Supplementary Online Content

Pollock BD, Herrin J, Neville MR, et al. Association of do-not-resuscitate patient case mix with publicly reported riskstandardized hospital mortality and readmission rates. *JAMA Netw Open*. 2020;3(7):e2010383. doi:10.1001/jamanetworkopen.2020.10383

eTable. Sensitivity Analysis: Results from Expanding DNR Definition to Include DNR At Any Time During Inpatient Stay Versus the Main Analysis (POA DNRs Only)

eFigure 1. Patient-Level 30-Day Mortality Condition-Specific Age-Adjusted Associations Between Elixhauser Index and Probability of Having a Present-on-Admission DNR

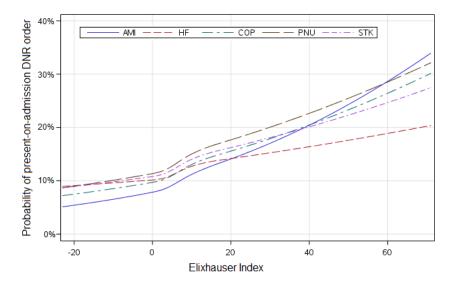
eFigure 2. Hospital-Level 30-Day Mortality Condition-Specific Distributions of Observed Present-on-Admission DNR and Observed/Expected Present-on-Admission DNR

This supplementary material has been provided by the authors to give readers additional information about their work.

eTable. Sensitivity Analysis: Results from Expanding DNR Definition to Include DNR At Any Time During Inpatient Stay Versus the Main Analysis (POA DNRs Only)

30-day mortality cohorts	AMI		HF		Stroke		Pneumonia		COPD	
Analysis	Main	Sensitivity	Main	Sensitivity	Main	Sensitivity	Main	Sensitivity	Main	Sensitivity
DNR prevalence	12%	15%	16%	19%	16%	20%	20%	24%	12%	15%
1 st quintile, mean 30-day RSMR	12.53	12.62	10.71	11.32	13.03	13.23	14.98	15.56	8.11	8.29
2 nd quintile, mean 30-day RSMR	12.55	12.69	10.87	11.33	13.35	13.49	15.35	15.58	8.16	8.37
3 rd quintile, mean 30-day RSMR	12.57	12.82	11.22	11.57	13.82	13.91	15.42	15.76	8.24	8.49
4 th quintile, mean 30-day RSMR	12.64	12.88	11.52	11.85	13.96	14.15	15.66	16.02	8.51	8.76
5 th quintile, mean 30-day RSMR	12.94	13.17	11.73	12.10	14.25	14.43	15.80	16.00	8.52	8.78
30-day readmission cohorts	A	MI	ł	ΗF	Str	oke	Pneu	monia	CC	OPD
30-day readmission cohorts Analysis	A Main	MI Sensitivity	H Main	HF Sensitivity	Str -	oke -	Pneu Main	monia Sensitivity	CC Main	OPD Sensitivity
			-							
Analysis	Main	Sensitivity	Main	Sensitivity	-	-	Main	Sensitivity	Main	Sensitivity
Analysis DNR prevalence	Main 10%	Sensitivity 12%	Main 15%	Sensitivity 18%	-	-	Main 19%	Sensitivity 22%	Main 12%	Sensitivity 14%
Analysis DNR prevalence 1 st quintile, mean 30-day RSRR	<i>Main</i> 10% 15.89	Sensitivity 12% 15.97	Main 15% 22.06	Sensitivity 18% 22.03	-		<i>Main</i> 19% 16.60	<i>Sensitivity</i> 22% 16.69	<i>Main</i> 12% 19.58	<i>Sensitivity</i> 14% 19.60
Analysis DNR prevalence 1 st quintile, mean 30-day RSRR 2 nd quintile, mean 30-day RSRR	<i>Main</i> 10% 15.89 15.67	Sensitivity 12% 15.97 15.81	Main 15% 22.06 21.99	Sensitivity 18% 22.03 22.09	-		<i>Main</i> 19% 16.60 17.00	Sensitivity 22% 16.69 16.97	<i>Main</i> 12% 19.58 19.71	Sensitivity 14% 19.60 19.67

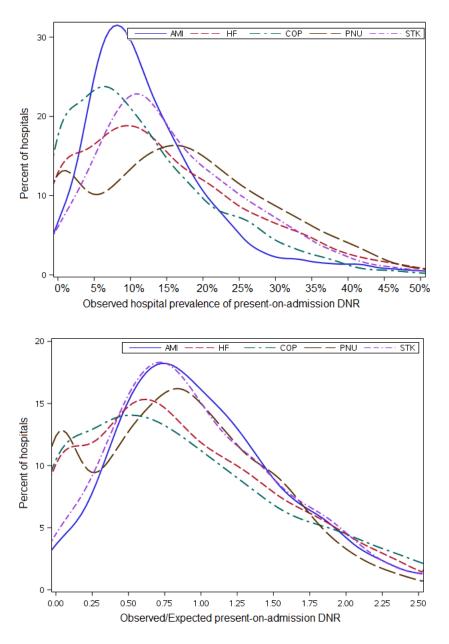
eFigure 1. Patient-Level 30-Day Mortality Condition-Specific Age-Adjusted Associations Between Elixhauser Index and Probability of Having a Present-on-Admission DNR



AMI=Acute Myocardial Infarction; HF=Heart Failure; COP=Chronic Obstructive Pulmonary Disease; PNU=Pneumonia; STK=Stroke; DNR=Do-Not-Resuscitate.

Elixhauser Index is a single integer value ranging from -32 (lowest possible comorbidity burden) to 99 (highest possible comorbidity burden); Modeled using a restricted cubic spline function from a pooled cohort of 4,884,237 condition-specific inpatient encounters among US Medicare beneficiaries from July 2015-June 2018.

eFigure 2. Hospital-Level 30-Day Mortality Condition-Specific Distributions of Observed Present-on-Admission DNR and Observed/Expected Present-on-Admission DNR



AMI=Acute Myocardial Infarction; HF=Heart Failure; COP=Chronic Obstructive Pulmonary Disease; PNU=Pneumonia; STK=Stroke; DNR=Do-Not-Resuscitate.

Density plots represent all US hospitals with a publicly reported 30-day risk-standardized mortality rate (on CMS Hospital Compare website, accessed August 2019) for AMI (n=2,268 hospitals); HF (n=3,488); stroke (n=2,501); pneumonia (n=4,009); COPD (n=3,536). The y-axis indicates percent of all hospitals.