

**Table 2. Characteristics of included studies – Techniek voor tracheacanule plaatsing**

Study	Participants	Comparison	Follow-up	Outcome measures	Comments	Risk of bias (per outcome measure)*
<i>Systematic review</i>						
Battaglini, 2022	Adult patients with suspected or confirmed SARS-CoV-2 infection who received a tracheostomy during their ICU course  47 studies included (n=5268 patients; mean age=60.1 years)	Intervention: percutaneous tracheostomy  Control: surgical tracheostomy	Unclear	Major complications (bleeding)	One author received consultancy fees. The other authors declare that they have no conflicts of interest.	High
Brass, 2016	Intubated and mechanically-ventilated critically ill participants (children and adults) who required an elective tracheostomy.  20 studies included (n=1652)	Intervention: percutaneous technique for tracheotomy  Control: surgical technique for elective tracheotomy	Up to 2 years for wound infection  Up to 24 hours for major bleeding	Major complications (wound infection/stomatitis; major bleeding)	No conflicts of interest. None of the studies were funded.	Some concerns

Individual studies						
Katial, 2024	<p>N at baseline</p> <p>Intervention: 30</p> <p>Control: 30</p> <p>Age (mean, SD)</p> <p>Intervention: 41 (17.12) years</p> <p>Control: 45.67 (18.01)</p> <p>Sex (males)</p> <p>Intervention: 16 (53.33%)</p> <p>Control: 17 (56.67%)</p>	<p>Intervention: Percutaneous dilation tracheostomy,</p> <p>Control: Surgical tracheostomy</p>	<p>Not exactly mentioned; till the patient was discharged, died or transferred to another facility.</p>	<p>Major complications (bleeding, infection)</p>	<p>No financial support/sponsorship. There are no conflicts of interest.</p>	<p>Some concerns</p>
Kim, 2023	<p>N at baseline</p> <p>Intervention: 33</p> <p>Control: 35</p> <p>Age (mean ± SD)</p> <p>Intervention: 65.6 ± 13.8 years</p> <p>Control:</p>	<p>Intervention: Ultrasound-guided percutaneous dilation tracheostomy,</p> <p>Control: Surgical tracheostomy</p>	<p>At least 3 months</p>	<p>Major complications (bleeding, infection)</p>	<p>This research was supported by the Soonchunhyang University Research Fund, the Basic Science Research Program through the National Research Foundation of Korea (NRF) funded by the Ministry of Education (Grant no. 2017R1C1B5018147). No potential conflict of interest relevant to this article was reported.</p>	<p>Some concerns</p>

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Richtlijn Tracheotomie 2025

	67.7 ± 13.7 years  Sex (males)  Intervention: 21 (60%)  Control: 20 (60.1%)					
Pandit, 2023	N at baseline  Intervention: 16  Control: 16  Age (mean ± SD)  Intervention: 48.2 ± 15.3 years  Control: 50.6 ± 18.4 years  Sex (males)  Intervention: 9 (56.25%)  Control: 8 (50%)	Intervention:  Percutaneous dilation tracheostomy,  Control: Surgical tracheostomy	Unclear	Major complications (bleeding, infection), stenosis	This research did not receive any grants from funding agencies  in the public, commercial or not-for-profit sector. There is no competing interest among the authors  and are solely responsible for the content and writing of the paper.	High (complications, stenosis)

\*For further details, see risk of bias table in the appendix