

## Appendix 1 (as supplied by the authors): Diagnosis and Procedure Codes Used to Identify Peripheral Arterial Disease Patients\*

Variable	ICD-9	ICD- 10
Diagnosis codes		
ASO extremities with gangrene	440.24	I70.2
ASO extremities with IC	440.21	I70.2
ASO extremities with ulceration	440.23	I70.2
ASO extremities, unspecified	440.20	I70.2
ASO extremities with rest pain	440.22	I70.2
PVD, unspecified	443.9	I73.9
Generalized and unspecified ASO	440.9	I7.09
Procedure codes		
Amputation of toe		CCI: 1WK93 Records with the following ICD-10 diagnosis codes excluded: C40, D16, D48.0, D48.1, D48.2, Q65-Q79, S70 – S99, T20 – T32
Angiography, extremity, bilateral, radiological		CCI: 3KG10 + variable code: BL (bilateral legs)
MRA lower extremity with or without contrast		CCI: 3KG40
Angiography, extremity, unilateral, radiological		CCI: 3KG10 + variable code: LL (left leg), or RL (right leg)
CT angiogram- abdominal aorta and lower extremity runoff		CCI: 3KG20
Non-invasive physiologic studies of lower extremity arteries		CCI: 3KG30

\*Codes were used in combination with a model-based billing code algorithm validated by Fan and colleagues (20) to identify patients with peripheral arterial disease.

ICD = International Statistical Classification of Diseases; ASO = atherosclerosis; CCI = Canadian Classification of Health Interventions; MRA = magnetic resonance angiography; CT = computed tomography.