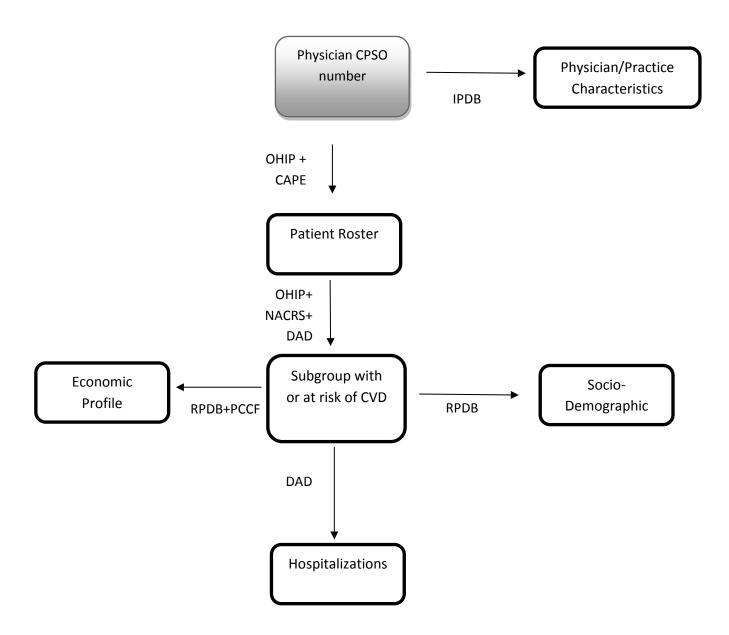
Data Construction Appendix

<u>Data Sources:</u> All data sources upon which this project relies are regularly collected administrative health encounter data housed at the Institute for Clinical Evaluative Sciences (ICES). The following data set are used in this study.

- 1) **CAPE**: The Client Agency Program Enrolment database tracks patient enrolment to individual family physicians.
- 2) **DAD**: The Discharge Administrative Database supplies information on acute care hospitalizations
- 3) **IPDB**: ICES Physician Database contains annual demographic data for physicians as well as information on areas of specialization and workload.
- 4) **NACRS**: The National Ambulatory Care Reporting System provides information on all emergency room encounters.
- 5) **OHIP**: The Ontario Health Insurance Program billing claims system captures provision of care to patients.
- 6) **PCCF**+: Statistics Canada's Postal Code Conversion File allows patients to be attributed to a census dissemination area based on postal code.
- 7) **RPDB**: The Registered Person's Database captures patient demographic information, including age, sex and postal code.

<u>Data Linkage – Graphical Summary:</u>



Summary of Algorithms used to identify patients with CVD

Coronary Artery Disease (CAD)	
Data Sources	DAD/SDS (April 1988 forward)
	NACRS (SDS only) (F2003-04 forward)
	OHIP (July 1991 forward)
Case	• 1 hospital admission with a CAD diagnosis code, or 1 CAD
Ascertainment	OHIP billing code
Codes Used	Acute myocardial infarction ¹
	ICD-9: 410
	ICD-10: I21, I22, I252, I513
	Percutaneous coronary invervention ²
	prcode: 4802, 4803, 4809
	incode: 1IJ50, 1IJ57GQ, 1IJ57GS
	Coronary artery bypass graft surgery ²
	prcode: 481
	incode: 1IJ76
	Cardiac cathetrerization
	prcode: 4892, 4893, 4894, 4895, 4896, 4897, 4898, 4995, 4996, 4997
	incode: 3IP10
	OHIP billing codes: Z442 or G297
Notes	Definition from Tu et al. ³

Cerebral Vascular Disease (CVD) ⁴	
Data Sources	DAD/SDS (April 1988 forward)
	NACRS (SDS only) (F2003-04 forward)
Case	• 1 hospital admission with a CVD diagnosis code
Ascertainment	
Codes Used	ICD-9: 430, 431, 432, 434, 436 (any type)
	ICD-10-CA: I63, I64, G46, G45, H34 (any type)

Ontario Diabetes Database (ICES Derived Cohort) ^{5,6}		
Case	• 1 or 2 OHIP dxcode claims prior to 19 th birth date AND	
Ascertainment	• 1 OHIP claim after 19 th birth date within 2 years	
(Bridge)	(19 th birth date is used as incident date)	
Case	• 2 OHIP dxcodes <u>OR</u>	
Ascertainment	• 1 OHIP feecode OR	
(Adult)	• 1 CIHI admission after 19 th birth date	

Data Sources	OHIP (July 1991 forward)
	DAD/SDS (April 1988 forward)
	NACRS (SDS only) (F2003-04 forward)
Codes Used	ICD-9: 250 (any type)
	ICD-10-CA: E10, E11, E13, E14 (any type)
	OHIP dxcode: 250
	OHIP feecode: Q040, K029, K030
Notes	Gestational Diabetes records excluded
	Incidence not reported for first 3 years

Renal Failure	
Case	• Any one of the 2 OHIP diagnosis codes or 9 ICD-9/ICD-10
Ascertainment	codes within the 5 years prior to cohort entry without kidney
	transplant within the previous five years and without dialysis
	within the previous 1 year.
Data Sources	DAD/SDS (April 1988 forward)
	NACRS (SDS only) (F2003-04 forward)
	OHIP (July 1991 forward)
Inclusion Codes	ICD-9: 4030, 4031, 4039, 4040, 4041, 4049, 585, 586, 5888, 5889,
Used	2504 (any dxcode)
	ICD-10-CA: E102, E112, E132, E142, I12, I13, N08, N18, N19
	OHIP: 403, 585
Exclusion Codes	Kidney Transplant:
Used	ICD-9: V420, 99681
	CCP: 6743, 675
	ICD-10: T861, N165, Z940
	CCI: 1PC85
	OHIP: E762, E769, E771, G347, G348, G408, G409, G412, S434,
	S435, Z631
	Dialysis Codes:
	ICD-9: E1022, E1023, E1122, E1123, E1322, E1323, E1422,
	E1423, N180, T824, Y602, Y612, Y622, Y841, Z49, Z992
	CCP: 5127, 5142, 5143, 5195, 6698
	ICD-10: V451, V560, V568, 36104
	CCI: 1PZ21, 1OT53DATS, 1OT53HATS, 1OT53LATS,
	1SY55LAFT, 7SC59QD, 1KY76
	OHIP: G082, G083, G085, G090, G091, G092, G093, G094,
	G095, G096, G099, G294, G295, G323, G324, G325, G326,
	G327, G330, G331, G332, G333, G336, G860, G861, G862,
	G863, G864, G865, G866, H540, H740, R825, R826, R827, R833,
	R840, R841, R843, R848, R849, R850, R851, R852, R853, R854, R885, Z450, Z451,Z452
	1005, 2450, 2451,2452
Notes	From Fleet JL et al ⁷

Peripheral Vascular Disease (PVD)⁴

Case	• 1 hospital admission with a PVD intervention code <u>AND</u>
Ascertainment	Without specified diagnosis codes on the same abstract
Data Sources	DAD/SDS (April 1988 forward)
	NACRS (SDS only) (F2003-04 forward)
Codes Used	Major:
	• CCP: 96.14, 96.15
	• CCI: 1VQ93, 1VC93, 1VG93
	Minor:
	• CCP: 96.11, 96.12, 96.13 WITHOUT
	o ICD-9: 170, 171, 213, 730, 740-759, 800-900, 901-904,
	940-950 on the abstract
	• CCI: 1WL93, 1WA93, 1WE93, 1WJ93, 1WM93 WITHOUT
	o ICD-10-CA: C40, C41, C46.1, C47, C49, D160,
	M46.2, M86, M87, M89.6, M90.0-M90.5, Q00, Q38-
	Q40, S02.0, S04.0 S09.0, S15, S25, T26 on the
	abstract
	Bypass:
	• CCP: 51.25, 51.29, 50.18 ICD9 <u>WITHOUT</u>
	o ICD-9: 4141, 441, 442 on the abstract
	• CCI: 1KG50, 1KG57, 1KG76, 1KG35HAC1, 1KG35HHC1
	WITHOUT
	o ICD-10-CA: I67.1, I71, I72, I60, I77.0, I79.0, Q codes
	on the abstract

Hypertension (ICES Derived Cohort) ⁸	
Case	• 1 hospital admission with a hypertension diagnosis code OR
Ascertainment	1 OHIP record with a hypertension diagnosis code, followed
	within 2 years by another OHIP record or a hospital admission
	with a hypertension diagnosis code
Data Sources	OHIP (July 1991 forward)
	DAD/SDS (April 1988 forward)
	NACRS (SDS only) (F2003-04 forward)
Codes Used	ICD-9: 401x, 402x, 403x, 404x, 405x (any type)
	ICD-10-CA: I10, I11, I12, I13, I15 (any type)
	OHIP dxcode: 401, 402, 403, 404, 405 (any type)
Notes	Gestational hypertension records excluded
	Generic exclusions do not apply to this cohort

References

- 1) Austin PC1, Daly PA, Tu JV. A multicenter study of the coding accuracy of hospital discharge administrative data for patients admitted to cardiac care units in Ontario. Am Heart J 2002;144(2):290-6.
- 2) Lee DS, Stitt A, Wang X, Yu JS, Gurevich Y, Kingsbury KJ, Austin PC, Tu JV. Administrative hospitalization database validation of cardiac procedure codes. Med Care 2013;51(4):e22-6.

- 3) Tu JV, Chu A, Donovan LR, Ko DT, Booth GL, Tu K, et al. The Cardiovascular Health in Ambulatory Care Research Team (CANHEART): using big data to measure and improve cardiovascular health and healthcare services. Circ Cardiovasc Qual Outcomes 2015;8(2):204-12.
- 4) Iron K, Gerson A, Lu H, Manuel D. Using Linked Administrative Data to Assess the Clinical and System Impact of Chronic Disease in Ontario. Healthc Q 2011;14(3):23-27.
- 5) Hux J, Ivis F, Flintoft V, Bica A. Diabetes in Ontario: Determination of prevalence and incidence using a validated administrative data algorithm. Diabetes Care 2002;25:512-6.
- 6) Guttman A, Nakhla M, Henderson M, To T, Daneman D, Cauch-Dudek K, et al. Validation of a health administrative data algorithm for assessing the epidemiology of diabetes in Canadian children. Pediatric Diabetes 2010 Mar;11(2):122-8.
- 7) Fleet JL1, Dixon SN, Shariff SZ, Quinn RR, Nash DM, Harel Z, Garg AX. Detecting chronic kidney disease in population-based administrative databases using an algorithm of hospital encounter and physician claim codes. BMC Nephrol 2013;14:81.
- 8) Tu K, Campbell NR, Chen Z, Cauch-Dudek K, McAlister FA. Accuracy of administrative databases in identifying patients with hypertension. Open Med 2007;1(1):18-26.