

Supplementary data

Appendix. Recommendations for future prospective trials

- (1) A standardized way of motivating the classification could be agreed upon.
- (2) The reviewers should have no access to the general hospital records and no other means of knowing the outcome.
- (3) The assessment and classification by independent reviewers should be made blinded, and include the survivors as well as the deceased.
- (4) The (unidentified) hospital records with all relevant obtainable information up to the time of amputation should be presented to the reviewers for assessment and classification and with the question: "In the hypothetical situation that the patient should die within 24 hours from now, how would you classify the death?" The assessment should be recorded in the study with no possibility of alterations.
- (5) Thereafter, extended records, ideally daily, or at least weekly, should be presented to the reviewers, using the same question and the same conditions.
- (6) This procedure to be repeated until 30 days postoperatively.

Table 2. Log binominal regression models

Factor	Relative risk (95% CI)	p-value
Univariable comparison of the 31 deaths and the 164 survivors		
Age (per year older)	0.97 (0.94–1.02)	0.1
Sex (male)	1.30 (0.59–2.86)	0.5
Body mass index (per one unit)	1.03 (0.96–1.01)	0.4
Admitted from nursing home	0.83 (0.36–1.90)	0.7
Transfemoral amputation	2.22 (0.96–5.10)	0.6
ASA score (3–5)	3.12 (0.70–13.8)	0.1
Diabetes	1.96 (0.90–4.25)	0.9
Multivariable comparison of the 31 deaths and the 164 survivors		
Age (per year older)	1.03 (1.00–1.06)	0.07
Sex (male)	1.16 (0.59–2.28)	0.7
Body mass index (per one unit)	0.95 (0.90–1.02)	0.1
Admitted from nursing home	0.66 (0.33–1.33)	0.3
Transfemoral amputation	2.28 (1.09–4.76)	0.03
ASA score (3–5)	1.73 (0.43–6.97)	0.4
Diabetes	2.73 (1.31–5.6)	0.01
Comparison of the 20 deaths in the FTR group with active care curtailed and the 164 survivors		
Age (per year older)	1.07 (1.02–1.12)	0.01
Sex (male)	1.25 (0.53–2.95)	0.6
Body mass index (per one unit)	0.92 (0.84–1.01)	0.08
Admitted from (nursing home)	1.05 (0.47–2.34)	0.9
Transfemoral amputation (yes)	1.59 (0.64–3.93)	0.3
ASA score (3–5)	2.06 (0.28–15.3)	0.5
Diabetes (yes)	3.12 (1.21–8.00)	0.02

Table 4. Complications, in all 195 patients

Complication	n
Pneumonia or respiratory failure	17
Sepsis	13
Renal failure	6
Stroke	4
Gastrointestinal ileus or hemorrhage	3
Acute myocardial infarction	7
Requirement for more than 3 transfusions within 72 hours from surgery	29
Re-amputation (within 30 days from index)	23