**Supplementary Table 4.** Risk of atrial fibrillation hospitalization according to PR quartiles

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| --- | --- | --- | --- |
| **Outcome** | **HR (95% CI) by every 10 ms increase in PR** | **PR quartiles (ms)****HR (95% CI)** | **P-trend** |
| **Q1 (<154)****N=721** | **Q2 (154-168)****N=700** | **Q3 (170-188)****N=678** | **Q4 (>188)****N=637** |
| No. Events/No. Participants |  | 38/721 | 55/700 | 55/678 | 70/637 |  |
| Unadjusted | 1.09 (1.05-1.13)P<0.001 | Ref | 1.49 (0.99-2.26)P=0.06 | 1.63 (1.07-2.46)P=0.02 | 2.22 (1.49-3.30)P<0.001 | <0.001 |
| Model 1 | 1.05 (1.01-1.09)P=0.02 | Ref | 1.30 (0.86-1.97)P=0.22 | 1.35 (0.89-2.06)P=0.16 | 1.66 (1.10-2.51)P=0.02 | 0.02 |
| Model 2 (main model)  | 1.03 (0.98-1.07)P=0.25 | Ref | 1.33 (0.86-2.06)P=0.21 | 1.33 (0.86-2.06)P=0.20 | 1.38 (0.90-2.13)P=0.14 | 0.19 |
| Model 3 | 1.02 (0.98-1.07)P=0.28 | Ref | 1.34 (0.86-2.09)P=0.19 | 1.33 (0.85-2.06)P=0.21 | 1.37 (0.89-2.13)P=0.16 | 0.24 |

Abbreviations. HR: hazard ratio, CI: confidence interval.

Model 1 adjusted for age, sex, and race/ethnicity.

Model 2 adjusted for the covariates of Model 1 and additionally for baseline body mass index, diabetes mellitus, systolic blood pressure, coronary artery disease, heart failure, stroke, estimate glomerular filtration rate (via Chronic Kidney Disease Epidemiology Collaboration (CKD EPI) equation), log-transformed 24-hour urine protein, serum hematocrit, serum albumin, serum potassium, and serum calcium.

Model 3 adjusted for the covariates of Models 1 and 2 and additionally for baseline use of angiotensin converting enzyme inhibitor or angiotensin receptor blocker medications, beta blockers, potassium sparing diuretics, loop diuretics, thiazide diuretics, statins, and warfarin.