

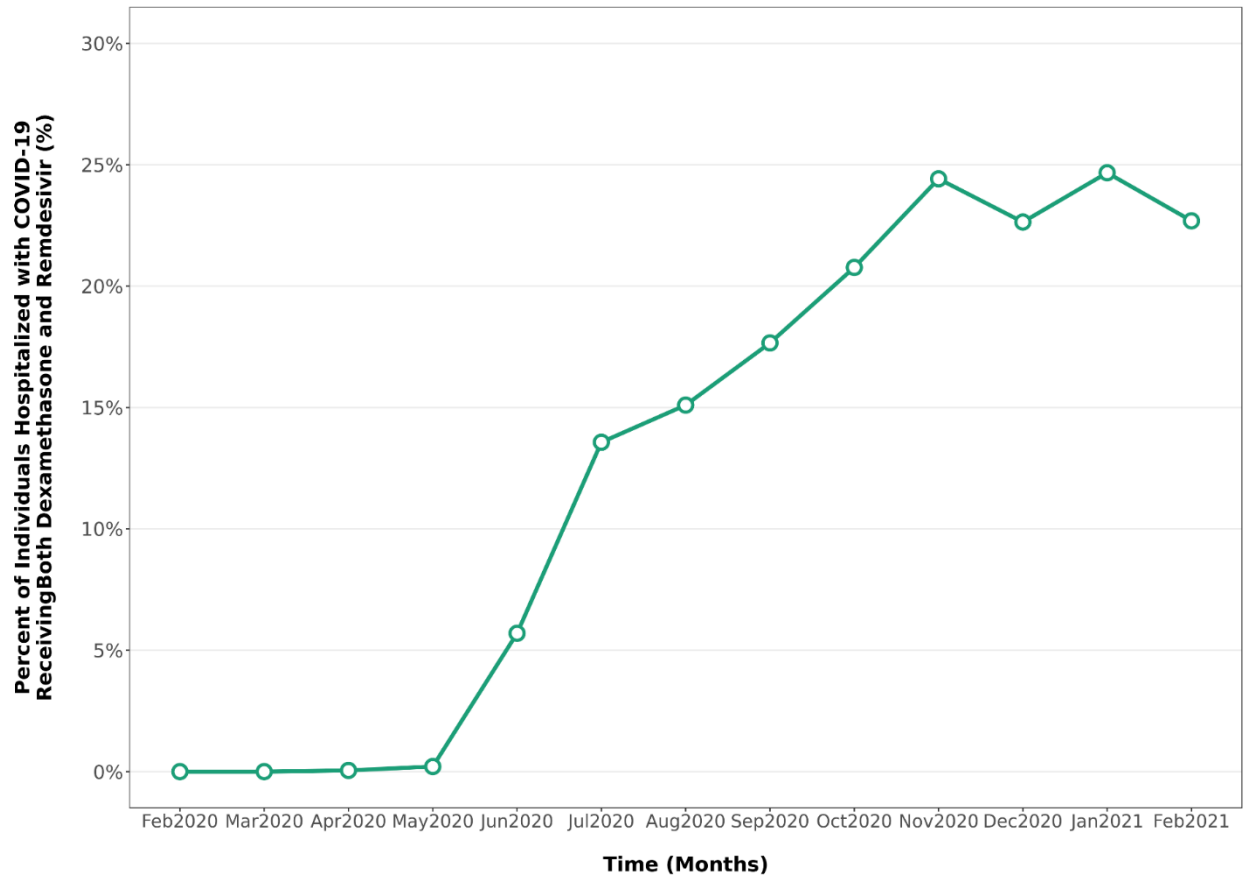
Supplementary Material*

Mehta HB, An H, Andersen KM, et al. Use of hydroxychloroquine, remdesivir, and dexamethasone among adults hospitalized with COVID-19 in the United States. A retrospective cohort study. *Ann Intern Med.* 17 August 2021. [Epub ahead of print]. doi:10.7326/M21-0857

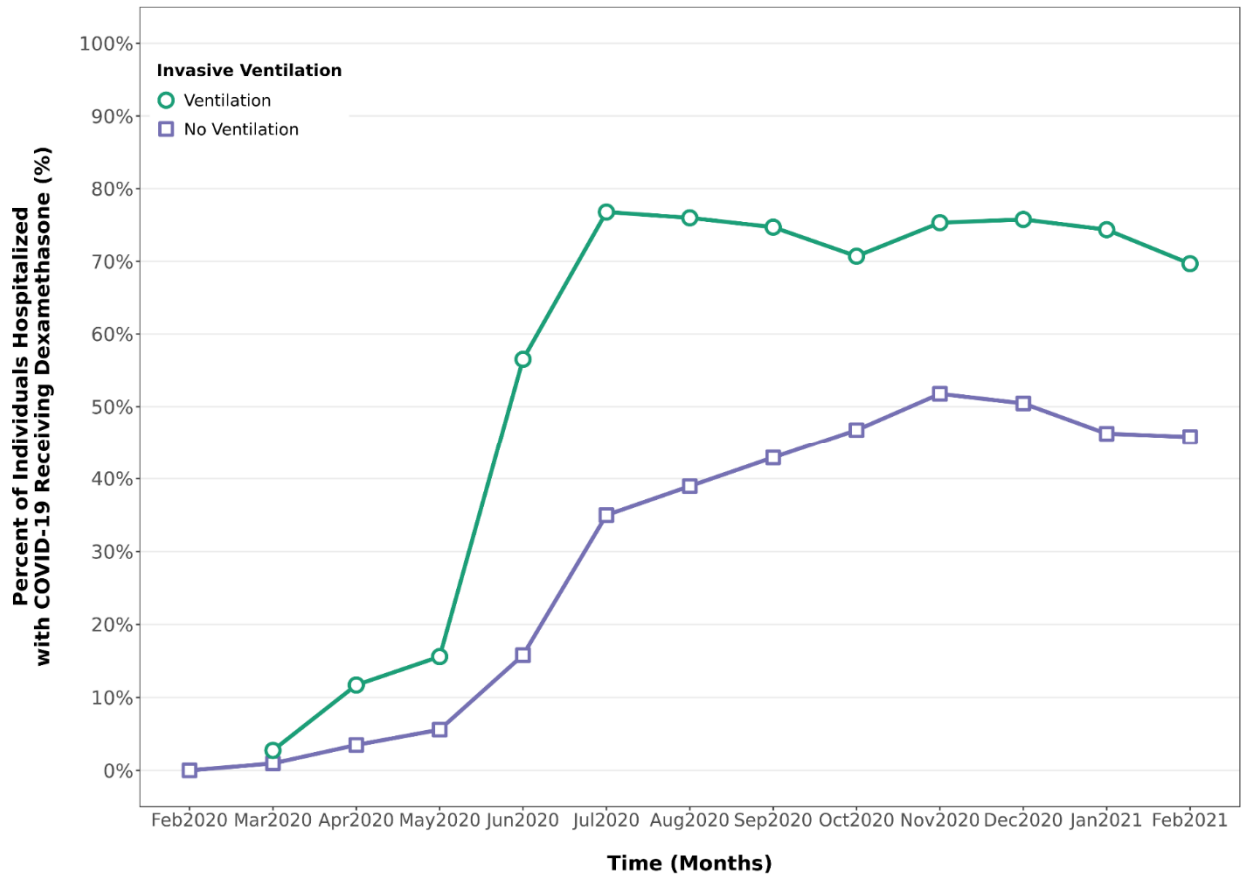
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* This supplementary material was provided by the authors to give readers further details on their article. The material was reviewed but not copyedited.

Supplement Figure 1. Combined use of remdesivir and dexamethasone among individuals hospitalized with COVID-19 in the National COVID Cohort Collaborative, February 1, 2020 – February 28, 2021.

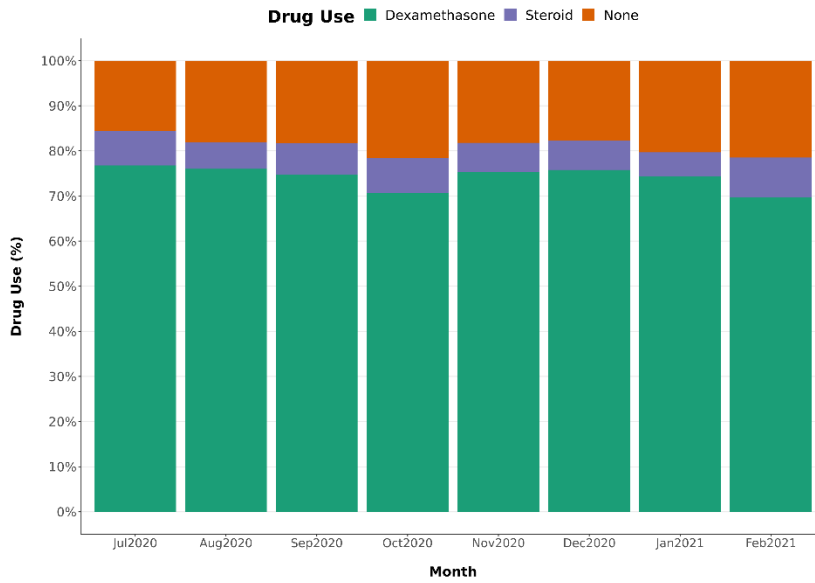


Supplement Figure 2. Use of dexamethasone among individuals hospitalized with COVID-19 in the National COVID Cohort Collaborative, stratified by mechanical ventilation status, February 1, 2020 – February 28, 2021.

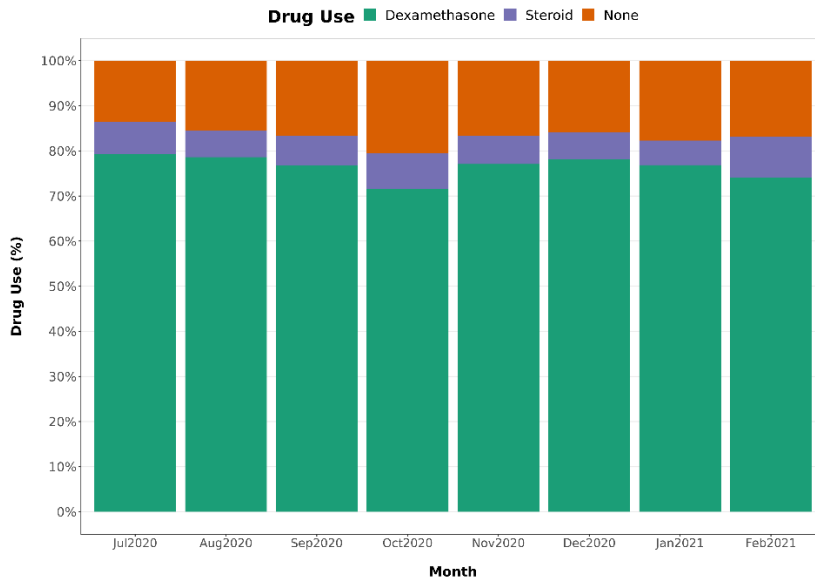


Supplement Figure 3. Dexamethasone and other corticosteroid use among mechanically ventilated patients following the release of the RECOVERY trial results, July 1, 2020 – February 28, 2021.

A) Among all patients

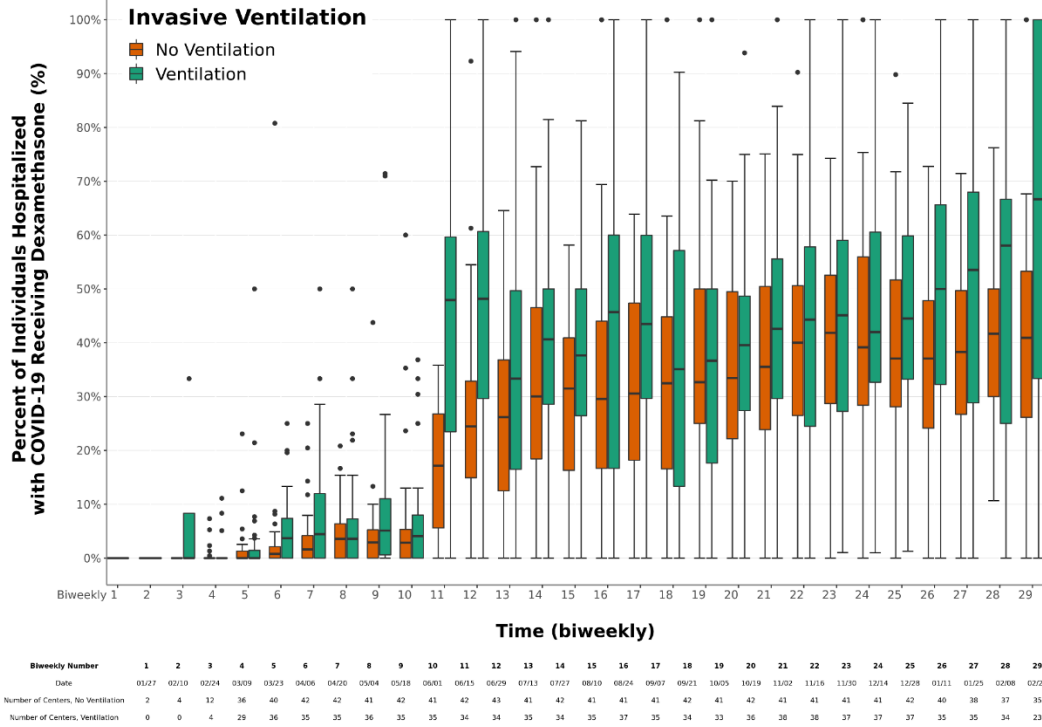


B) Among patients who remained hospitalized for 2 days or more

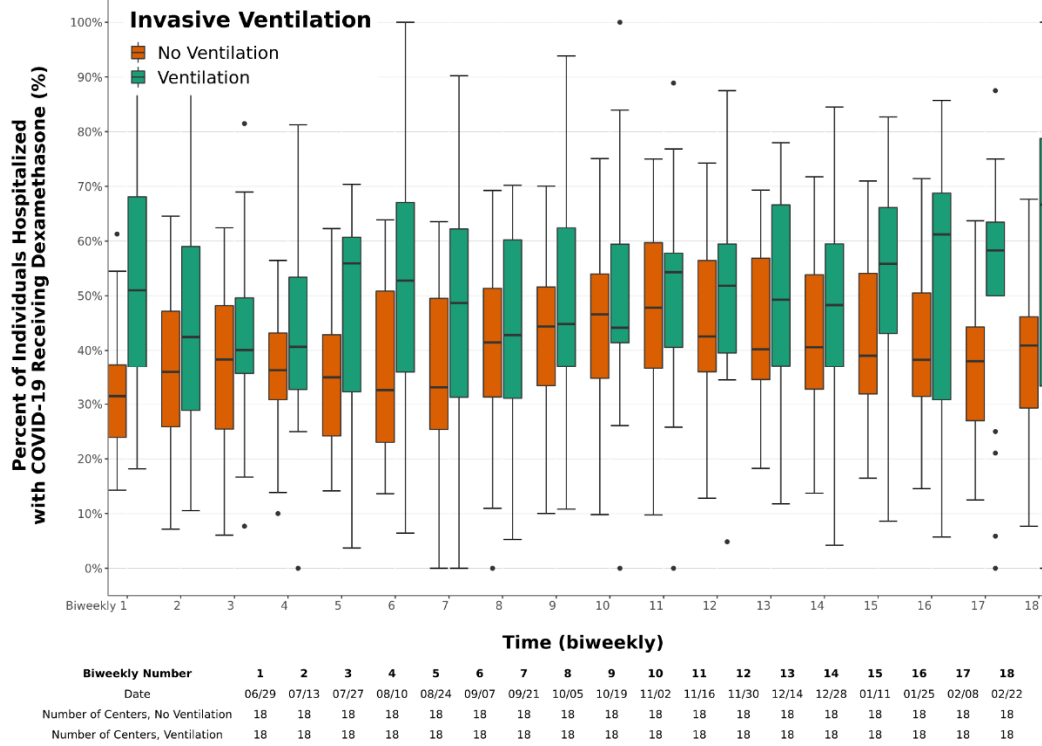


Supplement Figure 4. Variation in dexamethasone use across health centers in the National COVID Cohort Collaborative over time, stratified by mechanical ventilation status.

A) Among all centers from February 2020 to February 2021

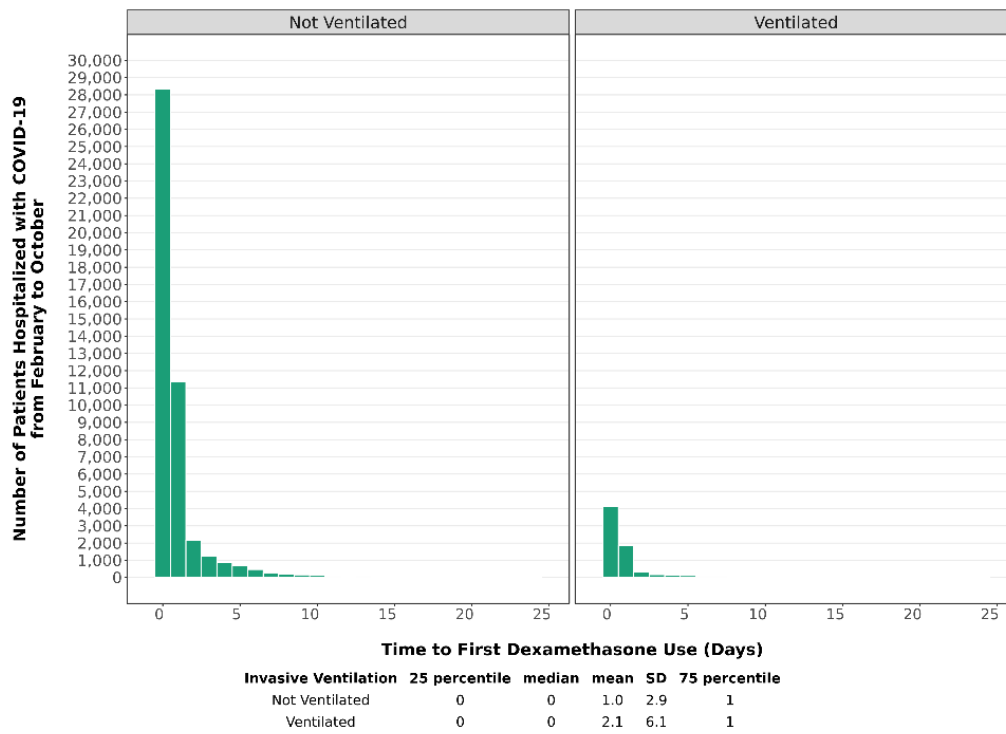


B) Among centers with data from July 2020 to February 2021

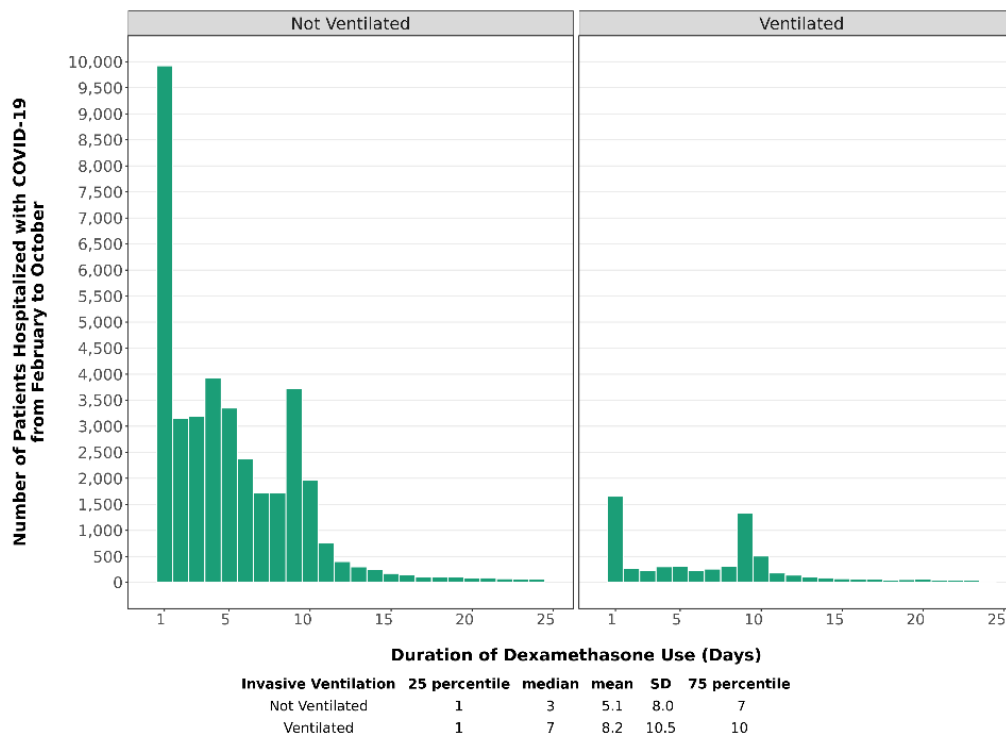


Supplement Figure 5. Time to first dexamethasone use and duration of dexamethasone use among hospitalized adults with COVID-19 in the U.S. from July 1, 2020 – February 28, 2021.

A) Time to first dexamethasone use

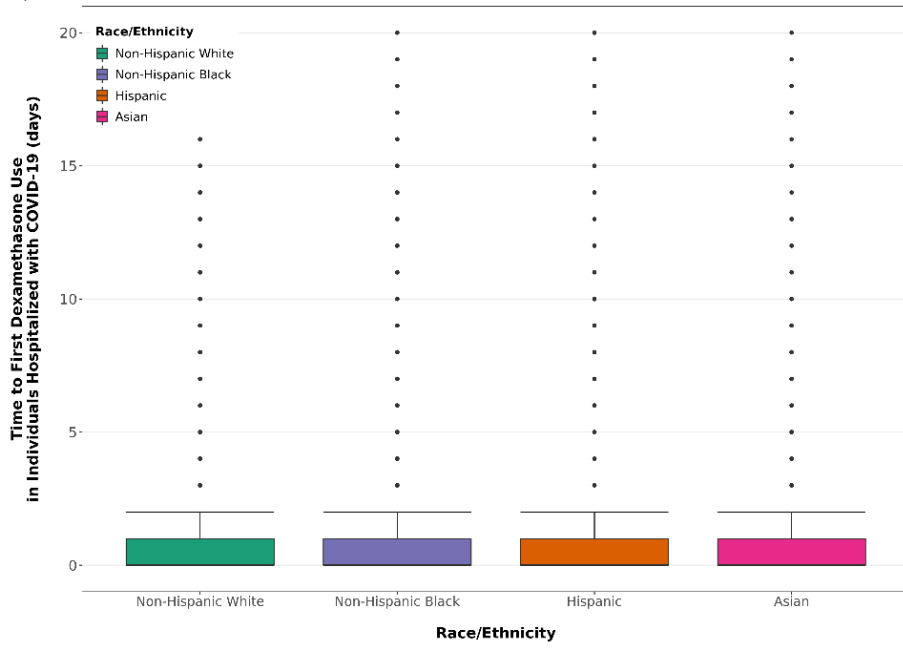


B) Duration of dexamethasone use

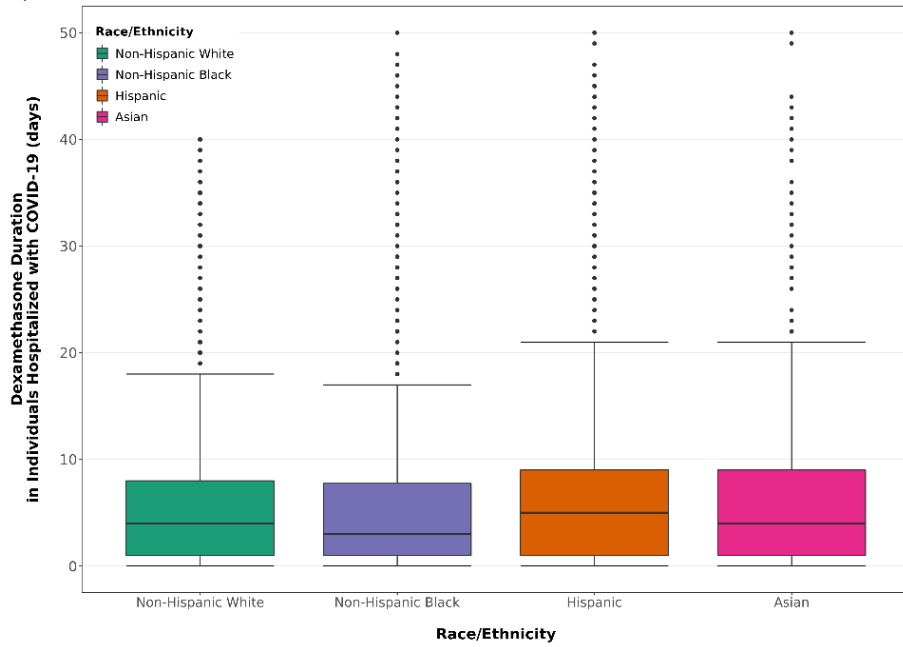


Supplement Figure 6. Variation in time to dexamethasone initiation and duration of dexamethasone use stratified by race/ethnicity, February 1, 2020 – February 28, 2021.

A) Dexamethasone initiation

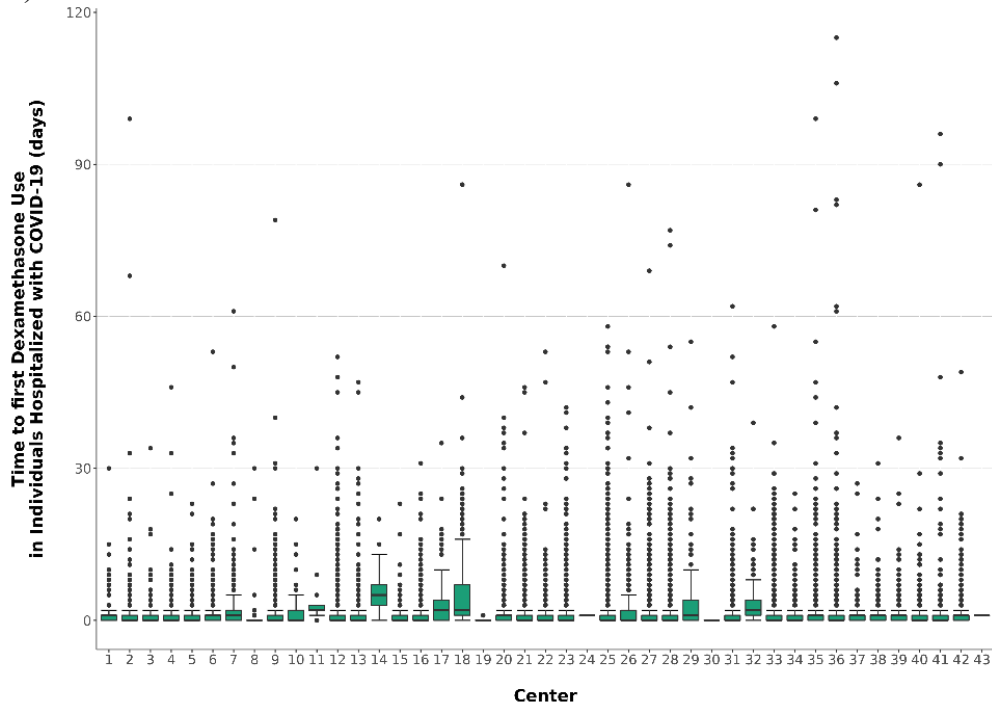


B) Dexamethasone duration

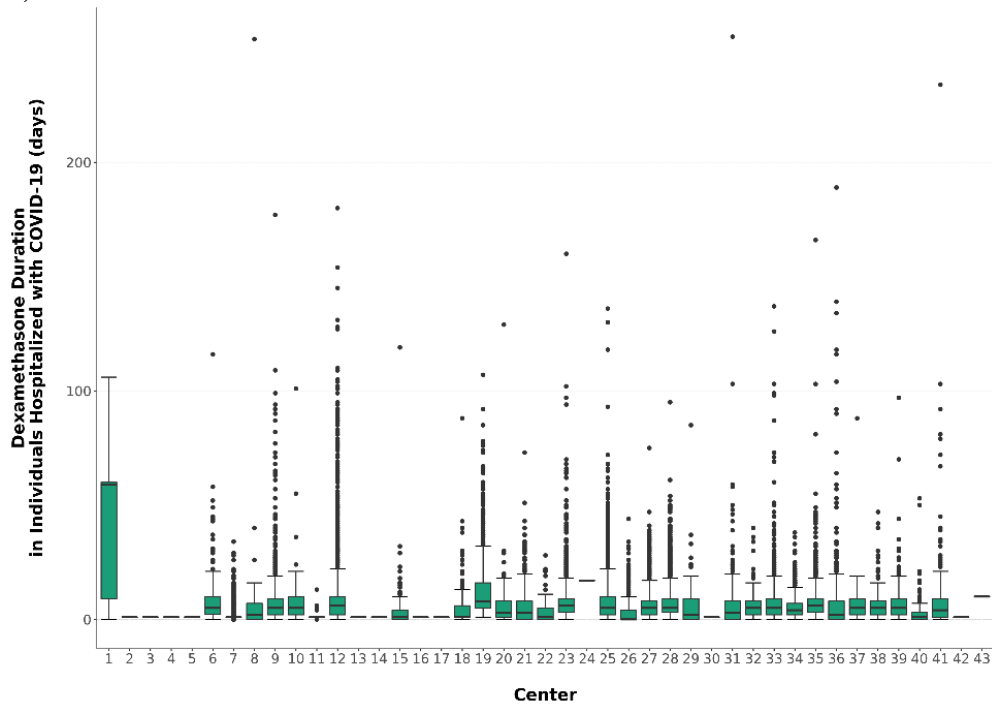


Supplement Figure 7. Variation in time to dexamethasone initiation and duration of dexamethasone use stratified by centers, February 1, 2020 – February 28, 2021.

A) Dexamethasone initiation



B) Dexamethasone duration



Supplement Table. List of ICD-10-CM diagnosis and SNOMED codes.

ICD-10-CM Code	Diagnosis Name	Confidence Level
B97.21	SARS-associated coronavirus as the cause of diseases classified elsewhere	Strong positive prior to 4/1/2020; weak positive after 4/1/2020
B97.29	Other coronavirus as the cause of diseases classified elsewhere	Strong positive prior to 4/1/2020; weak positive after 4/1/2020
U07.1	2019-nCoV acute respiratory disease	Strong positive
Z11.59	Screening for viral diseases	Asymptomatic
Z20.828	Contact with and (suspected) exposure to other viral communicable diseases	Weak positive
B34.2	Coronavirus infection, unspecified	Weak positive
R50.X	Fever	Weak positive
R05.X	Cough	Weak positive
R06.0X	Dyspnea	Weak positive
J12.X; J18.X	Pneumonia	Weak positive
J20.X; J40.X	Bronchitis (acute or nonspecified)	Weak positive
J21.X	Acute bronchiolitis	Weak positive
J96.X	Respiratory failure	Weak positive
J22.X	Unspecified acute lower respiratory infection	Weak positive
J06.9	Acute upper respiratory infection, unspecified	Weak positive
J98.8	Other specified respiratory disorders	Weak positive
J80.X	Acute respiratory distress syndrome	Weak positive
R43.0	Anosmia	Weak positive
R43.2	Parageusia	Weak positive
R07.1	Chest pain on breathing	Weak positive
R68.83	Chills (without fever)	Weak positive
SNOMED Code	Name	Confidence Level
840539006	Disease caused by 2019 novel coronavirus (disorder)	Strong positive
840544004	Suspected disease caused by 2019 novel coronavirus (situation)	Strong positive
840546002	Exposure to severe acute respiratory syndrome coronavirus 2 (event)	Weak positive
103001002	Feeling feverish (finding)	Weak positive
11833005	Dry cough (finding)	Weak positive
267036007	Dyspnea (finding)	Weak positive
28743005	Productive cough (finding)	Weak positive

36955009	Loss of taste (finding)	Weak positive
426000000	Fever greater than 100.4 Fahrenheit	Weak positive
44169009	Loss of sense of smell (finding)	Weak positive
49727002	Cough (finding)	Weak positive
135883003	Cough with fever (finding)	Weak positive
161855003	Complaining of shivering (finding)	Weak positive
161939006	Breathless - moderate exertion (finding)	Weak positive
161940008	Breathless - mild exertion (finding)	Weak positive
161941007	Dyspnea at rest (finding)	Weak positive
2237002	Pleuritic pain (finding)	Weak positive
23141003	Gasping for breath (finding)	Weak positive
247410004	Painful cough (finding)	Weak positive
274640006	Fever with chills (finding)	Weak positive
274664007	Chest pain on breathing (finding)	Weak positive
284523002	Persistent cough (finding)	Weak positive
386661006	Fever (finding)	Weak positive
409702008	Hyperpyrexia (finding)	Weak positive
426976009	Pain provoked by breathing (finding)	Weak positive
43724002	Chill (finding)	Weak positive
60845006	Dyspnea on exertion (finding)	Weak positive
75483001	Breathing painful (finding)	Weak positive

ICD-10-CM International Classification of Diseases, Tenth Revision, Clinical Modification; **SNOMED** Systematized Nomenclature of Medicine.

Note: Using the N3C definition, we defined individuals as COVID-positive if they had at least one positive test result for any COVID-19 diagnostic or antibody test, one or more of the “strong positive” diagnosis codes, or two or more of the “weak positive” diagnosis codes from the International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) or Systematized Nomenclature of Medicine (SNOMED) codes (**eTable 1**).