

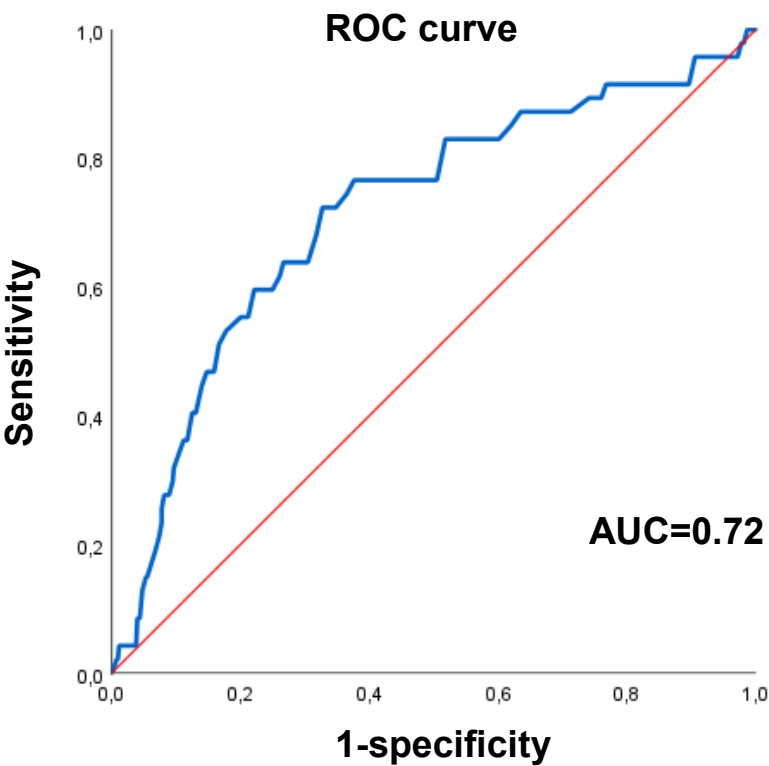
Supplementary Material

Supplement to: **JAK2V617F variant allele frequency >50% identifies patients with polycythemia vera at high risk for venous thrombosis**

Supplementary material legend (pages 2-5):

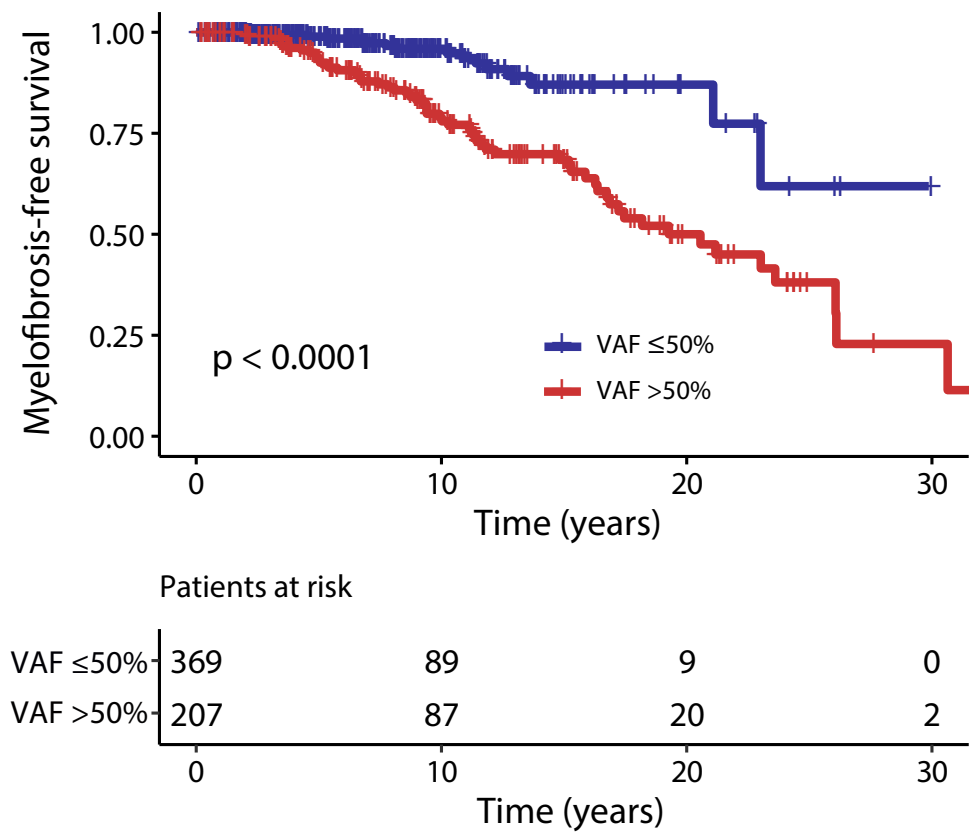
1. **Supplemental Figure 1.** ROC curve for JAK2V617F VAF as a risk variable for venous thrombosis using PV patients from training cohort.
2. **Supplemental Figure 2.** Myelofibrosis-free (A), leukemia-free (B), and overall (C) survival Kaplan Meier curves in PV patients from training cohort stratified by their VAF ($>/\leq 50\%$).
3. **Supplemental Table 1.** Type of thrombotic events occurring at diagnosis or during follow-up in validation cohort.

Supplemental Figure 1

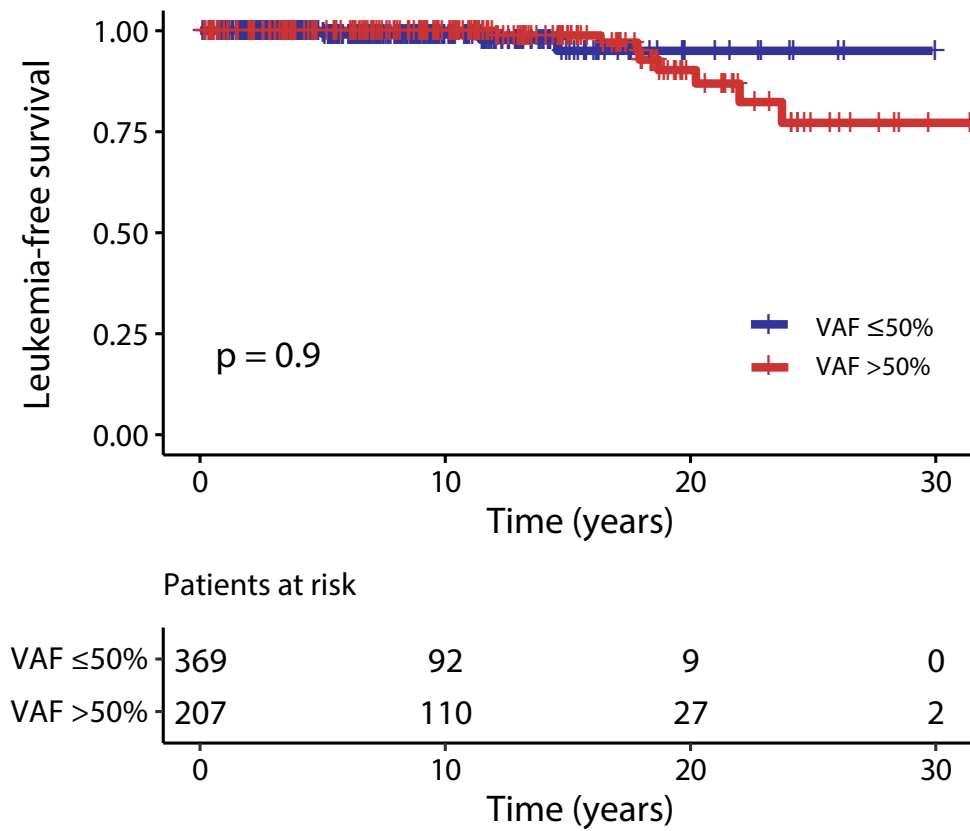


Supplemental Figure 2

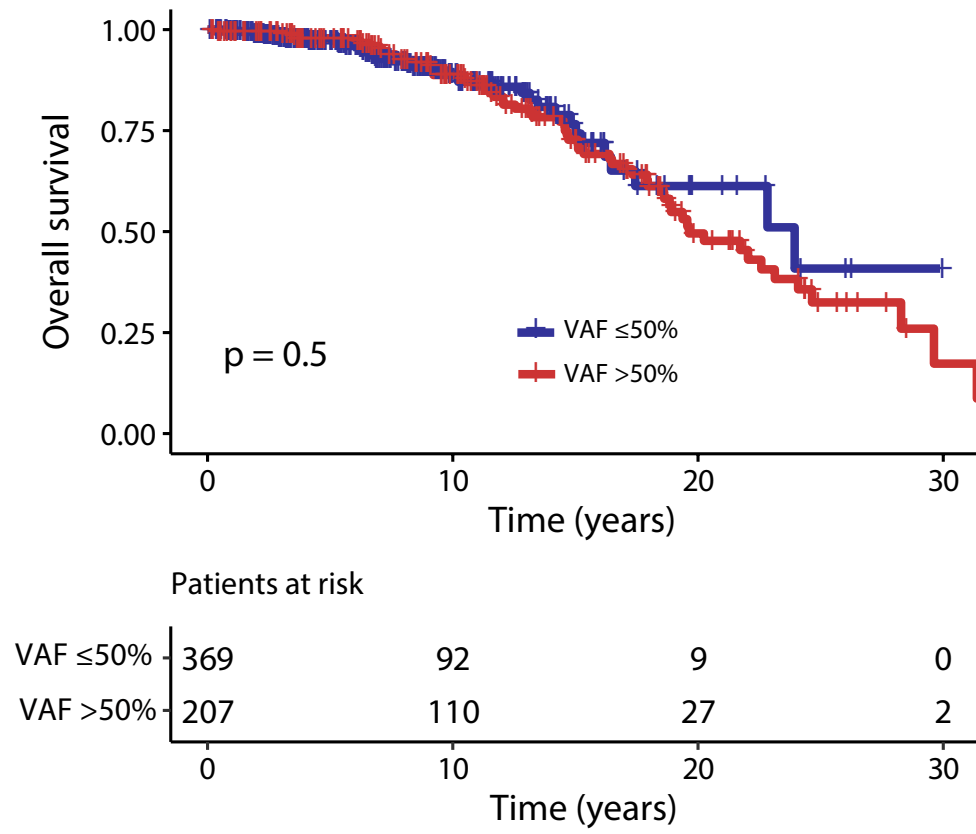
A



B



C



Supplemental Table 1. Type of thrombotic events occurring at diagnosis or during follow-up in the validation cohort.

Catholic University-Policlinico Gemelli (n=289)		
	At diagnosis	During follow-up
Arterial thrombosis (n, %)	n=17	n=45
Ischemic Stroke	6 (28.9)	12 (26.7)
Transient ischemic attack	5 (22.4)	14 (31.1)
Acute myocardial infarction	4 (34.2)	10 (22.2)
Unstable angina	1 (5.3)	2 (4.4)
Ischemic stroke + splenic infarction	1 (6.6)	--
Splenic infarction	--	2 (4.4)
Peripheral thrombosis	--	4 (9.0)
Retinal thrombosis	--	1 (2.2)
Venous thrombosis (n, %)	n=9	n=43
Deep vein thrombosis	4 (44.5)	14 (32.5)
Pulmonary embolism + deep vein thrombosis	2 (22.2)	4 (9.3)
Cerebral vein thrombosis	3 (33.3)	2 (4.7)
Pulmonary embolism	--	3 (7)
Superficial vein thrombosis	--	20 (46.5)