V O2 difference of >40%) Use of any 2 vasoactive medications or single drug for shock (including dopamine > 5 or epi/norepi > 0.1 mcg/kg/min, any dose AVP/phenylephrine/dobutamine) Life threatening event requiring code/emergency response activation including cardiac arrest within last 24 hours ECMO decannulation and/or circuit failure within last 24 hours Post-operative Stage I/shunted palliation, truncus with IAA repair or neonate s/p tricuspid valve repositioning for Ebsteins within last 24 hours Open chest and/or closure of open chest within last 24 hours
Neurologic	$\hfill\square$ Elevated ICP requiring blood pressure augmentation to support CPP (sustained elevated ICP >20 cm H_20)
Metabolic	 Initiation of any extracorporeal circuit K >7.0, Mg < 1 , or iCa < 0.9 pH <7.10 Lactate > 10 or increase in lactate of >4/hour
High Risk Procedure	Intubation or procedural sedation for anterior mediastinal mass, developing tamponade physiology or heart failure
Provider Intuition	 Provider intuition (e.g., patient being prone or too unstable for routine daily care)
Other	\square Risk factor other than what is listed above. Describer further here:

*Any one or combination of risks may indicate that patient is at high risk for cardiopulmonary arrest. Other criteria may apply and confirmation should be made with patients' clinical management team.