bivalirudin while test pending, then transitioned back to heparin once negative).				
	No HIT	(+) HIT	HIT rule-	p-value
	N (%)	N (%)	out	
Complication	N=131	N=4	N=9	
Need for CRRT on ECMO	64 (49.2%)	4 (100%)	7 (77.8%)	0.039
In-hospital Mortality	81 (64.3%)	3 (75%)	6 (66.7%)	0.900
	Event rate (Number of events/Number of patients)			
Hemorrhagic Complications	0.53	1.0	0.78	0.073
Surgical site bleeding	0.27	0.25	0.33	0.907
GI bleeding	0.07	0.50	0.44	<0.001
Pulmonary hemorrhage	0.08	0	0	0.587
ICH/SAH/SDH	0.07	0	0	0.621
Other bleeding	0.03	0.25	0	0.052
DIC	0.02	0	0	0.859
Thrombotic Complications	0.32	0.25	0.22	0.797
Limb ischemia	0.11	0.25	0.11	0.709
Ischemic stroke	0.09	0	0.11	0.800
Intracardiac thrombus	0.05	0	0	0.733
DVT	0.04	0	0	0.773
PE	0.03	0	0	0.815

Supplementary Table 2. Complications and in-hospital mortality for patients without HIT (all of whom were anticoagulated with heparin), patients with confirmed HIT (positive PF4/SRA; anticoagulated with bivalirudin), and those suspected of but not diagnosed with HIT (received bivalirudin while test pending, then transitioned back to heparin once negative).

CRRT: continuous renal replacement therapy, GI: gastrointestinal, ICH: intracerebral hemorrhage, SAH: subarachnoid hematoma, SDH: subdural hematoma, DIC: disseminated intravascular coagulation, DVT: deep vein thrombosis, PE: pulmonary embolus