

Supplementary Table 1. International Classification of Disease Clinical Modification procedure codes used to identify cardiac procedures during a hospital admission.

Ever occurring on discharge record: 35.00-35.04, 35.10-35.14, 35.20-35.28, 35.31-35.35, 35.39, 35.41-35.42, 35.50-35.54, 35.60-35.63, 35.70-35.73, 35.81-35.84, 35.91-35.95, 35.98-35.99, 37.33, 37.5, 37.51-37.52, 39.0, 39.21

Required additional diagnoses of a congenital heart defect on same discharge record: 38.34-38.35, 38.44-38.45, 38.64-38.65, 38.84-38.85, 39.49, and 39.56-39.59