

**The diagnostic procedure for subjects with suspected pulmonary embolism.  
A recent comparison among the recommendations available from the international guidelines**

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**Supplementary Materials**

**List of compared international guidelines (the more recent first) with references, the acronyms in brackets.**

1. UpToDate (UpToDate) (31)
2. National Institute for Health and Care Excellence (NICE)(32)
3. European Society of Cardiology and European Respiratory Society (ESC/ERS)(33)
4. European Association of Nuclear Medicine (EANM)(34)
5. Pulmonary Embolism Response Team consortium (PERT)(35)
6. Thrombosis and Haemostasis Society of Australia and New Zealand (THANZ)(36)
7. American College of Emergency Physicians (ACEP) (37)
8. American Society of Hematology (ASH)(38)
9. American College of Physicians (ACP)(39)
10. Collaboration of Spanish medical societies comprising the Spanish Society of Pneumology and Thoracic Surgery, the Spanish Society of Internal Medicine, the Spanish Society of Thrombosis and Haemostasis, the Spanish Society of Cardiology, the Spanish Society of Emergency and Emergency Medicine, and the Spanish Society of Angiology and Vascular Surgery (SPAIN)(40)
11. Japanese Circulatory Society (JCS)(41)
12. The investigators of the PIOPED II study (PIOPED II)(42)
13. British Thoracic Society (BTS)(43)

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2. Lehnert P, Lange T, Moller CH, Olsen PS, Carlsen J. Acute Pulmonary Embolism in a National Danish Cohort: Increasing Incidence and Decreasing Mortality. *Thromb Haemost.* 2018;118(3):539-46.
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Table 1 Wells rule [original (18) and simplified (44)], Revised Geneva score (19), and Pulmonary Embolism Rule out Criteria (PERC) (23)

| WELLS RULE                                   |                          |   | REVISED GENEVA SCORE                                 |                          | PERC  |                            |
|--|--------------------------|---|--|--------------------------|---|----------------------------|
| Items  | Score                    |   | Items  | Score                    | Items   | Score                      |
| Simplified                                   | Original                 |   |  |                          |   |                            |
| Previous PE or DVT                           | 1.5                      | 1 | Age > 65 y   | 1                        | Age ≥ 50 y  | 1                          |
| Heart rate >100                              | 1.5                      | 1 | Previous PE or DVT                                   | 3                        | Heart rate ≥100   | 1                          |
| Recent surgery/immobilization                | 1.5                      | 1 | Surgery or fracture within<br>1 month                | 2                        | O2 saturation ≤ 95% without<br>supplementary oxygen               | 1                          |
| Clinical signs of DVT<br>1                   | 3                        |   | Active malignancy                                    | 2                        | Unilateral leg swelling   | 1                          |
| Alternative diagnosis less<br>likely than PE | 3                        | 1 | Unilateral lower limb pain                           | 3                        | Hemoptysis  | 1                          |
| Hemoptysis                                   | 1                        | 1 | Hemoptysis   | 2                        | Surgery or trauma within 4 weeks<br>treated in general anesthesia | 1                          |
| Cancer                                       | 1                        | 1 | Heart rate ≥ 75<br>≥ 95                              | 3<br>5                   | Previous PE or DVT  | 1                          |
| <b>Total score (trichotomous)</b>            | <b>Estimated preval.</b> |   | Pain on lower limb palpation<br>and unilateral edema | 4                        | OC, hormone replacement or<br>estrogen hormone use                | 1                          |
| *  |                          |   |  |                          |   |                            |
| < 2 low probability                          | ≈ 6%                     |   | <b>Total score</b>                                   | <b>Estimated preval.</b> | <b>Total score</b>  | <b>Estimated preval. *</b> |
| 2-6 intermediate                             | ≈ 23%                    |   | *  |                          | 0   | < 2%                       |
| > 6 high                                     | ≈ 49%                    |   | < 4 low probability                                  | ≈ 9%                     | ≥ 1   | ≥ 2%                       |
| <b>Total score (dichotomous)</b>             |                          |   | 4-10 intermediate                                    | ≈ 26%                    |   |                            |
| PE unlikely ≤ 4 or ≤ 1                       | ≈ 8%                     |   | > 10 high  | ≈ 76%                    |   |                            |
| PE likely > 4 or > 1                         | ≈ 34%                    |   |  |                          |   |                            |

\* Values of estimated prevalence are obtained from the meta-analytic data by Ceriani et al. (21) as reported in (17)

DVT: deep vein thrombosis; OC: oral contraceptives; PE: pulmonary embolism