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Appendix 1, as supplied by the authors. Appendix to: Schwartz I, Boesen ME, Cerchiaro G, et al.; for the ALBERTA HOPE COVID-19 Collaborators. Assessing the efficacy and safety of hydroxychloroquine as outpatient treatment of COVID-19: a randomized controlled trial. *CMAJ Open* 2021. doi: 10.9778/cmajo.20210069. Copyright © 2021 The Author(s) or their employer(s). To receive this resource in an accessible format, please contact us at cmajgroup@cmaj.ca.

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Table S1. Risk Factors for Severe Disease

Medications and Biologic Therapies
Prednisone ≥7.5 mg daily x 3 weeks (or equivalent)
Methotrexate (Greater than or equal to 7.5 -15 mg weekly suggested)
Azathioprine
Cyclophosphamide within the previous 6 months
Mitoxantrone
Cell depleting therapy within the previous 24 months: cladribine
Anti-TNF: infliximab, adalimumab, golimumab, etanercept, certolizumab
Anti-IL17: secukinumab, ixekizumab, brodalumab
mTOR inhibitors: sirolimus, everolimus
Mycophenolate mofetil: mycophenolic acid
Anti-IL12/23: Ustekinumab, risankizumab, guselkumab
Anti-CD28: abatacept
JAK2 inhibitors: tofacitinib, baricitinib, upadacitinib
Anti-CD20: rituximab, ocrelizumab within the previous 12 months
S1P inhibitors: fingolimod
Anti-alpha4beta7: vedolozimab
Anti-IL4: dupilumab
Anti-IgE FcR: omalizumab
Medical Conditions and Other Risk Factors
Age 40 or over
BMI >40 (calculated by self-report height and weight)
Hypertension (on medical treatment)
Current cigarette smoker
Bone Marrow Transplant within previous 12 months
Solid Organ Transplant
AIDS/HIV CD4 <200 within last 6 months or CD4>200 but not on treatment
Moderate Lymphopenia (within previous 6 months: Adults <500)
Chronic Kidney Disease (eGFR < 60 including people on dialysis)
Diabetes (on a hypoglycemic or insulin)
Coronary Artery Disease (non-revascularized and as per physician diagnosis in medical
chart)
Heart Failure/Reduced LVEF (as per physician diagnosis in medical chart)
Chronic Lung Disease (COPD, Asthma, interstitial lung disease, as per physician diagnosis)
Any Current Cancer diagnosis (as per physician diagnosis)
Acquired or Congenital Immune Deficiency (as per physician diagnosis in medical chart)
Cirrhosis (normal INR and bilirubin and no history of ascites, encephalopathy, or variceal
bleeding as per history and medical chart)
Homelessness
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Table S2. Modified Tisdale Scale

Age ≥68 y	1
Female sex	1
Loop diuretic use: furosemide (Lasix), bumetanide (Bumex),	1
torsemide	
Serum K ⁺ ≤3.5 mEq/L on any blood test in the last 30 days	2
Admission QTc \geq 450 ms on any recent ECG in the last 1 year	2
Acute MI	3
≥2 QTc-prolonging drugs (Including hydroxychloroquine)	3
Sepsis	3
Heart failure	3
One QTc-prolonging drug (This will be hydroxychloroquine)	3

Modified to be suitable for outpatients who were screened using history and historical medical records. Modifications: (1) a low serum potassium within the previous 30 days (if any) replaced an admission potassium, and (2) an ECG within the previous year (if any) replaced an admission ECG.

Language	Number of Calls¶	Language	Number of Calls¶
Tigrinya	36	French*	2
Tagalog*	27	Dinka	1
Spanish*	25	Nepali	1
Somali	19	Fuzhou	1
Punjabi*	18	Swahili	1
Vietnamese	17	Ukrainian	1
Mandarin	11	Uzbek	1
Cantonese	9	Malayalam	1
Arabic	8	Polish	1
Cambodian	7	Russian	1
Amharic	7	German*	0
Oromo	7	Czech*	0
Hindi*	5	Croatian*	0
Farsi*	4	Bosnian*	0
Portuguese*	4	Serbian*	0
Urdu*	3	Marathi*	0
Burmese	2	Total Calls	220

Table S3. Use of telephone translation services during the trial

*A researcher was also available to speak this language.

[¶]Participants often required more than one call throughout the trial.

Outcome	Hydroxychlor oquine (N=74)	Placebo (N=31)	P-value
Primary Outcome ¹ - n (%)	1 (1.4)	0 (0.0)	1.00*
Secondary Outcomes			
Days to COVID-19 recovery - median (95% CI) ²	12 (9-23)	13 (8-24)	0.56 ⁺
Disposition at 30 days - n (%)			NC
Recovered	52 (70.3)	25 (80.6)	
Ongoing symptoms, not hospitalized	18 (24.3)	6 (19.4)	
Unknown, not hospitalized or deceased	4 (5.4)	0 (0.0)	
Mortality within 30 days - n (%)	0 (0.0)	0 (0.0)	NC
Admission to ICU within 30 days - n (%)	1 (1.4)	0 (0.0)	NC
Hospitalization within 30 days - n (%)	1 (1.4)	0 (0.0)	NC

Table S4. Primary and secondary outcomes in the per-protocol population (N=105)

*Two-sided Fischer's exact test; †Log rank test.

¹Hospitalization, invasive mechanical ventilation, or death within 30 days of treatment initiation.

2Excludes 8 subjects with missing symptom duration data in the hydroxychloroquine group

NC: secondary outcomes were not compared between groups following the pre-specified protected hierarchy.