

Appendix 3. Percentages of patients by level of triage in the literature

Etude	Sample size	Triage tool and objectives	Design	Level 1	Level 2	Level 3	Level 4	Level 5
Our study 2017, <i>France</i>	100,506	pediaTRI versus PEWS ≥ 4	Cross-sectional	0.2 (0.2_0.2)	16.5 [16.3-16.7]	34.7 {34.4-35.0}	41.1 [40.8-41.4]	7.5 [7.4-7.7]
Roukema 2006, <i>Netherlands</i>	1,065	MTS Versus Gold standard (based on the use of resources and expert committee)	Retrospective	11.9 (10.0-14.0)	25.9 (23.3-28.7)	25.5 (22.9-28.2)	26.7 (24.0-29.4)	10.1 (8.3-12.0)
Van Veen 2008, <i>Netherlands</i>	13,554	MTS Versus Gold standard (based on the use of resources and expert committee)	Cross-sectional	1.5 (1.3-1.7)	21.4 (20.7)	36.2 (35.3-37.0)	40.1 (39.3-41.0)	0.8 (0.7-1.0)
Van Veen 2012, <i>Netherlands</i>	11,260	MTS Versus Gold standard (based on the use of resources and expert committee)	Cross-sectional	2.1 (1.8-2.4)	14.1 (13.4-14.7)	36.2 (35.3-37.1)	44.2 (43.3-45.1)	3.5 (3.2-3.8)
Seiger 2013, <i>Netherlands</i>	n1=2,960 (with chronic disease) n2=5,632 (without chronic disease)	MTS Versus Gold standard (based on the use of resources and expert committee)	Cross-sectional	(1) 3.6 (2.9-4.3) (2) 3.0 (2.6-3.5)	(1) 24.1 (22.6—25.7) (2) 26.4 (25.2-27.5)	(1) 55.0 (53.2-56.8) (2) 45.5 (44.2-46.8)	(1) 17.2 (15.8-18.6) (2) 24.6 (23.5-25.8)	(1) 0.1 (0.0-0.3) (2) 0.5 (0.4-0.8)
Seiger 2014, <i>Netherlands, Portugal, United Kingdom</i>	60,735	(1) MTS original (2) MTS version 1 versus hospitalization	Cross-sectional	1.3 (1.2-1.4)	15.84 (15.6-16.1)	23.3 (23.0-23.6)	59.6 (59.2-60.0)	
Travers 2009, <i>USA</i>	1,173	ESI versus resource utilization	Cross-sectional	16.5 (14.5-18.8)	21.3 (19.0-23.8)	20.0 (17.8-22.4)	21.8 (19.5-24.3)	20.3 (18.0-22.7)
Green 2012, <i>USA</i>	780	ESI versus resource utilization	Retrospective	0.3 (0.0-0.9)	9.4 (7.4-11.6)	37.1 (33.7-40.6)	32.2 (28.9-35.6)	21.2 (18.3-24.2)
Baumann 2005, <i>USA</i>	510	ESI versus resource utilization	Cross-sectional	2.9 (1.7-4.8)	18.6 (15.3-22.3)	34.12 (30.0-38.4)	36.7 (32.5-41.0)	7.7 (5.5-10.3)
Gouin 2005, <i>Canada</i>	537	PedCTAS versus resource utilization /PRISA score	Cross-sectional	0.4 (0.1-1.3)	4.7 (3.0-6.8)	48.4 (44.1-52.7)	37.1 (33.0-41.3)	9.5 (7.2-12.3)
Warren 2008, <i>Canada</i>	1,618	PedCTAS versus resource utilization	Retrospective	0.4 (0.1-0.8)	9.6 (8.2-11.1)	48.0 (45.5-50.4)	38.8 (36.4-41.2)	3.3 (2.5-4.3)
Gravel 2008, <i>Canada</i>	19,265	PedCTAS and reliability study	Cross-sectional	1.5 (1.4-1.7)	5.2 (4.8-5.5)	28.5 (27.9-29.1)	49.5 (48.8-50.2)	15.4 (14.9-15.9)
Gravel 2013, <i>Canada</i>	550,940	PedCTAS versus resource utilization	Retrospective	0.6 (0.6-0.7)	11.3 (11.3-11.4)	37.5 (37.4-37.6)	43.6 (43.5-43.8)	6.6 (6.6-6.7)
Gravel 2012, <i>Canada</i>	395,661	PedCTAS versus resource utilization, reliability study	Cross-sectional	0.7 (0.7-0.7)	12.5 (12.4-12.6)	41.2 (41.0-41.3)	41.8 (41.7-42.0)	0.4 (0.4-0.4)
Gravel 2009, <i>Canada</i>	58,529	PedCTAS versus resource utilization	Retrospective	1.2 (1.2-1.3)	6.8 (6.6-7.0)	31.5 (31.2-31.9)	46.9 (46.5-47.3)	13.5 (13.3-13.8)
Gaucher (1)2010, <i>Canada</i>	60,525	PedCTAS , to assess the characteristics of patients who left a pediatric ED without being seen by a physician	Retrospective	0.9 (0.8-1.0)	7.7 (7.4-7.9)	31.0 (30.7-31.4)	50.1 (49.7-50.5)	10.6 (10.4-10.9)
Acworth 2009, <i>Australia – New-Zealand</i>	350,345	ATS , to describe epidemiological data concerning paediatric ED visits to an Australian and New Zealand research network	Cross-sectional	0.6 (0.6-0.6)	4.5 (4.4-4.5)	27.4 (27.3-27.6)	52.1 (51.9-52.3)	15.4 (15.3-15.6)

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