**Appendix Table E87. Results from studies assessing the ability of TEG to predict stroke in patients with ischemic heart disease**

| **Author,year****UID****Country****Study name** | **Treatment** | **Phenotypic Test Used [index test]** | **Clinical Outcome** | **Outcome Definition** | **Timing of measurement** | **Index test result: category (e.g., HPR+) – ONE ROW PER PHENOTYPE GROUP** | **Outcome status (e.g., bleeding or no bleeding)** | **No. with outcome status within phenotype group** | **Comparative metric (OR, RR, HR)** | **95% CI** | **P (between which groups?)****[statistical test]** | **Adjusted?****[YES/NO/NR]****If YES, for what factors?** | **Procedures for multiple comparisons [YES, NO, NR]** | **Comments (e.g., additional data in figures)** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Tang, 201222490487ChinaNR | 100mg aspirin and 75 mg clopidogrel (con) | ADP-induced platelet reactivity | stroke | stroke | 12 months | control group | stroke | 0/30=0 | OR=1(calculated) |  | <0.05 con vs R+RANOVA | **NR** | **NR** | **from table 5** |
|  | 100mg aspirin and 75 mg clopidogrel (R+R) |  |  |  | 12 months | resistance plus routine |  | 0/30=0 |  |  | <0.05 R+R vs R+LANOVA |  |  |  |
|  | 200mg aspirin and150 mg clopidogrel (R+L) |  |  |  | 12 months | resistance plus loading dose  |  | 0/30=0 |  |  | <0.05 con vs R+L ANOVA |  |  |  |