

Table 1: Network estimates evaluating the efficacy of pharmacologic agents for return of spontaneous circulation (ROSC) following out-of-hospital cardiac arrest. Abbreviations: GRADE = Grading of Recommendations Assessment, Development, and Evaluation; OR = Odds ratio; CI = Confidence interval

Intervention 1	Intervention 2	Network Estimate ¹ OR (95% CI)	GRADE	Narrative Summary
Epinephrine (Standard Dose)	Placebo/No Treatment	3.69 (3.32-4.10)	High	Standard dose epinephrine increases ROSC compared to no treatment.
Epinephrine (High Dose)	Placebo/No Treatment	4.27 (3.68-4.97)	High ²	High dose epinephrine increases ROSC compared to no treatment.
Epinephrine + Vasopressin	Placebo/No Treatment	3.54 (2.94-4.26)	High	Epinephrine + vasopressin increases ROSC compared to no treatment.
Vasopressin	Placebo/No Treatment	3.53 (2.82-4.41)	High	Vasopressin increases ROSC compared to no treatment.
Epinephrine (High Dose)	Epinephrine (Standard Dose)	1.16 (1.04-1.29)	Moderate ³	High dose epinephrine probably increases ROSC compared to standard dose epinephrine.
Epinephrine (High Dose)	Epinephrine + Vasopressin	1.21 (1.00-1.45)	Low ^{3,4}	High dose epinephrine may increase ROSC compared to epinephrine + vasopressin.
Epinephrine (High Dose)	Vasopressin	1.21 (0.97-1.52)	Low ^{3,4}	High dose epinephrine may increase ROSC compared to vasopressin.
Epinephrine (Standard Dose)	Vasopressin	1.05 (0.86-1.27)	Low ⁵	Standard dose epinephrine may have no effect on ROSC compared to vasopressin.
Epinephrine + Vasopressin	Epinephrine (Standard Dose)	0.96 (0.83-1.12)	Moderate ⁴	Epinephrine + vasopressin probably has no effect on ROSC compared to standard dose epinephrine.
Epinephrine + Vasopressin	Vasopressin	1.00 (0.78-1.29)	Low ⁵	Epinephrine + vasopressin may have no effect on ROSC compared to vasopressin.

¹Imprecision only incorporated at network level not at direct or indirect.

²Lowered for risk of bias in included trials, but certainty increased back to high for magnitude of effect.

³Lowered for risk of bias in included trials.

⁴Lowered for imprecision.

⁵Lowered two levels for imprecision as CI don't exclude benefit or harm.