

Supplementary Online Content

Richardson S, Hirsch JS, Narasimhan M, Crawford JM, McGinn T, Davidson KW; the Northwell COVID-19 Research Consortium. Presenting characteristics, comorbidities, and outcomes among 5700 patients hospitalized with COVID-19 in the New York City area. *JAMA*. doi:10.1001/jama.2020.6775

eTable 1. Clinical Measures and Outcomes for Patients Discharged Alive or Dead at Study End Point – By Comorbidity

eTable 2. Clinical Measures and Outcomes for Patients Discharged Alive or Dead at Study End Point – By Home Medication

This supplementary material has been provided by the authors to give readers additional information about their work.

eTable 1. Clinical Measures and Outcomes for Patients Discharged Alive or Dead at Study End Point – By Comorbidity

Clinical Course Measures	Discharged Non-diabetic N=1548	Discharged Diabetic N=533	Died Non-diabetic N=329	Died Diabetic N=224	Discharged Non-HTN N=1099	Discharged HTN N=982	Died Non-HTN N=169	Died HTN N=384
Invasive Mechanical Ventilation	29 (1.9%)	9 (1.7%)	157 (47.7%)	125 (55.8%)	19 (1.7%)	19 (1.9%)	100 (59.2%)	182 (47.4%)
ICU Care	61 (3.9%)	21 (3.9%)	162 (49.2%)	129 (57.6%)	43 (3.9%)	39 (4.0%)	102 (60.3%)	189 (49.2%)
Absolute Lymphocyte Count at Nadir, median (IQR), K/ μ L, (reference range 1.0-3.3)	0.9 (0.6 – 1.2) N=1542	0.9 (0.6 – 1.2) N=533	0.5 (0.3 – 0.8) N=327	0.5 (0.3 – 0.8) N=224	0.9 (0.6 – 1.2) N=1093	0.9 (0.6 – 1.2) N=982	0.6 (0.3 – 0.8) N=169	0.5 (0.3 – 0.8) N=382
Acute Kidney Injury ^a	112 (8.0%) N=1396	64 (13.5%) N=474	200 (69.9%) N=286	147 (80.3%) N=195	56 (5.7%) N=976	120 (13.4%) N=894	122 (80.3%) N=152	225 (68.4%) N=329
Kidney Replacement Therapy	2 (0.1%)	1 (0.2%)	38 (12.1%)	40 (19.4%)	2 (0.2%)	1 (0.1%)	30 (18.3%)	48 (13.8%)
Acute Hepatic Injury ^b	1 (0.1%) N=1542	2 (0.4%)	28 (8.6%) N=327	25 (11.2%) N=224	1 (0.1%) N=1093	2 (0.2%) N=982	27 (16.0%) N=169	26 (6.8%) N=382
Outcomes								
Length of Stay ^c , median (IQR), days	3.8 (2.1 – 6.6)	4.4 (2.7 – 6.9)	4.4 (1.9 – 7.1)	5.1 (2.6 – 7.9)	3.7 (2.1 – 6.2)	4.4 (2.7 – 7.0)	4.5 (2.3 – 7.0)	4.9 (2.2 – 7.5)
Readmitted ^d	31 (2.0%)	14 (2.6%)	N/A	N/A	21 (1.9%)	24 (2.4%)	N/A	N/A
Discharge Disposition of 2,081 Patients Discharged Alive								
Home	1468 (94.8%)	491 (92.1%)	N/A	N/A	1059 (96.4%)	900 (91.6%)	N/A	N/A
Facilities (i.e. Nursing Home, Rehab)	80 (5.2%)	42 (7.9%)	N/A	N/A	40 (3.6%)	82 (8.4%)	N/A	N/A

SI conversion factors: To convert absolute lymphocyte count to $\times 10^9/L$, multiply by 0.001

Abbreviations: HTN, hypertensive

^aAcute kidney injury was identified as an increase in serum creatinine by ≥ 0.3 milligrams per deciliter (mg/dl) (≥ 26.5 moles per liter [lmol/l]) within 48 hours or an increase in serum creatinine to ≥ 1.5 times baseline within the prior 7 days compared with the preceding 1 year of data in acute care medical records. Acute kidney injury is calculated only for patients with record of baseline kidney function data available and without a diagnosis of end-stage kidney disease

^bAcute hepatic injury was defined as an elevation in aspartate aminotransferase (AST) or alanine aminotransferase (ALT) of >15 times the upper limit of normal.

^cLength of stay begins with admission time and ends with discharge time or time of death. It does not include time in the Emergency Department.

^dData are presented here for readmission during the study period, March 1st to April 4th, 2020

eTable 2. Clinical Measures and Outcomes for Patients Discharged Alive or Dead at Study End Point – By Home Medication^a

Clinical Course Measures	Discharged HTN, no ACE or ARB N=699	Discharged HTN, on ACE N=113	Discharged HTN, on ARB N=170	Died HTN, no ACE or ARB N=254	Died HTN, on ACE N=55	Died HTN, on ARB N=75
Invasive Mechanical Ventilation	14 (2.0%)	1 (0.9%)	4 (2.4%)	108 (42.5%)	32 (58.2%)	42 (56.0%)
ICU Care	30 (4.3%)	3 (2.7%)	6 (3.5%)	111 (43.7%)	33 (60.0%)	45 (60.0%)
Absolute Lymphocyte Count at Nadir, median (IQR), K/ μ L, (reference range 1.0-3.3)	0.9 (0.6 – 1.2) N=699	0.8 (0.6 – 1.1) N=113	0.9 (0.6 – 1.2) N=170	0.5 (0.3 – 0.8) N=253	0.4 (0.2 – 0.7) N=54	0.5 (0.3 – 0.8) N=75
Acute Kidney Injury ^b	96 (15.2%) N=631	6 (5.7%) N=106	18 (11.5%) N=157	139 (66.5%) N=209	36 (69.2%) N=52	50 (73.5%) N=68
Kidney Replacement Therapy	0 (0%)	1 (0.9%)	0 (0%)	26 (11.2%)	12 (22.2%)	10 (14.1%)
Acute Hepatic Injury ^c	2 (0.3%) N=699	0 (0%) N=113	0 (0%) N=170	16 (6.3%) N=253	7 (13.0%) N=54	3 (4.0%) N=75
Outcomes						
Length of Stay ^d , median (IQR), days	4.6 (2.8 – 7.3)	3.7 (2.2 – 6.2)	4.1 (2.4 – 6.5)	4.4 (2.1 – 6.9)	6.5 (3.5 – 9.5)	5.0 (2.2 – 7.7)
Readmitted ^e	18 (2.6%)	3 (2.7%)	3 (1.8%)	N/A	N/A	N/A
Discharge Disposition of 2,081 Patients Discharged Alive						
Home	639 (91.4%)	106 (93.8%)	155 (91.2%)	N/A	N/A	N/A
Facilities (i.e. Nursing Home, Rehab)	60 (8.6%)	7 (6.2%)	15 (8.8%)	N/A	N/A	N/A

SI conversion factors: To convert absolute lymphocyte count to $\times 10^9/L$, multiply by 0.001

Abbreviations: HTN, hypertensive; ACEi, angiotensin-converting-enzyme inhibitor; ARB, angiotensin II receptor blocker

^a Home medications reflect those actively entered during admission medication reconciliation by the inpatient admitting physician. Final reconciliation has been delayed until discharge during the current crisis so are presented only for patients who have completed their hospital course to ensure accuracy.

^b Acute kidney injury was identified as an increase in serum creatinine by ≥ 0.3 milligrams per deciliter (mg/dl) (≥ 26.5 moles per liter [lmol/l]) within 48 hours or an increase in serum creatinine to ≥ 1.5 times baseline within the prior 7 days compared with the preceding 1 year of data in acute care medical records. Acute kidney injury is calculated only for patients with record of baseline kidney function data available and without a diagnosis of end-stage kidney disease

^c Acute hepatic injury was defined as an elevation in aspartate aminotransferase (AST) or alanine aminotransferase (ALT) of >15 times the upper limit of normal.

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