Supplementary data

Amputation codes

Primary major amputations

Above-knee amputation
- Hip disarticulation: KNFQ09
- Transfemoral amputation: KNFQ19
- Other amputation on the femur/hip: KNFQ99

Below-knee amputation
- Knee disarticulation: KNGQ09
- Transtibial amputation: KNGQ19
- Other amputation on knee/tibia: KNGQ99

Revision codes
- Stump revision knee/lower leg: KNGQ29
- Stump revision after knee disarticulation: KNGQ29A
- Stump revision after transtibial amputation: KNGQ29B
- Stump revision hip/tight: KNFQ29
- Stump revision after hip disarticulation: KNFQ29A
- Stump revision after transfemoral amputation: KNFQ29B

Prior minor amputation is defined as 1 or more registered procedures before index surgery with procedure code KNHQ* despite TUL codes.

Minor amputations
- Foot amputation: KNHQ00, KNHQ10–18, KNHQ99
- Toe amputation: KNHQ02–07, KNHQ14

Osseointegration codes are excluded: KNGQ39, KNGQ49 KNFQ39, KNFQ49.

Prior revascularization procedure


Definition for diagnoses, ICD10

Diabetes
A patient is categorized with diabetes if 1 of the following ICD10 codes is registered: E10*, E11*, E13*, E14* or the patient has redeemed 2 or more anti-diabetic medicine prescriptions in the same ATC group within the following ATC codes 5 years before the index date: A10A (insulins and analogs) A10B (blood glucose lowering drugs, excluding insulins), A10X (other drugs used in diabetes).

Hypertension
A patient is categorized with hypertension if 1 of the following ICD10 codes I10*–I15* is registered or the patient has redeemed 2 or more prescriptions in the same ATC group 5 years before the index date: antihypertensives (C02–C03, C07–C09).

Dyslipidemia
A patient is categorized with dyslipidemia if the ICD10-code E78 is registered or the patient has redeemed 2 or more prescriptions in the same ATC group 5 years before the index date: C10.

Cardiovascular disease (CVD)
A patient is categorized with CVD if 1 of the following ICD10 codes is registered: I20–I25* (angina, myocardial infarction, and ischemic coronary disease), I50* (incompensatio cordis), I63–I67 (cerebral infarction, occlusion of vertebral and cerebral arteries), or G45–G46 (transient ischemic attack, TCI).

Renal insufficiency
A patient is categorized with renal insufficiency if 1 of the following ICD10 codes is registered: N18* (chronic kidney disease) or N19* (unspecified kidney failure).

Atherosclerosis/PAD
Atherosclerosis/peripheral arterial disease (PAD) is defined as one or more of the following ICD10 codes: I70, I702, I709, I739A, I739C, or I743.