

Supplemental Figure Legends

Supplemental Figure 1. Baseline Risk of Endometrial Cancer According to Bleeding Type and Endometrial Thickness.

We evaluated the baseline risk of endometrial cancer following a sequential diagnostic process according to current guidelines from the American College of Obstetricians and Gynecologists¹¹. Bleeding type was characterized as either initial episode of bleeding or recurrent bleeding (any occurrence of bleeding after prior evaluation for PMB). Endometrial thickness was measured clinically using transvaginal ultrasound. The diamond markers are weighted according to the corresponding number of women within each stratum of diagnostic test results. A total of 22 women are missing bleeding type information; the risk of EC in these women is 0%. Abbreviations: EC, endometrial cancer; PMB, postmenopausal bleeding; ET, endometrial thickness; TVUS, transvaginal ultrasound

Supplemental Figure 2. Baseline Risk of Endometrial Cancer According to Bleeding Type and Endometrial Thickness Among Women Not Currently Using Hormones.

We evaluated the combined baseline risks of endometrial cancer and endometrial intraepithelial neoplasia combined following a sequential diagnostic process according to current guidelines from the American College of Obstetricians and Gynecologists¹¹ among women not currently using hormones. Bleeding type was characterized as either initial episode of bleeding or recurrent bleeding (any occurrence of bleeding after prior evaluation for PMB). Endometrial thickness was measured clinically using transvaginal ultrasound. The diamond markers are weighted according to the corresponding number of women within each stratum of diagnostic test results. A total of 14 women are missing bleeding type information; the risk of EC/EIN in these women is 7.1%. Abbreviations: EC, endometrial cancer; EIN, endometrial intraepithelial neoplasia; PMB, postmenopausal bleeding; ET, endometrial thickness; TVUS, transvaginal ultrasound

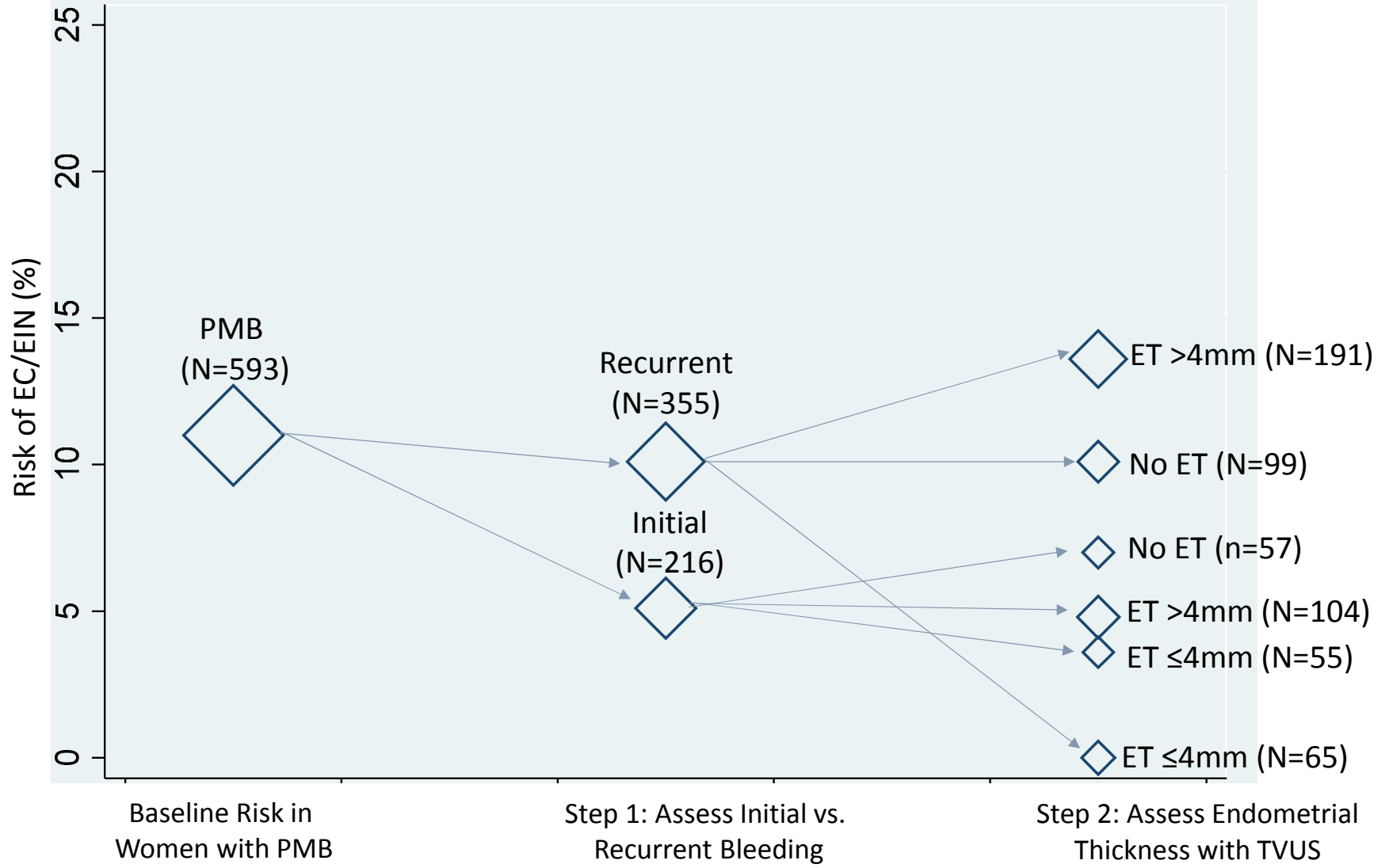
Supplemental Figure 3. Baseline Risk of Endometrial Cancer and According to Age and Endometrial Thickness.

We evaluated the baseline risk of endometrial cancer using age at a cutoff of 60 years (<60 and ≥60) as an initial risk stratifier. Endometrial thickness was measured clinically using transvaginal ultrasound. The diamond markers are weighted according to the corresponding number of women within each stratum of diagnostic test results. Abbreviations: EC, endometrial cancer; PMB, postmenopausal bleeding; ET, endometrial thickness; TVUS, transvaginal ultrasound

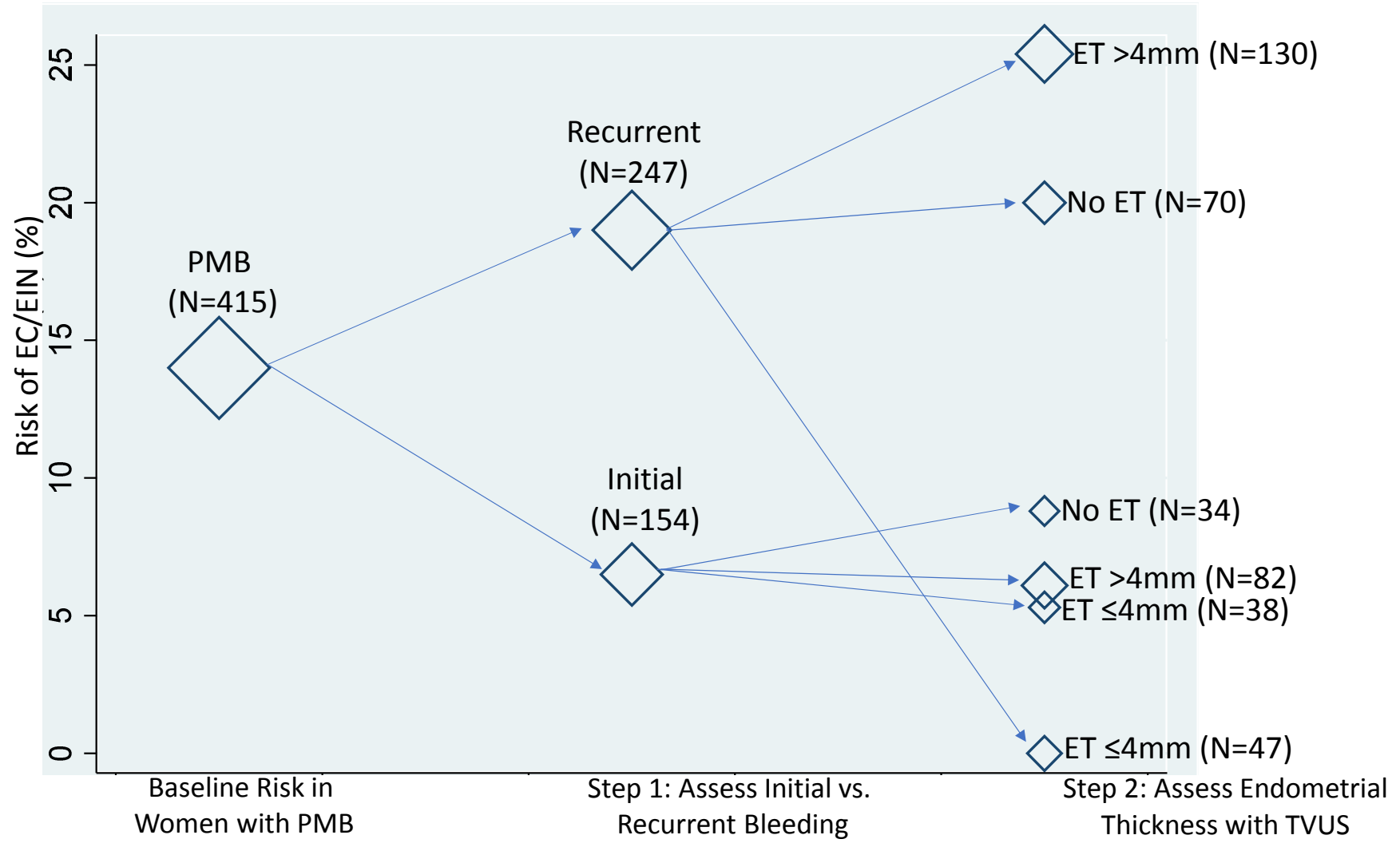
Supplemental Figure 4. Baseline Risk of Endometrial Cancer and According to Age and Endometrial Thickness Among Women Not Currently Using Hormones.

We evaluated the combined baseline risks of endometrial cancer and endometrial intraepithelial neoplasia using age at a cutoff of 60 years (<60 and ≥60) as an initial risk stratifier. Endometrial thickness was measured clinically using transvaginal ultrasound. The diamond markers are weighted according to the corresponding number of women within each stratum of diagnostic test results. Abbreviations: EC, endometrial cancer; EIN, endometrial intraepithelial neoplasia; PMB, postmenopausal bleeding; ET, endometrial thickness; TVUS, transvaginal ultrasound

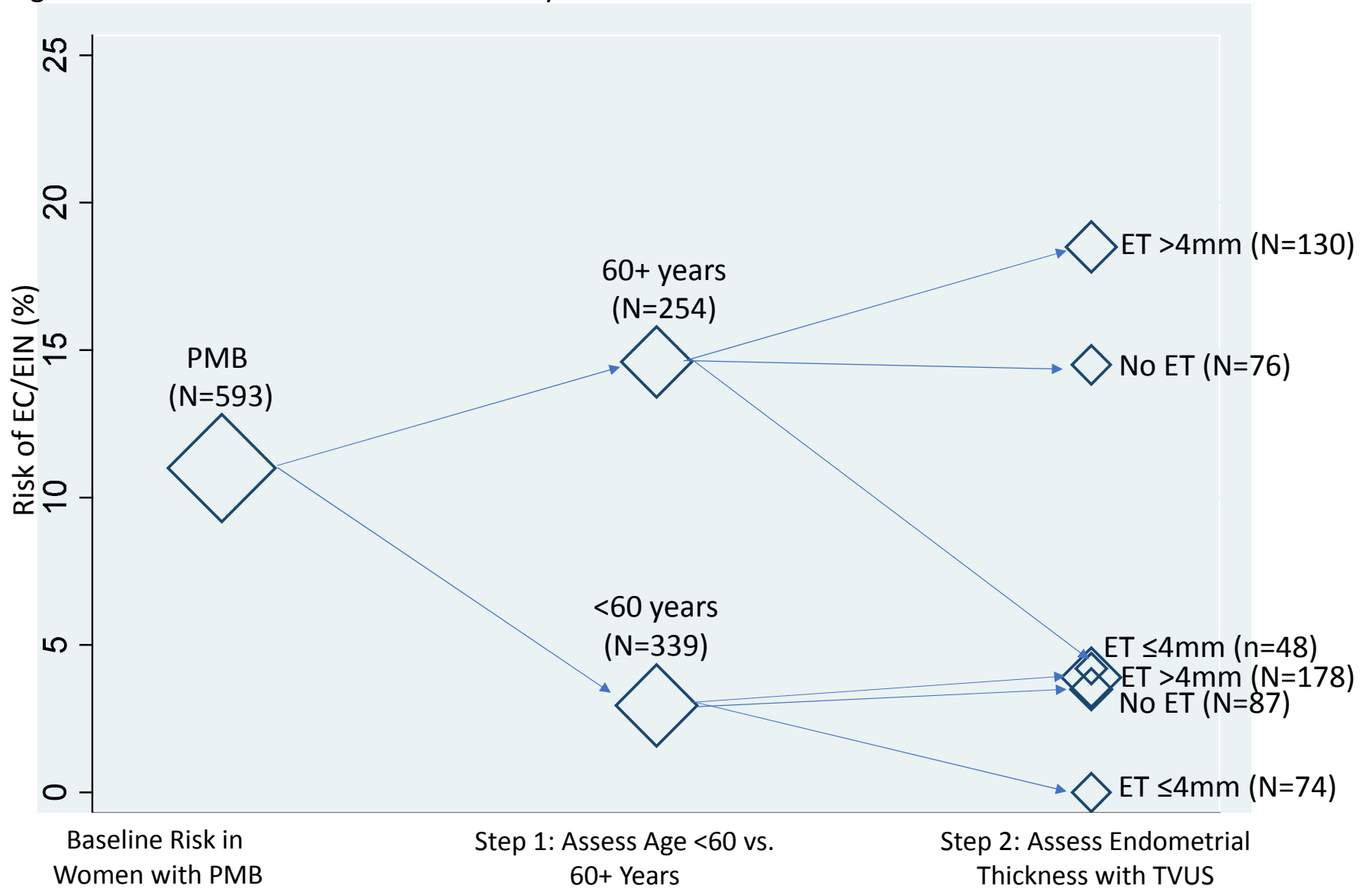
Supplemental Figure 1 – Risk of Endometrial Cancer only



Supplemental Figure 2 – Risk of EC/EIN Among Women with PMB not Using Hormones



Supplemental Figure 3 – Risk of Endometrial Cancer only



Supplemental Figure 4 – Risk of EC/EIN Among Women with PMB not Using Hormones

