Author,	0		1		2		3		4		≥5	
	No. of Pts.	No. of Outcomes n (%)	No. of Pts.	No. of Outcomes n (%)	No. of Pts.	No of Outcomes n (%)	No. of Pts.	No. of Outcomes n (%)	No. of Pts.	No. of Outcomes n (%)	No. of Pts.	No. of Outcomes n (%)
Body 2009 ²⁰	59	1 (1.7)	176	3 (1.7)	143	15 (10.5)	169	45 (26.6)	134	29 (21.6)	115	30 (38.3)
Campbell 2009 ¹⁸	980	24 (2.5)	828	38 (4.6)	580	45 (7.8)	348	47 (13.5)	223	51 (22.9)	69	24 (34.8)
Hess 2010 ¹⁶	217	4 (1.8)	300	9 (3.0)	214	24 (11.2)	187	45 (24.1)	73	23 (31.5)	26	12 (46.2)
Lyon 2007 ²²	231	0 (0)	215	15 (7.0)	184	24 (13.0)	167	40 (24.0)	96	23 (24.0)	61	35 (57.4)
Pelliccia 2006 ¹⁷	380	3(0.8)	650	14 (2.2)	717	44 (6.1)	888	193 (21.7)	1027	319 (31.1)	671	533 (79.4)
Pollack 2006 ¹⁹	1388	29 (2.1)	1133	57 (5.0)	607	61 (10.1)	447	87 (19.5)	231	51 (22.1)	123	50 (40.7)
Sanchis 2005 ²¹	19	0 (0)	147	4 (2.7)	195	11 (5.6)	152	10 (6.6)	102	9 (8.8)	31	8 (25.8)
Tong 2005 ²³	155	1 (0.7)	183	4 (2.2)	222	13 (5.7)	173	20 (11.6)	132	25 (18.9)	92	35 (38)

Appendix 3 (as supplied by the authors). Number of patients and frequency of cardiac events in each stratum of the TIMI Risk Score for 15,660 patients in the 8 studies included in the quantitative synthesis.

Appendix to: Hess EP, Agarwal D, Chandra S, et al. Diagnostic accuracy of the TIMI risk score in patients with chest pain in the emergency department: a meta-analysis. *CMAJ* 2010. DOI: 10.1503/cmaj.092119.

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Total	3429 62 (1.8) 3632 144 (4.0) 2862 237 (8.3) 2531 487 (19.2) 2018 530 (26.3) 1188 727 (61.2)										
Referer	nces										
1.	Body R, Carley S, McDowell G, et al. Can a modified thrombolysis in myocardial infarction risk score outperform the original for risk stratifying emergency department patients with chest pain? <i>Emerg Med J</i> 2009;26:95-9.										
2.	Campbell CF, Chang AM, Sease KL, et al. Combining thrombolysis in myocardial infarction risk score and clear-cut alternative diagnosis for chest pain risk stratification. Am J Emerg Med 2009;27:37-42.										
3.	Hess EP, Perry JJ, Calder LA, et al. Prospective validation of a modified thrombolysis in myocardial infarction risk score in emergency department patients with chest pain and possible acute coronary syndrome. Acad Emerg Med. In press.										
4.	Lyon R, Morris AC, Caesar D, et al. Chest pain presenting to the emergency department-to stratify risk with GRACE or TIMI? Resuscitation 2007;74:90-3.										
5.	Pelliccia F, Salvini P, Cartoni D, et al. Frequency and clinical correlates of changes in thrombolysis in myocardial infarction risk score during observation period at emergency department in "low-risk" patients with acute chest pain. Am J Cardiol 2006;97:781-4.										
6.	Pollack CV Jr, Sites FD, Shofer FS, et al. Application of the TIMI risk score for unstable angina and non-ST elevation acute coronary syndrome to an unselected emergency department chest pain population. Acad Emerg Med 2006;13:13-8.										
7.	Sanchis J, Bodi V, Nunez J, et al. New risk score for patients with acute chest pain, non-ST-segment deviation, and normal troponin concentrations: a comparison with the TIMI risk score. J Am Coll Cardiol 2005;46:443-9.										
8.	Tong KL, Kaul S, Wang XQ, et al. Myocardial contrast echocardiography versus thrombolysis in myocardial infarction score in patients presenting to the emergency department with chest pain and a nondiagnostic electrocardiogram. J Am Coll Cardiol 2005;46:920-7.										