

Supplemental file S1

Table 1: Cause-of-death attribution system.

	Probable cause of death	Possible cause of death
Infection	A.1 Clinically or radiographically documented infection with associated microbiologically documented organism	1. Clinically or radiographically documented infection without associated microbiologically documented organism.
Haemorrhage	B.1 Acute symptomatic intracranial haemorrhage shown by imaging or pathology. B.2 Acute symptomatic pulmonary haemorrhage shown by imaging or pathology. B.3 Acute symptomatic bleeding resulting in hypotension, urgent transfusion or fluid bolus.	2. Acute symptomatic pulmonary haemorrhage not shown by imaging or pathology
Thrombosis	C.1 Acute symptomatic intracranial thrombosis or embolism shown by imaging or pathology. C.2 Acute symptomatic pulmonary thrombosis or embolism shown by imaging or pathology. C.3 Acute symptomatic hepatic thrombosis or embolism shown by imaging or pathology.	3. Acute symptomatic pulmonary thrombosis or embolism not shown by imaging or pathology.
Cardiac	D.1 Acute symptomatic arrhythmia excluding sinus tachycardia or bradycardia shown by ECG. D.2 Acute symptomatic cardiac- dysfunction defined by ECG, cardiac imaging or pathology.	4. Acute symptomatic arrhythmia excluding sinus tachycardia or bradycardia not shown by ECG.
Immunomediated	E.1 Acute allergic reaction, anaphylaxis with symptomatic bronchospasm, oedema, angioedema, or hypotension.	5. Stable graft-versus-host disease.

	E.2 Worsening symptomatic graft versus host disease. E.3 Acute symptomatic haemophagocytic lymphohistocytosis, macrophage activation syndrome or cytokine-release syndrome.	
Metabolic	F. Clinically diagnosed tumour lysis syndrome with cardiac arrhythmia, seizure, or creatinine concentrations greater than 3 times the ULN.	
CNS	G.1 Acute symptomatic CNS necrosis shown by imaging or pathology G.2 Acute symptomatic encephalopathy shown by imaging or electroencephalography G.2 Acute symptomatic hydrocephalus or raised intracranial pressure shown by imaging, pathology, or measurement of intracranial pressure G.4 Seizure lasting at least 30 minutes within 48 hours of death	6.1 Acute symptomatic CNS necrosis not shown by imaging or pathology 6.2 Acute symptomatic encephalopathy not shown by imaging or electroencephalography 6.2 Acute symptomatic hydrocephalus or raised intracranial pressure not shown by imaging, pathology, or measurement of intracranial pressure 6.4 Seizure between 5 and 30 minutes within 48 hours of death
Respiratory	H. Acute symptomatic respiratory distress with ventilator support	7. Acute symptomatic respiratory distress without ventilator support
Gastrointestinal system	I.1 Acute symptomatic bowel disease resulting in necrosis, obstruction or perforation shown by imaging or pathology I.2 Acute, clinically diagnosed hepatic dysfunction associated with conjugated bilirubin concentrations greater than 10 x ULN, ammonium concentrations greater than 2.5 x ULN, or international normalised greater than 2.5 times the ULN	8.1 Acute symptomatic bowel disease resulting in necrosis, obstruction or perforation not shown by imaging or pathology 8.2 Acute, clinically diagnosed hepatic dysfunction associated with conjugated bilirubin concentrations greater than 1.5 and less than 10 x ULN, ammonium concentrations greater than 1.5 and less than 2.5 x ULN, or international normalised

	I.3 Acute, clinically diagnosed pancreatitis with haemorrhage, peritonitis, necrosis or haemodynamic instability (evidenced by hypotension, urgent transfusion, fluid bolus, or vasopressors)	greater than 1.5 but less than 2.5 times the ULN
Renal system	J. Acute kidney injury with dialysis or renal replacement therapy (planned or received)	
External causes	K.1 Unintentional injury (e.g accident) K.2 Suicide K.3 Homicide	

ULN: Upper Limit of Normal

ECG: electrocardiogram

CNS: central nervous system

