

Supplementary appendix

This appendix formed part of the original submission and has been peer reviewed.
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Supplement to: Goshua G, Pine AB, Meizlish ML, et al. Endotheliopathy in COVID-19-associated coagulopathy: evidence from a single-centre, cross-sectional study. *Lancet Haematol* 2020; published online June 30. [https://doi.org/10.1016/S2352-3026\(20\)30216-7](https://doi.org/10.1016/S2352-3026(20)30216-7).

Appendix Table 1. Additional patient characteristics. Anticoagulation treatments, intubation status, and presence of acute respiratory distress syndrome are shown at the time at which coagulation factors were drawn. Abbreviations: ACE, angiotensin converting enzyme; ARB, angiotensin II receptor blocker; ARDS, acute respiratory distress syndrome.

	ICU (n = 48)	Non-ICU (n = 20)
History of cigarette smoking	3 (6%)	3 (15%)
Tocilizumab	46 (96%)	2 (10%)
Antihypertensive medication use	26 (54%)	8 (40%)
ACE inhibitor or ARB	15 (31%)	3 (15%)
Other antihypertensive medication	18 (38%)	6 (30%)
Statin use	15 (31%)	5 (25%)
No anticoagulation	3 (6%)	0 (0%)
Prophylactic anticoagulation	22 (46%)	19 (95%)
Intermediate-dose anticoagulation	13 (27%)	0 (0%)
Therapeutic anticoagulation	10 (21%)	1 (5%)
ARDS (PaO₂/FiO₂ < 300)	28 (58%)	0 (0%)

Appendix Figure 1. Correlations matrix with coagulation factors for (A) all patients, (B) ICU patients.

Correlations of statistical significance ($P < 0.050$) are denoted with the P value in italics below the correlation coefficient. Abbreviations: DD, D-dimer; TAT, thrombin-antithrombin complexes; VWF:Ag, von Willebrand factor antigen; sP-selectin, soluble P-selectin; sTM, soluble thrombomodulin; sCD40L, soluble CD40 ligand.

