

Supplementary material

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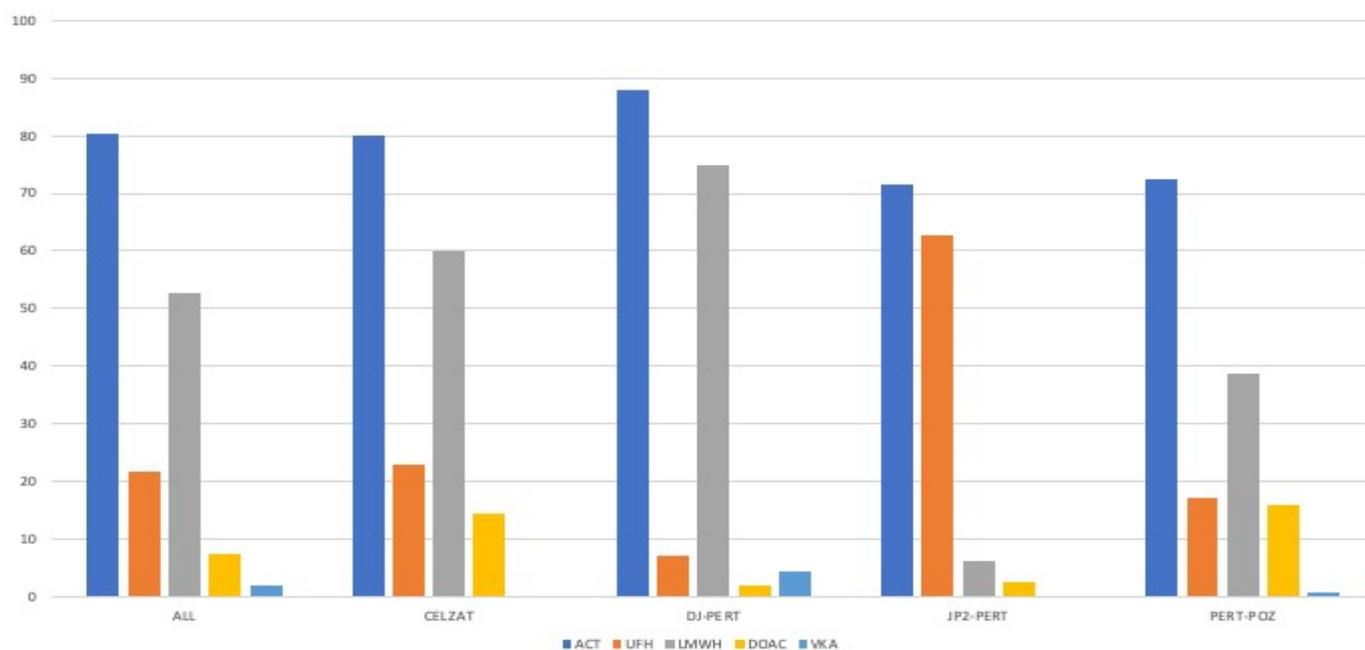


Figure S1. Detailed initial anticoagulant drugs administration among PERTs patients

Abbreviations: ACT, anticoagulation therapy alone; CELZAT, Central University Hospital, Warsaw/European Health Center, Otwock; DJ-PERT, Infant Jesus University Hospital, Warsaw; DOAC, direct oral anticoagulant; JP2-PERT, John Paul's II Hospital, Cracow; LMWH, low molecular weight heparin; PERT-POZ, University Hospital of the Lord's Transfiguration, Poznan; UFH, unfractionated heparin; VKA, vitamin K antagonist

Table S1. Clinical characteristics of patients with PE who died within 30 days after diagnosis

Patient ID	Sex	Age	Institution	Initial PE mortality risk	Applied PERT recommendation	CDT	Time from PERT recommendation to death (days)	Total hospitalization duration (days)	Cause of death
1	K	64	CELZAT	Intermediate-high	ACT-LMWH	No	9	11	PE recurrence-RVF
2	M	53	CELZAT	High-risk	CDT	Yes	10	21	Brain tumor-related
3	M	71	CELZAT	High-risk	ST	No	1	1	PE-related RVF
4	K	79	CELZAT	Intermediate-high	ACT-UFH	No	1	3	PE-related RVF
5	M	64	CELZAT	Intermediate-high	ACT-LMWH	No	5	7	Lung cancer-related
6	M	67	CELZAT	Intermediate-high	ACT-UFH	No	2	3	Hemorrhagic stroke
7	K	52	CELZAT	High-risk	ST	No	1	2	PE-related RVF
8	M	74	CELZAT	High-risk	ST	No	2	2	PE-related RVF
9	K	85	CELZAT	Intermediate-high	ACT-UFH	No	4	6	Hemorrhagic stroke
10	K	73	CELZAT	Intermediate-high	ACT-LMWH	Recommended	1	1	PE-related RVF
11	M	82	CELZAT	Intermediate-high	ACT-UFH	No	4	8	PE-related RVF
12	M	67	DJ-PERT	High-risk	ST	No	1	1	Multiorgan failure
13	K	77	DJ-PERT	High-risk	ST	No	3	3	PE-related RVF
14	K	66	DJ-PERT	Intermediate-high	CDT	Yes	8	10	PE-related RVF
15	M	55	DJ-PERT	Intermediate-high	ACT-UHF	No	1	1	PE-related RVF
16	M	73	DJ-PERT	Intermediate-High	ACT-LMWH	No	7	9	Lung cancer-related
17	M	70	DJ-PERT	High-risk	CDT	Yes	1	2	Posttraumatic brain injury
18	K	67	DJ-PERT	Intermediate-high	ACT-UFH	No	8	8	PE-related RVF
19	M	59	DJ-PERT	Intermediate-high	CDT	Yes	3	7	Multiorgan failure
20	F	42	JP2-PERT	Intermediate-high	ACT-UFH	No	5	7	PE-related RVF
21	M	40	JP2-PERT	Intermediate-high	ACT-UFH	No	10	16	AIDS related interstitial lung disease
22	K	62	JP2-PERT	High-risk	ST (failure) followed by CDT	Yes	3	3	PE-related RVF
23	K	63	JP2-PERT	Intermediate-high (with thrombus in transit)	SE	No	4	6	PE-related RVF

24	M	66	JP2-PERT	Intermediate-high	ACT-LMWH	No	6	8	Necrotizing alveolitis
25	K	80	JP2-PERT	High-risk	ST	No	1	1	PE-related RVF
26	M	52	JP2-PERT	High-risk	ST	No	13	24	Tamponade-related to ventricular lead extraction
27	K	65	PERT-POZ	High-risk	ST	No	0 (2 hours)	1	PE-related RVF
28	K	78	PERT-POZ	High-risk	ST	No	1	5	PE-related RVF
29	K	50	PERT-POZ	Intermediate-High	ACT-UFH	No	10	11	Ischemic stroke
30	K	81	PERT-POZ	High-risk	ST	No	0 (6h)	1	PE-related RVF
31	K	86	PERT-POZ	High-risk	ACT-UFH (contraindications to ST)	No	0 (8h)	1	PE-related RVF
32	M	67	PERT-POZ	High-risk	ST (failure) followed by CDT	Yes	4	6	PE-related RVF
33	M	71	PERT-POZ	High-risk	ST	No	1	1	PE-related RVF
34	K	44	PERT-POZ	High-risk	CDT+ECMO	Yes	2	2	Posttraumatic brain injury
35	M	44	PERT-POZ	Intermediate-High	CDT	Recommended	0 (8 h)	8 (h)	PE-related RVF (death during transport)

Abbreviations: ACT, anticoagulation; AIDS, acquired immunodeficiency syndrome; CDT, catheter directed therapy; ECMO, extracorporeal membrane oxygenation; LMWH, low molecular weight heparin; PE, pulmonary embolism; RVF, right ventricular failure; ST, systemic thrombolysis; UFH, unfractionated heparin. Other — see Figure S1