

Supplemental Table 1 List of Variables with Corresponding International Classification of Diseases, Tenth Revision, Codes

Diagnosis	ICD Codes
Inclusion Criteria ICD-10 Codes	
Liver disease without mention of alcohol (NAFLD)	K721xx, K729xx, K740, K741, K742, K746xx, K758xx, K759, K760, K7689, K769, K77
Exclusion Criteria ICD-10 Codes	
Alcohol use disorder	G621xx, F10xx, I426, Elixhauser comorbidity
Chronic liver disease with mention of alcohol	K70xx
Autoimmune hepatitis	K754
Budd-Chiari syndrome	I820
Chronic passive congestion of liver	K761
Clonorchiasis	B661
Disorders of porphyrin and bilirubin metabolism	E80xx
Echinococcus of liver	B670, B675, B678
Fascioliasis	B663
Fabry disease	E7521
Gaucher disease	E7522, E770, E771

Hemochromatosis	E8311.xx
Hepatitis A virus	B15xx
Hepatitis B virus	B16xx, B180, B181, B191xx
Hepatitis C virus	B171xx, B192xx, B182
Unspecified and other disorders of lipoprotein metabolism	E788xx, E789
Opisthorchiasis	B660
Amylodosis	E85xx
Defects in the complement system	D841
Other specified/unspecified disorders of the liver	K71.xx, K74.4, K75.0-4, K76.2-5, K73xx
Primary biliary cholangitis	K74.3, K74.5
Primary sclerosing cholangitis	K83.01
Syphilis of the liver	A52.74
Wilson's disease	E8301
Other viral hepatitis	B170, B172, B178, B179, B188, B189, B190, B1991
Cirrhosis	K74, K74.6, K74.02, K74.69, K70.30, K70.31, K70.3, K71.7,
Outcomes ICD-10 Codes	

Acute Kidney Injury	N17 / N17.9 , N17.1 , N17.2 , N17.8 , N17.0
Hypotensive Shock	R57.1 , R57.9 , I95.9
Shock requiring pressors	3E030XZ, 3E033XZ, 3E040XZ, 3E043XZ, 3E050XZ, 3E053XZ, 3E060XZ, 3E063XZ
Sepsis	A419, R6520, R6521, R652, A419, A4159, A4150, A4000, A401, A403, A411, A412, A413, A414, A4151, A4152, A4153, A4181, A4101, A4102, A40, A41, A415, A021, A327, A5486, B377, A410, A408, A418, A4189, A419, A409, A408
Acute respiratory failure	J96.0, J96.01, J96.02
Acute MI (STEMI and NSTEMI)	I21.x, I22.x
Acute liver failure	K72.0 , K72.01
Blood transfusion	30233N1
Rate of early endoscopy (>1 day)	0DJ08ZZ (we'll have to check dates from DOA)
Mean time to endoscopy	0DJ08ZZ
Need for Endotracheal Intubation	OBH17EZ, 0BH18EZ
Need for dialysis	5A1D00Z, 5A1D60Z, 3E1M39Z

Elixhauser group Corresponding ICD-10 coding algorithms for Elixhauser Comorbidities

Congestive heart failure	I09.9, I11.0, I13.0, I13.2, I25.5, I42.0, 142.5-I42.9, I43.x, I50.x, P29.0
Cardiac arrhythmia	I44.1-I44.3, I45.6, I45.9, I47.x-I49.x, ROO O, ROO.1, ROO.8, T82.1, Z45.0, Z95.0
Valvular disease	A52.0, I05.x-I08.x, I09.1, I09.8, I34.x-I39.x, Q23.O-Q23.3, Z95.2, Z95.4
Pulmonary circulation disorders	I26.x, I27.x, I28.0, I28.8, I28.9
Peripheral vascular disorders	I70.x, I71.x, I73.1, I73.8, I73.9, I77.1, I79.0, I79.2, K55.1, K55.8, K55.9, Z95.8, Z95.9
Hypertension	110.x, I11.x-I13.x, I15.x
Paralysis	G04.1, G11.4, G80.1, G80.2, G81.x, G82.x, G83.0-G83.4, G83.9
Neurodegenerative disorder	G10.x-G 13.x, G20.x-G22.x, G25.4, G25.5, G31.2, G31.8, G31.9, G32.x, G35.x-G37.x, G40.x, G41.x, G93.1, G93.4, R47.0, R56.x
Chronic pulmonary disease	I27.8, 127.9, J40.x-J47.x, J60.x-J67.x, J68.4, J70.1, J70.3
Diabetes, uncomplicated	E10.0, E10.1, E10.9, E11.0, E11.1, E11.9, E12.0, E12.1, E12.9, E13.0, E13.1, E13.9, E14.0, E14.1, E14.9
Diabetes, complicated	E10.2-E10.8,

E11.2-E11.8, E12.2-E12.8, E13.2-E13.8, E14.2-E14.8

Hypothyroidism	E00.x-E03.x, E89.0
Renal failure	I12.0, I13.1, N18.x, N19.x, N25.0, Z49.0-Z49.2, Z94.0, Z199.2
Liver disease	B18.x, I85.x, I86.4, I98.2, K70.x, K71.1, K71.3-K71.5, K71.7, K72.x-K74.x, K76.0, K76.2-K76.9. Z94.4
Peptic ulcer disease, no bleeding	K25.7, K25.9, K26.7, K26.9, K27.7, K27.9, K28.7, K28.9
AIDS/HIV	B20.x-B22.x, B24.x
Lymphoma	C81.x-C85.x, C88.x, C96.x, C90.0, C90.2
Metastatic cancer	C77.x-C80.x
Solid tumor, without metastasis	C00.x-C26.x, C30.x-C34.x, C37.x-C41.x, C43.x, C45.x-C58.x, C60.x-C76.x, C97.x
Rheumatoid arthritis/collagen disease	L94.0, L94.1, L94.3, M05.x, M06.x, M08.x, M12.0, M12.3, M30.x, M31.0-M31.3, M32.x-M35.x, M45.x, M46.1, M46.8, M46.9

Coagulopathy	D65-D68.x, D69.1, D69.3-D69.6
Obesity	E66.x
Weight loss	E40.x-E46.x, R63.4, R64
Fluid and electrolyte disorders	E22.2, E86.x, E87.x
Blood loss anemia	D50.0
Deficiency anemia	D50.8, D50.9, D51.x-D53.x
Alcohol abuse	F10, E52, G62.1, I42.6, K29.2, K70.0, K70.3, K70.9, T51.x, Z50.2, Z71.4, Z72.1
Drug abuse	F11.x-F16.x, F18.x, F19.x, Z71.5, Z72.2
Psychosis	F20.x, F22.x-F25.x, F28.x, F29.x, F30.2, F31.2, F31.5
Depression	F20.4, F31.3-F31.5, F32.x, F33.x, F34.1, F41.2, F43.2

	ICD-10 codes
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Diagnosis codes	
Acute Peptic Ulcer with hemorrhage, site unspecified	K27.0
Ulcer of esophagus with bleeding	K22.11
Acute duodenal ulcer with hemorrhage	K26.0
Angiodysplasia of stomach and duodenum with bleeding	K31.811, K31.819
Dieulafoy lesion of stomach and duodenum	K31.82
Mallory weiss syndrome with hemorrhage	K22.6
Acute gastritis with bleeding	K29.01
Unspecified Chronic gastritis with bleeding	K29.51, K29.61, K29.71
Non-variceal hemorrhage of esophagus	K22.8
Acute gastric ulcer with hemorrhage	K25.0
Peptic ulcer chronic or unspecified with both hemorrhage and perforation	K27.6
Duodenal ulcer chronic or unspecified with hemorrhage	K26.6
Duodenal ulcer chronic or unspecified with both hemorrhage and perforation	K26.2, K26.4
Gastric ulcer acute with chronic or unspecified with both hemorrhage and perforation	K25.6, K25.4

Gastric ulcer acute with both hemorrhage and perforation	K25.2
Gastrojejunal ulcer acute with hemorrhage	K28.0
Gastrojejunal ulcer chronic or unspecified with hemorrhage	K28.4
Peptic ulcer chronic or unspecified with hemorrhage	K27.6
Gastrojejunal ulcer with both hemorrhage and perforation	K28.2
Gastrojejunal ulcer chronic or unspecified with hemorrhage	K28.6
Acute Peptic Ulcer with both hemorrhage and perforation, site unspecified	K27.2
Chronic or unspecified peptic ulcer with hemorrhage	K27.4
Gastroduodenitis with bleeding	K29.81, K29.91

Non-alcoholic Fatty liver disease is a growing problem. We used a national database to identify all patients of non-variceal upper GI bleeding and divided them into 2 cohorts, with and without NAFLD. We found significant differences in the two cohorts with respect to mortality, utilization of healthcare resources and complications. We believe this will be beneficial for physicians in terms of predicting morbidity and prognosis in these patients.