## Supplement 1 - Free text answers in expert questionnaire

In our expert questionnaire participants were asked to suggest additional surgomic features for each surgomic feature category within a free text field. The original answers are listed below.

### New surgomic features

- 1. Surgical field
  - Adhesions
  - Presence of foreign bodies (e.g. compress, needle)
  - Anastomosis technique (in general which techniques were used)
  - Color of esophageal mucosa
  - Dissection with respect to anatomic layers/structures and their reconstruction
  - Number of previous operations
  - Known anatomic variants (e.g., right hepatic artery from superior mesenteric artery)
  - Status post removal of organs/structures

#### 2. Instrument

- Material usage such of clips, gauze or needles
- Movement of instrument (trajectory) (n=2)
- Instrument type
- Experience of team members with specific types of instruments
- Type of instrument in connection with surgical phase, enabling recognition of
  e.g. an error made by the surgical team

Wagner et al. - "Surgomics - Personalized prediction of morbidity, mortality and long-term outcome in surgery using machine learning on multimodal data" - Supplemental material

#### 3. Temporal course of procedure

- Duration of steps/phases (n=6, already included in detailed description of our surgomic feature nr. 17 "duration of surgery")
- Date and starting time of surgery, e.g. Mondays or in the evening the procedure might be less accurate
- o Deterioration from standard procedure

#### 4. Patient

- Texture/color of intestine
- o Texture of stomach

#### 5. Anesthesiological data

- Amount / type of blood products given to patients during surgery (n=3), e.g.
  erythrocytes, platelets, PPSB
- Amount of catecholamines (especially at end of surgery) (n=2)
- Ventilation parameters (n=3)
- Difficulty of ventilation (n=2)
- History of the patient
- o Data of anesthesiological devices, e.g. central venous line, peridural catheter
- o Degree of relaxation / depth of narcosis
- Lab test results (pre- and intraop)

#### 6. Surgical skill and quality of performance

Number of surgeries performed of this type

#### 7. Surgical team

- Non-verbal communication aspects
- Modes of interaction between team members
- o Quality of decision making

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#### 8. Environment

- Room condition (e.g. old or modern)
- o Number of times someone is entering the OR
- Disturbances
- o Number of phone calls interrupting the surgeon

# Suggestions for intraoperative assistance based on surgomic features

#### Instrument

- Visual highlight of potentially dangerous instruments (e.g., scissors) when inserted
- Highlight of potential harmful application of instrument, e.g., cautery while bipolar forceps manipulates bowel