



Supporting Information

Supplementary results

**This appendix was part of the submitted manuscript and has been peer reviewed.
It is posted as supplied by the authors.**

Appendix to: Redwood E, Hyun K, French JK, et al. The influence of travelling to hospital by ambulance on reperfusion time and outcomes for patients with STEMI. *Med J Aust* 2021; doi: 10.5694/mja2.51005.

Outcomes for 2765 patients who presented with STEMI to CONCORDANCE hospitals during 2009–2017

Variable	Ambulance	No ambulance	Total	<i>P</i>
Number of patients	1616	1149	2765	
In-hospital death	75 (5%)	27 (2%)	102 (4%)	0.003
Cardiac death	66 (4%)	23 (2%)	89 (3%)	0.002
Myocardial infarction	42 (3%)	42 (4%)	84 (3%)	0.17
Stroke	22 (1%)	3 (0%)	25 (1%)	0.002
Major bleeding	128 (8%)	83 (7%)	211 (8%)	0.52
Congestive failure	151 (9%)	92 (8%)	243 (9%)	0.24
Cardio shock	77 (5%)	32 (3%)	109 (4%)	< 0.001
Renal failure	106 (7%)	54 (5%)	160 (6%)	0.14
Ischaemia	112 (7%)	78 (7%)	190 (7%)	0.89
Atrial Fibrillation	155 (10%)	79 (7%)	234 (9%)	0.022
Cardiac arrest	60 (4%)	44 (4%)	104 (4%)	0.90
MACE	241 (15%)	155 (14%)	396 (15%)	0.28

MACE = major adverse cardiovascular events (cardiac death, myocardial infarction, heart failure, shock).