

**Supplementary Table 2. Interventional or surgical procedures that should be accompanied by aspirin discontinuation in patients at low thrombotic risk<sup>a</sup>**

Type of surgery	Specific types of surgery
General	Hepatic resection, duodenocephalopancreasectomy
Cardiac	None
Vascular	Open thoracic and thoracoabdominal surgery Prostate biopsy, orchiectomy, circumcision
Urology <sup>a</sup>	Radical and partial nephrectomy, percutaneous nephrostomy Percutaneous lithotripsy, radical cystectomy, prostatectomy Endoscopic resection of prostate/endoscopic bladder surgery Penectomy, partial orchiectomy
Orthopedic	None
Thoracic	Esophagectomy, pleuropneumonectomy decortication of lung Dilatation in achalasia, mucosectomy/submucosal resection
Digestive endoscopy	Echography with FNA biopsy of pancreatic cystic lesions Ampullectomy of the ampulla of Vater
Maxillofacial	None
Plastic	None
Gynecology	Laparotomy or laparoscopic hysterectomy for large uteri (> 750 g) -Myomectomy, laparotomic/laparoscopic -Laparoscopy/laparotomy for severe/deep endometriosis Debulking surgery for ovarian cancer -Radical surgery for carcinoma of cervix and endometrium -Pelvic/lombo-aortic lymphadenectomy -Pelvic evisceration
Neurosurgery	All spinal and cranial neurosurgery
Pulmonology	None
Dentistry	None
Ophthalmology	Scleral buckling, eye adnexa surgery Intraocular foreign body extraction, penetrating keratoplasty Ocular tumor excision, trabeculectomy
Otorhinolaryngology	None

FNA, fine needle aspiration biopsy.

<sup>a</sup>Discontinuation of aspirin was also recommended in intermediate thrombotic risk patients.