

Research Question: In children aged from 0 days to 18 years, who are hospitalised with acute respiratory distress and require inter-facility transport, is noninvasive ventilation, effective and safe during transport?

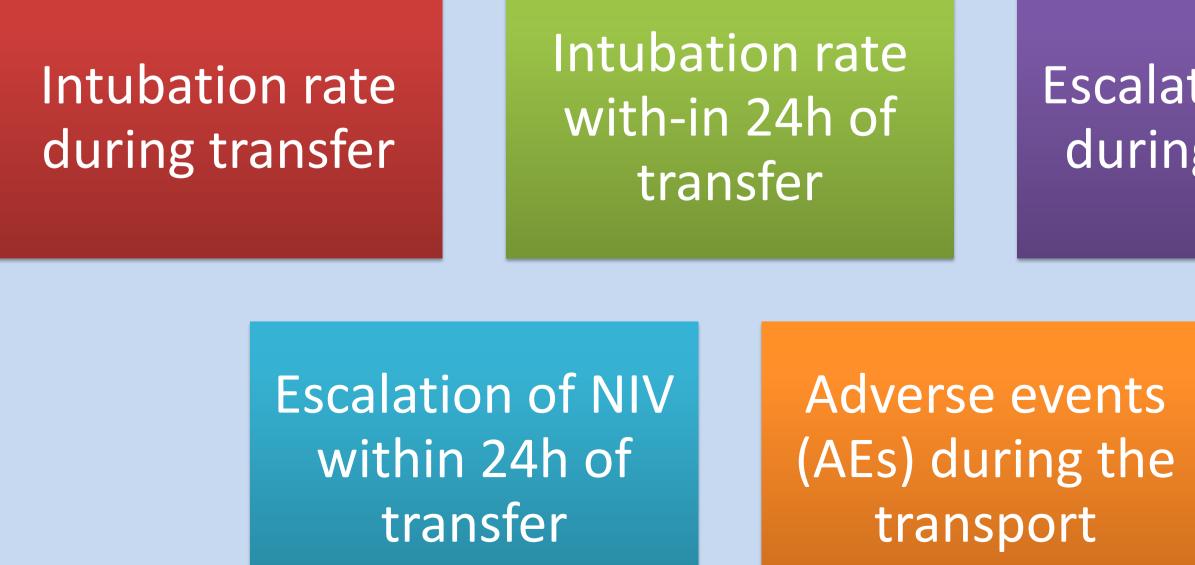
Figure 1: Systematic review methodology:

Search of databases MEDLINE, EMBASE, CENTRAL, African Index Medicus, Web of Science Citation Index and the World Health Organisation Trials Registry

> Keywords including: Non-invasive ventilation, high-flow nasal cannula (HFNC), nasal continuous positive airway pressure (CPAP), acute respiratory distress, infant, child

> > All identified studies reviewed independently by 2 reviewers for eligibility and quality. Data extracted independently by 2 reviewers

Figure 2: Primary efficacy and safety indicators



Non-invasive ventilation during paediatric & neonatal transport: A systematic review. Cheema, B, Rossouw, B & Welzel, T. Paediatric Critical Care Medicine (in print).



Escalation of NIV during transfer

Non-invasive ventilation during paediatric & neonatal transport: A systematic review

Results & discussion: Figure 3: Outcome of search

1268 records screened by title/abstract



29 full-text articles assessed for eligibility

intervention were identified in the search

Study ID (Number of participants in the study, N)	Intubation [or NIV escalation] ¹ during transport Number (%)	
Baird-2009 (N=31)	0/31	
Bomont-2006 (N=100)	0/100	
Fleming-2012 (N=51)	0/51 ³	
Jani-2014 (N=44)	0/44	
Millan-2017 (N=108)	1/108 (1%)	
Murray-2008 (N=207)	0/207	
Resnick-2010 (N=167)	0/167	
CPAP Total	1/708 (0.1%)	
Schlapbach-2014	[2/150 (1%)	
(N=150)	escalated to NIV during transport ⁶]	
HFNC Total	2/150 (1%)	
		ТС

Overall Total (CPAP + HFNC) 3/858 (0.4%)

