

Supplementary Table 3. Diagnoses and procedural definitions of clinical outcomes based on ICD-10 codes

HF	HF diagnoses were based on ICD-10 codes (I50, I42.0, I11.0, I13.0, I13.2) following hospital discharge
MI	MI was defined as hospitalization with discharge diagnoses coded as ICD-10 I21–I22 in patients who underwent coronary revascularization during the same admission. Revascularization procedures were identified through procedural codes (PCI: M6551–6654, M6561–6567, M6571, M6572, O1876–1877; CABG: O1640–1642, O1647–1649, OA640–642, OA647–649)
Stroke	Ischemic stroke was confirmed in patients with brain imaging and ICD-10 codes I63 and I64, while hemorrhagic stroke was similarly diagnosed with imaging and ICD-10 codes I60–62
CAD	CAD was defined as a history of MI or revascularization
PAD	PAD was diagnosed in hospitalized patients with ICD-10 codes I70–71, I73.1, I73.8–9, I77.1, I79.0, I79.2, K55.1, K55.8–9, Z95.8–9, along with evidence of revascularization procedures (M6597, M6605, M6620, M6613, M6632, O0161–70, O1645, O1646, O2064, O2065, O2067, O2068)
AF	AF was defined as hospitalization due to AF, which was identified using ICD-10 code I48 as the primary diagnosis

AF, atrial fibrillation; CABG, coronary artery bypass grafting; CAD, coronary artery disease; HF, heart failure; ICD-10, International Classification of Diseases, 10th Revision; MI, myocardial infarction; PAD, peripheral artery disease; PCI, percutaneous coronary intervention.