

Additional file 4: Table S2. ERC related complications

Event	Definition
Clinically relevant bleed	The presence of melena, hematochezia or hematemesis, in combination with a hemoglobin drop of 1.3 mmol/L or the need for blood transfusion (defined according to the American Society for Gastrointestinal Endoscopy ASGE [39])
Perforation	New development of free gas on imaging with progressive complaints of abdominal discomfort and pain after ERC, or perforation detected at surgery
Respiratory insufficiency	$pO_2 < 60$ mmHg despite FiO_2 of 30% or requiring mechanical ventilation
Cardiovascular complications	
○ Acute myocardial infarction	(1) Typical rise and gradual fall (troponin) or more rapid rise and fall (CK-MB) of biochemical markers of myocardial necrosis with at least one of the following: (a) ischemic symptoms; (b) development of pathologic Q-waves on the ECG; (c) ECG changes indicative of ischemia (ST segment elevation or depression); or (d) coronary artery intervention (e.g., coronary angioplasty) [40, 41].
○ Cerebrovascular accident	Defined by the clinical event and subsequent findings on cross-sectional imaging investigations
○ Shock	Systolic blood pressure below 90 mmHg despite adequate fluid resuscitation or need for inotropic catecholamine support