Supplementary File 4: Test results from the patient with thrombocytopenia and low factor XIII at inadvertent withdrawal of their epidural catheter.

	Preoperative	Postoperative	Reference
			Range
Hb (g/L)	129	133	117-170
PT-INR	1.1	<u>1.5</u>	0.9-1.2
aPTT (s)	27	32	26-33
Plc (x10 ⁶ /L)	175	<u>35</u>	145–387
Multiplate® ADP AUC	60	<u>29</u>	57-113
ROTEM® EXTEM MCF	58	54	50-72
(mm)			
Creatinine (µmol/L)	77	77	45-105
Bilirubin (μmol/L)	8	8	5-25
ALP (μkat/L)	0.75	0.91	0.6-1.8
Fibrinogen (g/L)	2.05	<u>4.50</u>	2.0-4.0
FVII (kIE/L)	0.84	0.77	0.6-1.6
FXII (kIE/L)	0.92	0.72	1.07-1.5
FXIII (kIE/L)	1.06	<u>0.38</u>	0.7-1.4
PIVKA (mg/L)	<u>2.03</u>	<u>2.62</u>	<2.0

Results are underlined to show values outside the reference range.

His preoperative questionnaire and preoperative test results were unremarkable other that the patient reported tablet treated hypertension and a subjective tendency to develop bruises after minor trauma, which had begun around two years ago. The duration of his gastrectomy was 9 hours; 300ml haemorrhage was recorded during the operation and 1130 ml fluid was collected from his drainage during the first 24 hours postoperatively. His Hb decreased from 145 to 122g/L during this period but his first postoperative Plc was 47×10^6 /L. The led to suspicion of infection and he was given a prolonged course of antibiotics with cefuroxime but he did not subsequently develop a clinical infection. His epidural catheter was inadvertently withdrawn on the third postoperative day: shortly afterwards, Plc was measured as 35×10^6 /L; ROTEM results were within the normal range but he had a low FXIII of 0.38 kIE/L. He did not develop any neuraxial complications. At follow up two years after the operation he had returned to subjectively normal health. Underlined values indicate results outside the reference range.