

Supplemental Digital Appendix 1

**Survey Instrument, From a Study of Attendings' and Fellows' Perceptions of Futile Treatment in the Intensive Care Unit, University of California, Los Angeles, December 2011–March 2012**

**Daily Patient Census: PHYSICIAN VERSION**

Date: \_\_\_\_\_

Unit: \_\_\_\_\_

Circle: Attending / Fellow / NP

Pager number \_\_\_\_\_

<b>PATIENT</b> <i>(Only answer for your patients. RA: Strike thru patients that are not under this clinician's care)</i>	<b>MRN</b>	<b>PATIENT RECEIVING FUTILE TREATMENT?                      IF LEFT BLANK, WILL BE PRESUMED "NO"</b>			<b>REASON WHY TREATMENT IS FUTILE:                      CHECK ALL THAT APPLY</b>						
		NO	PROBABLY	YES	1 Burdens grossly outweigh benefits	2 Will never survive outside of an ICU	3 Permanently unconscious	4 Treatment cannot achieve goal	5 Death is imminent	6 Other Reason (please write in)	7 Receiving futile treatment but in transition to palliative care

Supplemental Digital Table 1

**Matched Patient Sample: Reasons Listed for Assessment of Futile Treatment by Attending Critical Care Physicians Versus Critical Care Fellows, From a Study of Attendings' and Fellows' Perceptions of Futile Treatment in the Intensive Care Unit, University of California, Los Angeles, December 2011–March 2012**

Type or number of reasons	No. (%) patients	
Reason listed that treatment was futile	By attendings	By fellows
	(out of 62)	(out of 62)
Burdens grossly outweigh benefits	36 (58)	28 (45)
Will never survive outside of an ICU	21 (34) <sup>a</sup>	10 (16) <sup>a</sup>
Permanently unconscious	25 (40)	23 (37)
Treatment cannot achieve goal	30 (48) <sup>a</sup>	18 (29) <sup>a</sup>
Death is imminent	23 (37)	20 (32)
Patient non-adherent to treatment	0	0
Futile treatment on day transitioned to palliative care	11 (18)	8 (13)
Number of reasons listed <sup>b</sup>	By attending	By fellow
0	2 (3)	3 (5)
1	18 (29)	29 (47)
2	19 (31)	18 (29)
3	9 (14)	7 (11)
4 or more	14 (23)	5 (8)

Abbreviation: ICU indicates intensive care unit.

<sup>a</sup>  $P < .05$  for comparison between attendings and fellows.

<sup>b</sup>  $P = .015$  for comparison of number of reasons between attendings and fellows by mixed effects Poisson regression.

Supplemental Digital Table 2

**Matched Patient Sample: Attending Model: Average Marginal Difference in Probability of a Patient Being Perceived as Receiving Non-Futile Treatment, Probably Futile Treatment, and Futile Treatment, From a Study of Attendings' and Fellows' Perceptions of Futile Treatment in the Intensive Care Unit, University of California, Los Angeles, December 2011–March 2012<sup>a</sup>**

Characteristic	Non-futile treatment	Probably futile treatment	Futile treatment
<b>Patient age (per decade)</b>	<b>-2.88 (-4.61, -1.19)</b>	<b>1.32 (0.53, 2.15)</b>	<b>1.57 (0.60, 2.49)</b>
<b>Female patient</b>	<b>5.00 (0.02, 9.74)</b>	<b>-2.21 (-4.23, -0.01)</b>	<b>-2.79 (-5.56, 0.06)</b>
Patient race			
Asian	-0.19 (-9.07, 8.76)	-0.06 (-4.04, 3.83)	0.25 (-4.27, 5.54)
African-American	-5.79 (-14.22, 2.21)	2.30 (-0.93, 5.29)	3.49 (-1.36, 8.91)
Other	-1.49 (-11.54, 8.97)	0.50 (-4.26, 4.58)	0.99 (-4.72, 6.97)
Hispanic	0.75 (-5.86, 7.93)	-0.39 (-3.60, 2.66)	-0.37 (-4.10, 3.42)
Insurance			
<b>Medicaid</b>	<b>-10.48 (-21.39, -0.71)</b>	<b>3.97 (0.63, 7.46)</b>	<b>6.51 (-0.19, 13.79)</b>
Private	-2.16 (-11.51, 6.96)	0.79 (-3.29, 4.37)	1.37 (-3.74, 7.00)
HMO	-1.88 (-8.36, 4.11)	0.82 (-1.97, 3.53)	1.06 (-2.32, 4.71)
Uninsured	4.57 (-5.88, 15.01)	-2.39 (-7.81, 2.66)	-2.18 (-7.31, 3.36)
Residence > 20 miles (32.3 km) from hospital	-0.74 (-6.24, 4.91)	0.33 (-2.28, 2.74)	0.42 (-2.61, 3.59)
Source of admission			
Outpatient setting	-4.19 (-12.53, 4.27)	1.68 (-1.55, 5.14)	2.52 (-2.44, 7.68)
Transferred from outside hospital	2.20 (-4.71, 8.93)	-1.08 (-4.33, 2.10)	-1.12 (-4.79, 2.49)
<b>Transferred from SNF/LTAC</b>	<b>-29.57 (-44.28, -13.39)</b>	<b>6.95 (4.63, 9.38)</b>	<b>22.63 (7.57, 36.68)</b>
MS-DRG weight	0.10 (-0.32, 0.53)	-0.05 (-0.25, 0.14)	-0.06 (-0.28, 0.18)
<b>Hospital day of futility assessment (per day)</b>	<b>-0.20 (-0.30, -0.10)</b>	<b>0.09 (0.04, 0.14)</b>	<b>0.11 (0.05, 0.16)</b>
Physician years at UCLA	0.01 (-0.57, 0.61)	-0.00 (-0.28, 0.26)	-0.00 (-0.32, 0.31)

Female physician	-3.18 (-12.84, 7.00)	1.40 (-2.94, 5.61)	1.78 (-3.85, 7.50)
Physician service day			
Second	-0.47 (-2.97, 2.02)	0.20 (-0.89, 1.39)	0.26 (-1.10, 1.65)
Third	-1.94 (-4.81, 0.82)	0.85 (-0.35, 2.11)	1.09 (-0.52, 2.67)
<b>Fourth</b>	<b>-4.16 (-7.49, -1.13)</b>	<b>1.78 (0.45, 3.10)</b>	<b>2.38 (0.50, 4.30)</b>
<b>≥ Fifth</b>	<b>-3.76 (-6.23, -1.13)</b>	<b>1.71 (0.60, 2.99)</b>	<b>2.05 (0.61, 3.45)</b>
ICU			
Neuro-ICU	0.20 (-19.39, 19.76)	-0.27 (-7.76, 6.91)	0.07 (-12.18, 12.32)
<b>Cardiac care unit</b>	<b>17.13 (10.88, 22.64)</b>	<b>-9.44 (-12.60, -5.82)</b>	<b>-7.69 (-10.40, -4.91)</b>
Academic community	3.82 (-3.71, 10.50)	-1.90 (-5.39, 1.64)	-1.92 (-5.44, 1.84)
Hospital mixed-use ICU			
ICU is full	-1.11 (-2.92, 0.69)	0.50 (-0.36, 1.28)	0.61 (-0.40, 1.59)

Abbreviations: HMO indicates health maintenance organization; SNF, skilled nursing facility; LTAC; long-term acute care facility; ICU, intensive care unit; MS-DRG; Medicare Severity Diagnosis Related Group.

<sup>a</sup> Estimated average difference in percent probability are presented of not receiving futile treatment, receiving probably futile treatment, and receiving futile treatment for attendings using data matched to fellows. A positive percentage is more in a specific category than the reference group, a negative percentage less. Effects that were significant in the model are **bolded** ( $P < 0.05$ ). Parentheses give 95% confidence intervals. Reference for female is male, for race is white, for Hispanic is non-Hispanic, for insurance is Medicare, for source of admission is emergency room, for service day is first, and for ICU is the medical ICU. Total observations = 3,675, total patients = 713, total attendings = 31.

Supplemental Digital Table 3

**Matched Patient Sample: Fellow Model: Average Marginal Difference in Probability of a Patient Being Perceived as Receiving Non-Futile Treatment, Probably Futile Treatment, and Futile Treatment, From a Study of Attendings' and Fellows' Perceptions of Futile Treatment in the Intensive Care Unit, University of California, Los Angeles, December 2011–March 2012<sup>a</sup>**

Characteristic	Non-futile treatment	Probably futile treatment	Futile treatment
<b>Patient age (per decade)</b>	<b>-2.29 (-4.19, -0.42)</b>	<b>0.38 (0.07, 0.71)</b>	<b>1.91 (0.35, 3.50)</b>
Female patient	3.06 (-2.58, 8.64)	-0.50 (-1.37, 0.46)	-2.56 (-7.26, 2.18)
Patient race			
Asian	2.58 (-7.50, 12.33)	-0.55 (-2.32, 1.22)	-2.04 (-9.93, 6.34)
African-American	-3.25 (-12.57, 6.17)	0.38 (-0.94, 1.53)	2.87 (-5.01, 11.16)
Other	-4.66 (-16.79, 6.76)	0.51 (-1.02, 1.81)	4.14 (-5.44, 15.16)
Hispanic	5.96 (-1.81, 13.21)	-1.18 (-2.77, 0.36)	-4.78 (-10.85, 1.02)
Insurance			
Medicaid	-8.73 (-20.09, 2.37)	0.91 (-0.22, 1.83)	7.82 (-2.22, 18.28)
Private	5.43 (-4.79, 14.68)	-1.10 (-3.05, 0.82)	-4.33 (-12.22, 3.39)
HMO	0.55 (-6.76, 7.56)	-0.12 (-1.30, 1.06)	-0.44 (-6.14, 5.89)
Uninsured	8.53 (-3.39, 19.27)	-1.90 (-4.52, 0.78)	-6.63 (-14.58, 2.69)
Residence > 20 miles (32.3 km) from hospital	1.28 (-4.98, 7.98)	-0.20 (-1.20, 0.90)	-1.08 (-6.82, 4.09)
Source of admission			
Outpatient setting	-4.05 (-12.95, 4.25)	0.54 (-0.71, 1.62)	3.51 (-3.79, 11.10)
Transferred from outside hospital	-2.49 (-10.94, 5.95)	0.33 (-0.94, 1.54)	2.15 (-4.98, 9.38)
<b>Transferred from SNF/LTAC</b>	<b>-21.27 (-35.77, -7.30)</b>	<b>1.36 (0.50, 2.16)</b>	<b>19.91 (5.24, 33.69)</b>
<b>MS-DRG Weight</b>	<b>-0.52 (-0.97, -0.05)</b>	<b>0.09 (0.01, 0.16)</b>	<b>0.44 (0.05, 0.81)</b>
<b>Hospital day of futility assessment (per day)</b>	<b>-0.17 (-0.26, -0.08)</b>	<b>0.03 (0.01, 0.05)</b>	<b>0.14 (0.07, 0.22)</b>
Physician years at UCLA	-0.08 (-2.86, 2.29)	0.01 (-0.40, 0.46)	0.06 (-1.92, 2.37)

Female physician	6.18 (-8.45, 19.69)	-0.86 (-2.69, 1.20)	-5.33 (-17.27, 7.03)
Physician service day			
<b>Second</b>	<b>-3.63 (-6.49, -0.76)</b>	<b>0.53 (0.12, 0.93)</b>	<b>3.10 (0.70, 5.66)</b>
<b>Third</b>	<b>-3.57 (-6.80, -0.53)</b>	<b>0.52 (0.07, 0.94)</b>	<b>3.04 (0.52, 5.97)</b>
<b>Fourth</b>	<b>-7.83 (-11.16, -4.44)</b>	<b>1.01 (0.62, 1.43)</b>	<b>6.82 (3.78, 9.80)</b>
<b>≥ Fifth</b>	<b>-8.69 (-11.47, -6.06)</b>	<b>1.46 (0.91, 1.98)</b>	<b>7.22 (5.02, 9.52)</b>
ICU			
Neuro-ICU	-5.30 (-25.49, 13.18)	0.81 (-1.85, 3.67)	4.49 (-11.41, 21.75)
<b>Cardiac care unit</b>	<b>23.76 (13.79, 31.82)</b>	<b>-6.52 (-8.96, -3.39)</b>	<b>-17.24 (-23.39, -10.32)</b>
Academic community	2.59 (-3.91, 9.13)	-0.50 (-1.70, 0.70)	-2.08 (-7.13, 3.49)
Hospital mixed-use ICU			
ICU is full	0.96 (-0.90, 2.87)	-0.16 (-0.49, 0.15)	-0.80 (-2.38, 0.76)

Abbreviations: HMO indicates health maintenance organization; SNF, skilled nursing facility; LTAC, long-term acute care facility; ICU, intensive care unit; MS-DRG, Medicare Severity Diagnosis Related Group.

<sup>a</sup> Estimated average difference in percent probability are presented of not receiving futile treatment, receiving probably futile treatment, and receiving futile treatment. A positive percentage is more in a specific category than the reference group, a negative percentage less. Effects that were significant in the model are **bolded** ( $P < .05$ ). Parentheses give 95% confidence intervals. Reference for female is male, for race is white, for Hispanic is non-Hispanic, for insurance is Medicare, for source of admission is emergency room, for service day is first, and for ICU is the medical ICU. Total observations = 3,675, total patients = 713, total fellows = 14.

Supplemental Digital Table 4

**Attending Model: Sensitivity Analyses From Two Binary Probit Models, Showing the Average Marginal Difference in Probability of a Patient Being Perceived as Receiving Non-futile Treatment and [Probably Futile or Futile Treatment]; and [Non-futile or Probably Futile Treatment] and Futile Treatment, From a Study of Attendings' and Fellows' Perceptions of Futile Treatment in the Intensive Care Unit, University of California, Los Angeles, December 2011–March 2012<sup>a</sup>**

Characteristic	Non-futile treatment	Probably futile or futile treatment	Non-futile or probably futile treatment	Futile treatment
Patient age (per decade)	<b>-2.57 (-3.86, -1.35)</b>	<b>2.57 (1.35, 3.86)</b>	<b>-1.54 (-2.67, -0.44)</b>	<b>1.54 (0.44, 2.67)</b>
Female patient	3.55 (0.25, 7.61)	-3.55 (-7.61, -0.25)	<b>3.28 (0.33, 6.31)</b>	<b>-3.28 (-6.31, -0.33)</b>
Patient race (ref. = white)				
Asian	0.62 (-6.32, 7.34)	-0.62 (-7.34, 6.32)	-2.72 (-9.26, 3.48)	2.72 (-3.48, 9.26)
African-American	-6.08 (-12.61, 0.19)	6.08 (-0.19, 12.61)	-4.60 (-11.17, 1.21)	4.60 (-1.21, 11.17)
Other	2.13 (-4.77, 9.07)	-2.13 (-9.07, 4.77)	0.06 (-5.99, 5.91)	-0.06 (-5.91, 5.99)
Hispanic	0.35 (-4.91, 5.40)	-0.35 (-5.40, 4.91)	1.47 (-2.72, 5.22)	-1.47 (-5.22, 2.72)
Insurance (ref. = Medicare)				
Medicaid	-6.43 (-14.41, 1.27)	6.43 (-1.27, 14.41)	-5.48 (-13.36, 0.78)	5.48 (-0.78, 13.36)
Private	-4.06 (-10.91, 2.27)	4.06 (-2.27, 10.91)	-2.12 (-8.47, 3.85)	2.12 (-3.85, 8.47)
HMO	-1.72 (-6.19, 3.09)	1.72 (-3.09, 6.19)	-2.75 (-6.58, 1.65)	2.75 (-1.65, 6.58)
Uninsured	3.10 (-5.76, 11.31)	-3.10 (-11.31, 5.76)	4.76 (-0.30, 7.66)	-4.76 (-7.66, 0.30)
Residence > 20 miles (32.3 km) from hospital	-2.17 (-6.38, 2.24)	2.17 (-2.24, 6.38)	1.46 (-2.37, 4.91)	-1.46 (-4.91, 2.37)
Source of admission (ref. = ER)				
Outpatient setting	<b>5.74 (1.57, 10.21)</b>	<b>-5.74 (-10.21, -1.57)</b>	3.35 (0.23, 6.62)	-3.35 (-6.62, -0.23)
Transferred from outside hospital	-2.09 (-7.62, 3.53)	2.09 (-3.53, 7.62)	-1.89 (-7.44, 3.24)	1.89 (-3.24, 7.44)
Transferred from SNF/LTAC	<b>-13.57 (-22.29, -4.93)</b>	<b>13.57 (4.93, 22.29)</b>	<b>-14.81 (-23.91, -5.16)</b>	<b>14.81 (5.16, 23.91)</b>
MS-DRG weight	-0.26 (-0.58, 0.02)	0.26 (-0.02, 0.58)	0.27 (-0.03, 0.56)	-0.27 (-0.56, 0.03)

Hospital day of futility assessment (per day)	<b>-0.20 (-0.26, -0.14)</b>	<b>0.20 (0.14, 0.26)</b>	<b>-0.31 (-0.37, -0.25)</b>	<b>0.31 (0.25, 0.37)</b>
Physician years at UCLA	-0.09 (-0.46, 0.27)	0.09 (-0.27, 0.46)	-0.06 (-0.23, 0.13)	0.06 (-0.13, 0.23)
Female physician	-4.64 (-10.57, 1.74)	4.64 (-1.74, 10.57)	-0.52 (-2.94, 1.81)	0.52 (-1.81, 2.94)
Physician service day (ref. = first)				
Second	-0.79 (-2.50, 0.80)	0.79 (-0.80, 2.50)	<b>1.29 (0.11, 2.26)</b>	<b>-1.29 (-2.26, -0.11)</b>
Third	-0.80 (-2.60, 1.15)	0.80 (-1.15, 2.60)	0.82 (-0.35, 1.99)	-0.82 (-1.99, 0.35)
Fourth	<b>-2.54 (-4.52, -0.36)</b>	<b>2.54 (0.36, 4.52)</b>	0.69 (-0.58, 1.99)	-0.69 (-1.99, 0.58)
≥ Fifth	<b>-2.72 (-4.54, -1.18)</b>	<b>2.72 (1.18, 4.54)</b>	0.24 (-0.82, 1.51)	-0.24 (-1.51, 0.82)
ICU (ref. = MICU)				
Neuro-ICU	4.24 (-8.83, 16.28)	-4.24 (-16.28, 8.83)	<b>4.82 (0.26, 8.40)</b>	<b>-4.82 (-8.40, -0.26)</b>
Cardiac care unit	<b>13.98 (9.35, 17.79)</b>	<b>-13.98 (-17.79, -9.35)</b>	<b>6.41 (4.23, 8.26)</b>	<b>-6.41 (-8.26, -4.23)</b>
Cardiothoracic ICU	<b>10.68 (3.46, 17.46)</b>	<b>-10.68 (-17.46, -3.46)</b>	3.92 (-0.17, 7.49)	-3.92 (-7.49, 0.17)
Academic community hospital mixed-use ICU	-0.51 (-5.34, 4.82)	0.51 (-4.82, 5.34)	2.70 (-0.99, 6.52)	-2.70 (-6.52, 0.99)
ICU is full	-0.76 (-2.01, 0.51)	0.76 (-0.51, 2.01)	0.20 (-0.72, 1.11)	-0.20 (-1.11, 0.72)

Abbreviations: HMO indicates health maintenance organization; ER, emergency room; SNF, skilled nursing facility; LTAC, long-term acute care facility; ICU, intensive care unit; MS-DRG, Medicare Severity Diagnosis Related Group; MICU, medical intensive care unit.

<sup>a</sup> Estimated average difference in percent probability are presented of receiving non-futile treatment and (probably futile or futile treatment); receiving (no futile or probably futile treatment) and futile treatment. A positive percentage means that this probability is higher than the reference group, a negative percentage lower. Effects that were significant in the model are **bolded** ( $P < .05$ ). Parentheses give 95% confidence intervals. Reference for female is male, for race is white, for Hispanic is non-Hispanic, for insurance is Medicare, for source of admission is emergency room, for service day is first day, and for ICU is the medical ICU. Total observations = 6,897, total patients = 1,125, total physicians = 36.



Supplemental Digital Table 5

**Fellow Model: Sensitivity Analyses From Two Binary Probit Models, Showing the Average Marginal Difference in Probability of a Patient Being Perceived as Receiving Non-futile Treatment and [Probably Futile or Futile Treatment]; and Receiving [Non-futile or Probably Futile Treatment and Futile Treatment, From a Study of Attendings' and Fellows' Perceptions of Futile Treatment in the Intensive Care Unit, University of California, Los Angeles, December 2011–March 2012<sup>a</sup>**

Characteristic	Non-futile treatment	Probably futile or futile treatment	Non-futile or probably futile treatment	Futile treatment
Patient age (per decade)	<b>-2.09 (-3.88, -0.15)</b>	<b>2.09 (0.15, 3.88)</b>	-0.74 (-2.39, 0.81)	0.74 (-0.81, 2.39)
Female patient	2.28 (-3.67, 7.69)	-2.28 (-7.69, 3.67)	0.49 (-4.40, 5.27)	-0.49 (-5.27, 4.40)
Patient race (ref. = white)				
Asian	2.07 (-8.29, 11.29)	-2.07 (-11.29, 8.29)	-0.93 (-10.18, 7.81)	0.93 (-7.81, 10.18)
African-American	-2.17 (-11.10, 7.67)	2.17 (-7.67, 11.10)	-6.12 (-14.01, 2.31)	6.12 (-2.31, 14.01)
Other	-7.41 (-18.26, 4.10)	7.41 (-4.10, 18.26)	-4.07 (-13.58, 6.98)	4.07 (-6.98, 13.58)
Hispanic	7.65 (0.43, 15.53)	-7.65 (-15.53, -0.43)	4.50 (-1.75, 10.42)	-4.50 (-10.42, 1.75)
Insurance (ref. = Medicare)				
Medicaid	-10.48 (-21.34, 0.40)	10.48 (-0.40, 21.34)	-5.28 (-14.22, 4.57)	5.28 (-4.57, 14.22)
Private	2.77 (-6.64, 13.51)	-2.77 (-13.51, 6.64)	4.65 (-3.14, 12.90)	-4.65 (-12.90, 3.14)
HMO	-0.11 (-7.54, 6.74)	0.11 (-6.74, 7.54)	3.17 (-2.70, 9.17)	-3.17 (-9.17, 2.70)
Uninsured	8.20 (-3.97, 18.50)	-8.20 (-18.50, 3.97)	8.03 (-1.07, 15.69)	-8.03 (-15.69, 1.07)
Residence > 20 miles (32.3 km) from hospital	2.54 (-3.26, 9.04)	-2.54 (-9.04, 3.26)	4.86 (-0.70, 10.50)	-4.86 (-10.50, 0.70)
Source of Admission (ref. = ER)				
Outpatient setting	-1.98 (-10.58, 6.30)	1.98 (-6.30, 10.58)	-3.90 (-12.19, 5.30)	3.90 (-5.30, 12.19)
Transferred from outside hospital	-2.61 (-9.97, 5.23)	2.61 (-5.23, 9.97)	-3.13 (-10.45, 5.66)	3.13 (-5.66, 10.45)
Transferred from SNF/LTAC	<b>-18.85 (-33.08, -5.07)</b>	<b>18.85 (5.07, 33.08)</b>	<b>-21.28 (-34.43, -6.29)</b>	<b>21.28 (6.29, 34.43)</b>
MS-DRG weight	-0.41 (-0.82, 0.08)	0.41 (-0.08, 0.82)	-0.13 (-0.56, 0.31)	0.13 (-0.31, 0.56)

Hospital day of futility assessment (per day)	<b>-0.18 (-0.28, -0.10)</b>	<b>0.18 (0.10, 0.28)</b>	<b>-0.17 (-0.24, -0.09)</b>	<b>0.17 (0.09, 0.24)</b>
Physician years at UCLA	-0.51 (-3.24, 2.12)	0.51 (-2.12, 3.24)	-3.25 (-10.09, 2.19)	3.25 (-2.19, 10.09)
Female physician	5.73 (-9.78, 21.53)	-5.73 (-21.53, 9.78)	-5.27 (-28.77, 16.71)	5.27 (-16.71, 28.77)
Physician service day (ref. = first)				
Second	<b>-3.22 (-5.83, -0.69)</b>	<b>3.22 (0.69, 5.83)</b>	-1.87 (-4.56, 0.34)	1.87 (-0.34, 4.56)
Third	<b>-3.15 (-5.76, 0.04)</b>	<b>3.15 (-0.04, 5.76)</b>	<b>-3.61 (-6.26, -0.98)</b>	<b>3.61 (0.98, 6.26)</b>
Fourth	<b>-7.14 (-10.30, -3.92)</b>	<b>7.14 (3.92, 10.30)</b>	<b>-4.94 (-8.01, -2.07)</b>	<b>4.94 (2.07, 8.01)</b>
≥ Fifth	<b>-7.91 (-10.18, -5.28)</b>	<b>7.91 (5.28, 10.18)</b>	<b>-5.94 (-8.43, -3.84)</b>	<b>5.94 (3.84, 8.43)</b>
ICU (ref. = MICU)				
Neuro-ICU	-5.32 (-24.05, 15.83)	5.32 (-15.83, 24.05)	-13.84 (-40.26, 12.97)	13.84 (-12.97, 40.26)
Cardiac care unit	<b>23.65 (13.12, 31.11)</b>	<b>-23.65 (-31.11, -13.12)</b>	10.27 (-10.93, 24.08)	-10.27 (-24.08, 10.93)
Academic community hospital mixed-use ICU	-0.94 (-7.51, 6.14)	0.94 (-6.14, 7.51)	2.25 (-3.51, 8.07)	-2.25 (-8.07, 3.51)
ICU is full	0.30 (-1.48, 2.00)	-0.30 (-2.00, 1.48)	0.56 (-1.09, 2.06)	-0.56 (-2.06, 1.09)

Abbreviations: HMO indicates health maintenance organization; ER, emergency room; SNF, skilled nursing facility; LTAC, long-term acute care facility; ICU, intensive care unit; MS-DRG, Medicare Severity Diagnosis Related Group; MICU, medical intensive care unit.

<sup>a</sup> Estimated average difference in percent probability are presented of not receiving futile treatment and receiving (probably futile or futile treatment); and receiving (non-futile or probably futile treatment), and futile treatment. A positive percentage means that this probability is higher than the reference group, a negative percentage lower. Effects that were significant in the model are **bolded** ( $P < .05$ ). Parentheses give 95% confidence intervals. Reference for female is male, for race is white, for Hispanic is non-Hispanic, for insurance is Medicare, for source of admission is emergency room, for service day is first, and for ICU is the medical ICU. Total observations = 4,410, total patients = 773, total fellows = 14.