



The Intensive Connection

ESICM Award 2021 – procedure

Since 2018, the ESICM Award procedure is done in three steps: Pre-selection, external reviewing, Jury selection.

Please note that only ESICM members are invited to submit an application. Check the ESICM 2021 Awards Programme Overview [here](#).

Step 1 : Pre-selection

We opened the platform first week of February. Applicants can apply for up to 3 Awards categories per project (two projects are a maximum per applicant and the projects have to be different).

The members of the Research Committee (RC) are invited to assess the abstract, short application based on feasibility, relevance and methodology divided in several items: Objectives, Intervention(s), Inclusion/Exclusion and Methods, Statistical methods, Sample size, Trial duration, Budget, Overall scoring.

The applicants have to state if they have conflict of interest with one member of the RC, and each member have to specify if they are aware of applications of colleagues. The members will review a sub-set of Awards applications avoiding the categories where there is a conflict of interest (COI). E.g. if an applicant with COI applied for Global ICU, the member of RC will not score any project within the category (this rule will be applied for step 3 as well).

The forms reviewed by the RC are anonymized, there is no mention of name, promotor, institution. Some projects were dismissed from some categories but could be invited to the full application for a sub-selection of categories.

Pre-selected applicants received an invitation to complete the application, including an extensive project proposal, CV and letter of recommendation. Candidates that are not selected received an e-



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mail with their scores and comments to improve their application for the next year.

Objectives	Perfect description and understandable	3
	Good description, some improvement can be made	2
	Diffuse or unclear	1
	Not appropriate	0
Intervention(s)	Perfect description and understandable	3
	Good description, some improvement can be made	2
	Diffuse or unclear	1
	Not appropriate	0
Inclusion/Exclusion and Methods	Perfect description and understandable	3
	Good description, some improvement can be made	2
	Diffuse or unclear	1
	Not appropriate	0
Statistical methods	Perfect description and understandable	3
	Good description, some improvement can be made	2
	Diffuse or unclear	1
	Not appropriate	0
Sample Size	Perfect description and understandable	3
	Good description, some improvement can be made	2
	Diffuse or unclear	1
	Not appropriate	0
Trial duration	Feasible timetable	2
	Might be challenging	1
	Unrealistic	0
Budget	Appropriate	2
	Some concerns	1
	Over budget or too high without further acquired money	0
Overall scoring	Exceptional idea and application. This study should be allowed to be invited for a full application	5 (one member of the research committee can give this once for every 10 applications reviewed)
	Highly interesting study in the field of intensive care medicine that will advance our field	3
	Clear knowledge gap in the field of intensive care medicine which should be investigated	2
	The impact for the intensive care field seems to be low	1
	Not an intensive care study or I do not expect any advancement for our field from this study	0

Scoring for step 1: /22

Pre-selected applicants will be invited to complete the full application from mid-April. Applicants will have 3 weeks to complete the full application form.

Step 2 : External reviewers

Criteria to be reviewers:

1. *If NOT specialized in intensive Care, only if H-Index ≥ 15 AND Award Body Yes AND Funding > 0*
2. *For all following: Specialized in intensive care = YES*
 - a. *If H-Index ≥ 8 & Award Body = Yes & Reviewer = Yes & Funding > 5.000 €*
 - b. *If H-Index ≥ 10 & Funding > 20.000*
 - c. *If H-Index ≥ 15 & Funding > 5000 €*
 - d. *If H-Index ≥ 20 & Funding = No & Reviewer = Yes*

RC members are excluded from the Step 2, they can't assess projects.

Assessors are matched according to their topic of interest and area of expertise with the application. In PubMed and desk search, there has been a verification to avoid conflict of interest with the applicant, i.e. assessors and reviewers should not have been co-authors in the last 9 years and do not work in the same hospital/department.



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A minimum of 2 assessors, the majority got between 3 to 4 reviewers that actually accepted the invitation and assessed. Each assessor has to score per item, give a general comment and could include their concerns in a different field. The coefficient for each item in the scoring is the result of a survey.

Category	Description (everything 0-2 as scores)
Applicants expertise (coeff 1,5)	Excellent
	Good
	Average
Objectives (coeff 2,5)	Excellent
	Appropriate
	Needs improvement
Methods (coeff 2)	Excellent
	Appropriate
	Needs improvement
Justification for sample size (Coeff 1,5)	Appropriate
	Concerns
Trial duration (Coeff 1)	Inappropriate
	Feasible
	Challenging
Budget (Coeff 1)	Unrealistic
	Appropriate
	Concerns
Originality (Coeff 1,5)	Unrealistic
	High
	Medium
Need for the project (Coeff 1,25)	Low
	High
	Medium
Impact on Intensive Care (Coeff 2)	Low
	High
	Medium
Your final recommendation (1,25)	Low
	Definitely to be supported
	Should be supported maybe
	Should not be supported

Any other concerns: Text field

General comments: Text field

Please confirm you do not have a conflict of interest with the application:

- I confirm, that I have no conflict with this review.
- I have a conflict of interest with this review

Scoring for step 3: /31 with coefficient reported to /20

Step 3: Jury

The jury is composed by the RC and potentially external experts if necessary. The members have to rank projects for all categories except categories with COI. As a jury, they have access to the marks and comments of the assessors from step 2 and reviews are anonymised.



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In each category they have to select the Top 6 and Top 10 for categories with two awardees. The ranking gives a decreasing score, i.e. if one project is ranked first he will have the highest score 12/12 and a project ranked last will have 0/12. The final jury score is the average of all rankings.

The jury discuss the projects according to the overall ranking and the marks given by the assessors. As a crosscheck, the Jury also look at the pre-selection scores. If an RC member is applicant, he/she will be excluded of the discussion and selection of the category he/she applied for and must leave the premises.

The ranking of each Award category is independent, i.e. one project can be first in one category and last in another.

The jury can also access the assessors' comments and scoring to discuss the project.

Project title (8 project(s))	Applicant	Rank of the award in applicant choice	Step 1 Pre-selection (/ 24)	Step 2 Reviewers (/ 20)	Step 3 Jury Evaluation (/ 12)
7071 - ADER: ANTIBIOTIC DE-ESCALATION EFFECT ON BACTERIAL RESISTANCE		1	A : 12 M : 17 I : [0 - 20]	A : 16,45 M : 16,77 I : [15,48 - 17,42]	10 Scored by 11
6949 - Influence of different anaesthetics on systemic inflammatory response, microcirculation and mitochondrial function in colon and liver and intestinal barrier function in experimental sepsis.		2	A : 14 M : 16 I : [0 - 22]	A : 16,45 M : 16,77 I : [15,48 - 17,42]	8 Scored by 11
6664 - Inhaled Argon in Experimental Traumatic Brain Injury: Effects on Neurological Outcome		1	A : 12 M : 18 I : [0 - 19]	A : 16,19 M : 16,13 I : [14,19 - 18,06]	8 Scored by 11
7031 - Volatile Organic Compounds in severe pneumonia patients and their association with ARDS development. An observational study		1	A : 12 M : 18 I : [0 - 21]	A : 13,94 M : 14,19 I : [10,97 - 17,42]	5 Scored by 11
6715 - Active Vitamin D supplementation in critically ill patients with acute kidney injury (Active VITDAKI)		1	A : 15 M : 18 I : [0 - 22]	A : 13,74 M : 12,26 I : [10,97 - 18,06]	5 Scored by 11
6952 - Impact of Sepsis on AginG-associated disEase (SAGE)		1	A : 15 M : 18 I : [0 - 22]	A : 12,52 M : 12,9 I : [7,1 - 17,42]	2 Scored by 11
6890 - Association of Sleep depth with ICU neurological dysfunction		1	A : 15 M : 16 I : [1 - 22]	A : 12,26 M : 12,26 I : [10,97 - 13,55]	1 Scored by 11

Material used for the jury discussion/selection