

SUPPLEMENTAL MATERIAL

Table S1. Morbidity & Mortality Outcomes in COVID-19 and Type 2 NSTEMI

	Controls (n = 2173)	Type 2 NSTEMI (n = 579)	Hazard Ratio (95% CI)	p value
Mortality (death or hospice)	795 (37%)	216 (37%)	1.40 (1.13 – 1.74)	0.002
Adverse cardiac event	276 (13%)	199 (34%)	3.86 (3.08 – 4.83)	<.001
Adverse vascular event	260 (12%)	72 (12%)	2.31 (1.70 – 3.15)	<.001
Intubation	764 (35%)	198 (34%)	2.98 (2.39 – 3.72)	<.001
Length of stay (days) Median (Q1-Q3)	6.4 (3.6-11.8)	9.4 (4.9-17.4)	1.03 (1.02 – 1.04)	<.001
Major bleeding	76 (4%)	50 (9%)	2.63 (1.82 – 3.81)	<.001
New HD or CRRT	73 (3%)	46 (8%)	2.70 (1.81 – 4.03)	<.001
Time in ICU (days)	10 (13)	13 (14)	1.04 (1.02 – 1.07)	0.002
Transfer to ICU	1282 (59%)	336 (58%)	2.88 (2.37 – 3.51)	<.001

Data displayed as: n (column precents), mean (SD), or median (IQR)

Summary of Cox univariate regression analysis

ICU: intensive care unit; HD: hemodialysis; CRRT: continuous renal replacement therapy

Table S2. Pre-Aadmission Factors Associated with Type 2 NSTEMI

	Odds Ratio (95% CI)	p value
Admission heart rate (per 10 beats)	1.16 (1.10 – 1.22)	<0.001
Medicaid insurance (vs. private)	2.23 (1.47 – 3.39)	<0.001
Hypertension	1.41 (1.08 – 1.84)	0.012
Coronary Artery Disease	1.87 (1.43 – 2.44)	<0.001
Heart failure	1.84 (1.43 – 2.37)	<0.001
Chronic Kidney Disease	1.84 (1.43 – 2.36)	<0.001
PTA Anticoagulation Medications	0.72 (0.54 – 0.95)	0.022
PTA Antihyperglycemic Medications	0.76 (0.60 – 0.95)	0.018

Summary of conditional logistic regression analysis to predict type 2 NSTEMI
PTA: prior to admission

Table S3. Pre-Aadmission Factors Associated with Mortality in COVID-19

	Hazard Ratio (95% CI)	p value
Type 2 NSTEMI	1.28 (1.004 – 1.62)	0.046
Admission systolic blood pressure (per 10 mm Hg)	0.90 (0.86 – 0.95)	<0.001
Admission heart rate (per 10 beats)	1.16 (1.09 – 1.23)	<0.001
Payment source (vs. private)		0.005
Medicaid	2.62 (1.29 – 5.31)	
Medicare	1.74 (1.03 – 2.96)	
More than one	2.10 (1.22 – 3.63)	
Other/Unknown	2.80 (1.36 – 5.77)	
Summary of stratified proportional hazards regression analysis to predict mortality (death and discharge to hospice)		