Supplementary Table. Examined variables of included 44 studies and significant risk factors associated with paediatric UHRs under three health condition groups

| Reference | Medical Condition | Outcome measures | Examined Variables | Significant Risk Factors |
|-----------------------|----------------------|---|---|---|
| | | | All-Cause Related UHRs (8) | • |
| Toomey 2016 USA | All-cause | 30-day Potentially preventable UHRs | Age; Gender; Race/ethnicity; Preferred language; Chronic condition indicators(CCI); Number of CCIs To assess if potentially preventable readmission were associated with (1) The readmissions being causally related to the index admission, (2) the readmission being related to the index admission by underlying CCI, and (3) the presence of identifiable contributing factors including hospital and patients'; Also examined the association between preventability rating and the presence of different CCIs; patients with CCIs were more likely to have certain contributing factors in readmissions | After adjusting for age, gender, language, and CCI counts: Index admission and readmission causally related (AOR=2.6; 95%CI 1.02-6.75) Hospital contributing factors (AOR 16.3; 95% CI 5.94-44.81) Patient contributing factors (AOR: 7.1; 95% CI 2.45-20.48) |
| Wijlaars 2016 | All-cause | ≤30-day & 31-day to 2-year UHRs | Age; Diagnosis at admission | Underlying chronic conditions (OR=1.93; 95%Cl 1.89-1.99) CYP with underlying chronic conditions (OR: 1.93, 95% Cl 1.89 to 1.99) Girls (OR: 1.04, 95% Cl 1.02 to 1.05) More deprived CYP (most deprived compared with least deprived, OR: 1.06, 95% Cl 1.03 to 1.09) |
| Khan 2015 | All-cause | 30-day UHRs (DHR) | Age; Gender; Race/ethnicity; Insurance status; CCI; CCI counts; LOS; Hospital profile (children vs. nonchildren's hospital; Teaching vs. nonteaching; Annual hospital pediatric volume; Hospital location; | Private insurance (OR=1.14; 95%CI 1.04-1.24) CCI for Mental disorder (OR=1.33; 95%CI 1.13-1.56) CCI for nervous system (OR=1.37; 95%CI 1.20-1.57) CCI for circulatory system (OR=1.20; 95%CI 1.00-1.43) Admission to a non-children's hospital (OR=1.62; 95%CI 1.01-2.60) |
| Auger 2015 | All-cause | 30-day UHRs | Age; Gender, Race/ethnicity; Source of admission; Insurance; LOS; CCCs; Technology dependency; Weekend admission; Weekend discharge; | Weekend discharge (OR=1.09; 95% CI 1.004-1.18) |
| Coller 2013 | All-cause | 30-day UHRs | Patient demographics (Gender; Age; Race/Ethnicity; Language; Payer/Insurance); Illness severity; Documentation of primary care provider(PCP) follow-up plans at discharge | Age 15-18 years old (OR=1.42; 95%Cl 1.02-1.96) Public insurance (OR=1.48; 95%Cl 1.20-1.83) Illness severity 4 vs 1(OR=6.88; 95% Cl 4.99-9.99) Asian (OR=1.46; 95% Cl 1.01-2.12) PCP documentation of follow-up plans (OR=4.52; 95% Cl 1.01-20.3) |
| Berry 2011 | All-Cause | 365-day UHRs | Age; Race/ethnicity; Insurance status; Complex chronic condition (CCC) Technology assistance | CCC (OR=5.61; 95%CI 5.45-5.78) Public insurance (OR=1.36; 95%CI 1.33-1.40) Technology assistance (OR=2.85; 95%CI 2.74-2.96) Non-Hispanic black race (OR=1.65; 95%CI 1.59-1.70) |

| Feudtner 2009 Beck 2006 | All-cause All-cause | 365-day UHRs 30-day UHRs | Age; Gender; Race/Ethnicity; Payer; CCC Diagnosis; LOS; Season; Disposition; Past Admission; Time since past admission; Past CCC Diagnoses; Past Dispositions Age; Gender; Number of diagnoses; LOS; Procedure during index admission; In-hospital complication; Hospital admission within 6 months before index admission | Female (Male as reference OR=0.94) Older age (15-18years as reference; younger age OR=0.79-0.87) Public insurance (OR=1.31; 95%CI 1.27-1.35) Black race (OR= 1.5; 95%CI1.5-1.59); CCC (OR= 2.39-5.24) Number of past admission (4+ as reference; 0-3 OR=0.04-0.4) LOS > 14 days (15+ as reference; <14 OR= 0.29-0.81) Time since past admission (shorter the greater risk) Number of diagnoses (>1) (OR=1.18; 95%CI 1.09-1.27) In-hospital complications (OR=1.43; 95%CI 1.16-1.5) Hospitalisations in the previous 6months (OR=3.93; 95%CI 3.58-4.3) |
|----------------------------------|-----------------------------------|-----------------------------|--|--|
| | | | Surgical Procedure Related UHRs (20) | |
| Brown 2017 | General surgical admissions | 7-; 14-; & 30- day UHRs | Hospital-level factors (Volume; LOS; %ICU cases; Mean ICU days; Complication rate); Patient variables (Gender; Complications; Type of admission; Surgery specialties; Age; LOS | High volume centres (OR=1.06; 95% Cl 1.04-1.08) Neurosurgery (OR=2.09; 95% Cl 1.46-2.99) Spinal surgery (OR=2.25; 95% Cl 1.36-3.71) LOS (8-14 days) (OR=8.06; 95% Cl 1.93-33.37) LOS (15-30) (OR=7.91; 95% Cl 1.84-33.94) LOS (30+days) (OR=13.96; 95% Cl 3.23-60.40) Factors that Predisposed to UHR Age (9-12 Years) (OR=0.52; 95% Cl 0.33-0.80) Orthopaedic surgery (OR=0.51; 95% Cl 0.29-0.88) Trauma (OR=0.31; 95% Cl 0.17-0.55) |
| Vo 2017 | All Surgeries | 30-day UHRs | Age; Gender; ASA; Race; Surgical specialty; Admission status; Urgency (Emergency vs. Elective); Prematurity; CHD; Postoperative complication (Neurological, renal, wound, cardiac, bleeding, or pulmonary) | Presence of CHD (OR=1.66; 95% CI 1.31-2.11) ASA>=3 (OR=1.9; 95% CI 1.8-2.0) >1 Postoperative complication (OR=3.14; 95% CI 2.92-3.34) Admission status (Inpatient vs. outpatient) (OR=3.5; 95% CI 3.3-3.7) |
| Richards 2016 USA | All Surgeries | 30-day UHRs | Hospital service (specialties); Ethnicity; LOS; ASA Class; Operating room (number); Surgical location; Time between scheduled start and actual; Duration of operation; Discharge time (Mon to Friday -7am-12pm; 12pm- 5pm; 5pm-11pm; Weekend and holiday 7am-12pm, 5pm-11pm; 11pm- 7am); Previous admission; Previous emergency department visit; Distance travelled; Surgical division (specialties); Surgeries per 1st encounter; Procedures in 1st surgery; Bed transfers in 1st encounter; Patient age Case level; Add-on operation; Surgical case day of week; Patient gender; Patient race; Patient's primary language; Interpreter required; Operation start time; Nonoperative time; Actual vs expected in room time; Set-up time; Discharge department; Discharge day of the week; Emergency vs planned admit; Casper alert; Payer | Hispanic (OR=1.16; 95% CI 1.04-1.29) ASA Class II (OR=1.29; 95%CI 1.14—1.46) ASA Class III (OR=1.87; 95% CI 1.62-2.16) ASA Class IV (OR=2.00; 95% CI 1.62-2.16) Discharge time: Mon to Fri 12pm-5pm (OR=1.25; 95% CI 1.10-1.41) Mon to Fri 5pm-11pm (OR=1.25; 95% CI 1.08-1.46) Weekend and holiday 7am-12pm (OR=1.75; 95%CI 1.21-2.54) Weekend and holiday 12pm-5pm (OR=1.81; 95% CI 1.27-2.59) Weekend and holiday 5pm-11pm (OR=2.27; 95%CI 1.55-3.33) Previous admission (OR=1.35; 95%CI 1.22-1.49) Previous ED visit (OR=1.96; 95% CI 1.76-2.19) Hospital service: Gastroenterology (OR=2.16; 95%CI 1.61-2.90) Nephrology (OR=1.51; 95%CI 1.03-2.23) |

| | | | | Rehabilitation medicine (OR=2.67; 95%Cl 1.21-5.95) Bone marrow transplant (OR=2.37; 95%Cl 1.54-3.65) Surgical location: Angiography/Interventional radiology (OR=10.14; 95%Cl 2.36- 43.51) Cardiac catheterization laboratory (OR=6.21; 95%Cl 1.32-29.32) Gastroenterology suite (OR=3.16; 95%Cl 0.48-21.02) Outpatient procedure centre (OR=3.67; 95%Cl 0.76-17.62) Factors that Predisposed to UHR Distance travelled: Secondary (OR=0.82; 95%Cl 0.75-0.90) Tertiary (OR=0.58; 95%Cl 0.51-0.66) Alaska, Montana, Idaho (OR=0.63; 95%Cl 0.52-0.75) Surgical division: Plastic surgery (OR=0.36; 95%Cl 0.17-0.75) |
|------------------------|----------------------------------|-------------|---|--|
| Elias 2017 | Cardiac surgery | 1-year UHRs | Gender; Age at initial cardiac surgical admission; Age at surgery; LOS; Genetic diagnosis; Region; Procedure; Risk adjustment for congenital heart surgery (RACHS) scores | Older age at admission (OR=1.17; 95% Cl 1.14-1.20) Trisomy-21 (OR=1.24; 95% Cl 1.04-1.48) Northeast region (OR=1.33; 1.12-1.56) South region (OR=1.48; 95% Cl 1.29-1.71) West region (OR=1.36; 95% Cl 1.16-1.58) Transplant (OR=1.82; 95% Cl 1.38-2.38) Shunt (OR=2.23; 95% Cl 1.84-2.69) ASD (OR=1.34; 95% Cl 1.19-1.15) |
| Polites 2017 USA | General & Thoracic surgery | 30-day UHRs | Procedure group; Pre-operative acute renal failure; Neurologic comorbidity; SIRS/Sepsis/Septic shock within 48hours prior to Index procedure; Wound class; Operative time; Complications; Postoperative LOS | Procedure group Head & Neck (OR=2.4; 95% CI 1.48-3.89) Hepatobiliary (OR=1.69; 95% CI 1.17-2.44) Small & Large intestine (OR=1.59; 95% CI 1.33-1.90) Neurological comorbidity (OR=1.30; 95% CI 1.05-1.62) Pre-operative acute renal failure (OR=2.47; 95% CI 1.31-4.66) SIRS/Sepsis/Septic shock within 48hours prior to index procedure (OR=1.2; 95% CI 1.02-1.41) Dirty/infected wound (OR= 1.92; 95% CI 1.53-2.40) Operative time (60-140 minutes) (OR=1.21; 95% CI 1.06-1.39) Operative time (>140 minutes) (OR=1.51; 95% CI 1.06-1.39) Operative time (>140 minutes) (OR=2.17; 95% CI 1.26-1.81) Complications (OR=1.34; 95% CI 1.09-1.65) Postoperative LOS (2-4 days) (OR=2.17; 95% CI 2.60-3.74) Factors that Predisposed to UHR Thoracic procedure (OR=0.69; 95% CI 0.52-0.91) |

| Yu 2017 | Tracheostomy | 30-day UHRs | Age at admission; Comorbidities associated with indication for tracheostomy (premature, Upper airway obstruction; CLD; Neuromuscular | Patients ≤ 12months Discharge on home PPV (OR=2.88; 95% CI 1.19-6.96) |
|------------|---------------|--------------|--|--|
| USA | | | disease); Medical comorbidities (Discharge on home Positive Pressure | Gastrostomy tube placement (OR=0.42; 95% CI 0.19-0.96) |
| USA | | | Ventilation/PPV); Surgical comorbidities (Gastrostomy tube placement); | Patients \leq 12months |
| | | | Primary payer; LOS; | Elder in age (OR=1.10; 95% Cl 1.00-1.22) |
| | | | | LOS (per additional day) (OR=1.01; 95% CI 1.00-1.02) |
| | | | | Malignancy (OR=6.03; 95% Cl 1.25-29.16) |
| | | | | Factors that Predisposed to UHR |
| | | | | Premature (OR=0.35; 95% CI 0.15-0.83) |
| Murray | ENT Surgeries | 30-day UHRs | Age; Race/Ethnicity; Gender; Complex condition; ICU admission; LOS; | Age (13-18 Years) (OR=1.12; 95% CI 1.03-1.21) |
| 2016 | Entr Suigenes | so day orms | Number of Diagnoses; Insurance type; Procedure Type; Geographic region | Complex condition (OR=1.73; 95% Cl 1.64-1.83) |
| 2020 | | | | $LOS \ge 2days$ (OR=4.17; 95% CI 3.8-4.56); |
| | | | | Number of Diagnoses =2 (OR=1.12; 95% Cl 1.05-1.2); |
| | | | | Number of Diagnoses =3-4 (OR=1.24; 95% Cl 1.16-1.33); |
| | | | | Number of Diagnoses >=5 (OR=1.69; 95% Cl 1.57-1.81); |
| | | | | Public and others insurance (OR=1.33; 95% CI 1.28-1.39); |
| | | | | Procedure Type |
| | | | | BMT (OR=2.84; 95% CI 2.56-3.13) |
| | | | | LARYNX (OR=2.6; 95% CI 2.38-2.58) |
| | | | | FP(OR=1.03; 95% CI 0.92-1.15) |
| | | | | GEN(OR=1.4; 95% CI 1.26-1.54) |
| | | | | SINUS(OR=1.7; 95% CI 1.5-1.93) |
| | | | | TA(OR=3.12; 95% CI 2.92-3.33) |
| | | | | Geographic region (Non-West) (OR=1.01-1.45) |
| Roxbury | Surgical | 30-day UHRs | Age; Race; Gender; Surgery (Tympanoplasty; Tympanomastoidectomy; | Tympanomastoidectomy (OR=5.5; 95% CI 1.52-20.34) |
| 2015 | (Otologic) | | Cochlear implantation) | cochlear implant (OR=3.54; 95% CI 0.85-14.77); |
| | | | | < 3 years (4 times vs. older pts) (OR=4.38; 95% Cl 2.00-9.60) |
| Roddy | Spinal fusion | 30- & 90-day | Gender; Race; Age; Diagnosis; Type of insurance; Surgical approach; LOS; | Male (OR=1.28; 95% CI 1.07-1.54); Diagnosis (OR=1.66 to 2.99); |
| 2017 | | UHRs | Hospital volume; Discharge disposition; Number of comorbidities; Hospital | Medicaid (OR=1.5; 95% CI 1.24-1.82); |
| USA | | | type; Infection on index admission; Mechanical complication at index | Anterior approach (OR=1.55; 95% CI 1.01-2.36); |
| | | | admission; Date of discharge (Weekend vs. weekdays); Level of spinal | LOS ≤3days (OR=1.89; 95% CI 1.37-2.59); |
| | | | infusion | LOS (6-124days) (OR=1.66; 95% CI 1.35-2.02); |
| | | | | Discharge to Short-term care hospital (OR=12.41; 95% CI 8.51- |
| | | | | 18.10); Discharge to Home health care (OR=1.44; 95% CI 1.09-1.91); |
| | | | | ≥ 1 Comorbidities (OR=1.21; 95% CI 1.01-1.50); |
| | | | | Teaching hospital (OR=1.59; 95% CI 1.10-2.18); |
| | | | | Infection on index admission (OR=2.12; 95% CI 1.22-3.69); |
| | | | | Mechanical complication (OR=3.79; 95% CI1.71-8.39) |
| Vedantam | Epilepsy | 30-day UHRs | Age; Gender; Race; Procedure; ASA classification; LOS; Weight category; | Hemispherectomy (OR=4.11; 95% CI 1.48-11.42) |
| 2017 | surgery | | Comorbidities; Discharge destination | |

| Chern 2014 | Shunt surgery | 30-day UHRs | Demographic (Age; Primary language other than English; Ethnicity/ Caucasian); Social-economic (Atlanta zip codes; Income levels in \$10,000s; Medicaid payee); Clinical characteristics (ED admission; PICU admission; NICU admission; After-hour op; op length >70 mins; VAS op; Externalized shunt/EVD; Subdural/cyst shunt; Spina bifida; New shunt; OS ≥3 days) | After hour surgery (OR=1.45; 95% CI 1.01-2.09) |
|-----------------------|-------------------------------------|-------------|---|---|
| Sarda 2014 | Non-shunt surgery | 30-day UHRs | Demographic (Age, English as primary language; Ethnicity; Social-economic (Household income per zip code; Atlanta metropolitan zip codes; Medicaid/Medicare as the primary payee) Clinical characteristics (LOS; Procedure length; Admission from ED before index non-shunt surgery; PICU admission; NICU admission; surgery started after 3 p.m. & before 7 a.m.; Minor procedures vs. Major procedures) | Longer LOS (≥3days) (OR=1.01; 95% CI 1.00-1.01); NICU admission (OR=3.54; 95% CI 1.54-8.13); Minor procedures (OR=2.86; 95% CI 1.53-5.34); Procedure starts after 3pm (OR=1.77; 95% CI 1.11-2.81); |
| Minhas 2016 | Spinal Surgeries | 30-day UHRs | Age; Gender; Weight; Diabetes; Premature birth; Ventilator requirement; Asthma; CF; CLD; Oxygen requirement; Tracheostomy; Structural pulmonary abnormality; Oesophageal/GI disease; Hepatobiliary/pancreatic disease; Cardiac risk factors; History of cerebrovascular event; CP; Childhood malignancy; CNS tumour; Impaired cognition; History of seizure; Structural CNS abnormality; Neuromuscular disorder; History of intraventricular haemorrhage; Immunity disorder; Chronic steroid use; Bone marrow disorder; History of organ transplant; Open wound; weight loss; Nutritional support requirement; Bleeding disorder; Haematological disorder; Chemotherapy; Preoperative sepsis; Preoperative inotrope requirement; Prior operation within last 30 days; Preoperative transfusion requirement; ASA≥3; Operative characteristics (Posterior fusion; Pelvic fixation; Progressive infantile scoliosis; Scoliosis; LOS >5d) | Obesity (OR=3.09; 95% CI 1.83-5.21) ; Impaired cognition for progressive infantile scoliosis (OR=10.08; 95% CI 2.78-14.23); ASA ≥3 (OR=5.92; 95% CI 1.02-10.74); Posterior fusion of ≥13 vertebrae for idiopathic scoliosis (OR=1.86; 95% CI 1.07-3.23); Pelvic fixation (OR=2.8; 95% CI 1.14-6.89) |
| Buicko 2017 USA | Laparoscopic Appendectom Y | 30-day UHRs | Type of appendicitis; Gender; Age; LOS; Household income; Type of insurance; Size of hospital; Type of hospital; Comorbidities | Perforated appendix (OR=2.3; 95% CI 1.88-2.81) Age <13Years (OR=1.24; 95% CI 1.01-1.53) LOS >7Days (OR=1.71; 95% CI 1.26-2.34) Metro teaching hospital (OR=1.28; 95% CI 1.03-1.58) Deficiency anaemias (OR=2.58; 95% CI 1.25-5.30) Fluid and electrolyte disorder (OR=1.57; 95% CI 1.12-2.21) |
| Cairo 2017a | Appendectom Y | 30-day UHRs | Day of discharge; Age; ASA classification; Gender; Race; Ethnicity | ASA class 3 (OR=1.78; 95% Cl 1.18-2.70) Factors that Predisposed to UHR Female (OR=0.81; 95% Cl 0.68-0.98) |
| Cairo 2017b | Laparoscopic Cholecystectom Y | 30-day UHRs | Gender; Age; BMI; Postoperative Diagnosis; Day of discharge (1-2 vs. Same day); Comorbidity; ASA classification; Indication for operation; Days from admission to surgery; | Hematologic comorbidity (OR=1.88; 95% CI 1.19-2.96) ASA 3 (OR=2.27; 95% CI 1.32-3.89) ASA 4 (OR=7.62; 95% CI 1.47-39.7) Factors that Predisposed to UHR Same-day discharge (OR=0.58; 95% CI 0.37-0.93) |
| Roth 2016 | Circumcision | 7-day UHRs | Age; Race; Insurance type | Public insurance (OR=1.44; 95% CI 1.07-1.94) |

| McNamara 2015 | Surgical (Urology) | 30-day UHRs | Age; Gender; BMI category; Operation time; Procedure count (1 vs. 2-5; vs. >5); Surgical risk index; Race/Ethnicity; Type of surgery; Primary diagnosis; | Longer operative time (OR=1.12; 95% CI 1.03-1.21); Previous procedures=2-5 (OR=2.16; 95% CI 1.10-4.16) Previous procedures >5 (OR=3.78; 95% CI 1.51- 9.45) Higher surgical risk score (OR=2.33; 95% CI 1.36-3.99) |
|------------------------------|--------------------------------------|---------------|---|---|
| Vemula- konda 2015 | Surgical (Urology) | 12-month UHRs | Patient demographics (Race/Ethnicity; Gender; Insurance); Clinical presentation (Disease severity; Age at surgery); Hospital characteristics (Census region; Any Urology fellowship; Hospital volume) | Early surgery (age at surgery < 1 Year) (HR=2.42; 95% Cl 1.67-2.49) |
| Tahiri 2015 | Plastic surgeries | 30-day UHRs | Inpatient procedure; Gastrointestinal history; Cardia history; Central nervous system (CNS) history; Nutritional history; Congenital malformation; Wound contamination; Operative time (93-174 min vs. >175min); ASA class IV; Surgical complications; Medical complications; Relative value units (a measure of value used in the United States Medicare reimbursement formula for physician services) | Inpatients procedures (OR=1.57; 95% CI 1.03-2.40) Pre-op wound contamination (OR=2.33; 95% CI 1.35-4.02) Longer operative times (>175min) (OR=3.89; 95% CI 2.22-6.81) A higher ASA class (OR=7.70; 95% CI 1.48-40.08) Postop surgical complications (OR=6.94; 95% CI 3.70-13.0) Medical complications (OR=11.92; 95% CI 4.71-30.21) |
| | | | General Medical Condition Related UHRs (16) | |
| Sacks 2017 USA | Cardiac conditions | 30-day UHRs | Age; LOS; Diagnosis count; First weight; Last weight; Electrophysiology study; Surgery; ACE/ARB antihypertensive; Antiarrhythmic; Antibiotic; Anticoagulant; Beta-Blocker; Diuretic; Pulmonary antihypertensive; Gender; Season of discharge | Age < 1month (OR=1.74; 95% Cl 1.01-3.01) Age (1-1Year) (OR=4.11; 95% Cl 3.41-5.92) Higher diagnosis counts (OR=1.10; 95% Cl 1.07-1.13) Factors that Predisposed to UHR Antibiotic (OR=0.73; 95% Cl 0.53-1.00) |
| Chave 2017 Switzerland | Congenital Heart Disease | 30-day UHRs | Gender; Surgery requirement; Age; Nationality (Swiss vs. Not Swiss); Type of disease; Canton of origin; LOS>14; Day of Discharge (Monday to Sunday) | CHD related UHR Live far from hospital (OR=2.96; 95% CI 1.56-5.61) Factors that Predisposed to UHR Had surgery (OR=0.49; 95% CI 0.25-0.97) LOS>14 (OR=0.42; 95% CI 0.20-0.91) |
| Mackie 2008 | Congenital Heart Disease (CHD) | 31-day UHRs | Patient-specific factors (Age; Gender; Severe CHD; ED visits ≤6 months; ≥2 outpatient visits ≤6 months; ≥2 CV specialist visit ≤6 months); Factors related to index hospitalization (LOS; Year of index hospitalization; CHD surgery or catheterization during the index hospitalization with or without ICU stay; Total number of diagnoses during index hospitalization; Index hospitalization in a Tertiary hospital; CV specialist/assessment; Discharge on Friday or Saturday) | HR (95%Cl) was illustrated via a Figure (no specific numbers were reported). Significant variables are: Sever CHD lesion; Younger age; Friday or Saturday discharge; Having an ED visit within the preceding 6 months; LOS >14 days; Multiple (≥4) diagnoses |
| Nakamura 2017 | Lower respiratory infections | 30-day UHRs | Age; Gender; CCIs; CCI counts | Male (OR=1.11; 95% CI 1.0-1.16) CCI of : Neoplasms (OR=2.86; 95% CI 2.21–3.70) Endocrine (OR=2.18; 95% CI 1.94–2.46) Diseases of blood (OR=1.76; 95% CI 1.57–1.96) Mental disorders (OR=1.47; 95% CI 1.29–1.68) Nervous system (OR=2.45; 95% CI 2.19–2.75) Circulatory system (OR=1.87; 95% CI 1.63–2.14) Respiratory system (OR=1.19; 95% CI 1.11–1.26) Digestive system (OR=2.01; 95% CI 1.82–2.21) |

| | | | | Genitourinary system (OR=2.05; 95%Cl 1.47-2.86) Musculoskeletal system (OR=1.74 ; 95% Cl 1.35–2.25) Congenital anomalies (OR=2.16 ; 95% Cl 1.98–2.36) Factors influencing health status (OR=2.80 ; 95% Cl 2.49–3.14) Factors that Predisposed to UHR Age (1-17Years) (OR=0.41-0.60) CCI count >3 body systems (OR=0.38 to 0.75) |
|-------------------|-----------|-------------------------|--|---|
| Veeranki 2017 | Asthma | 30-day UHRs | Age; Gender; Primary payer; County classification; Income quartiles based on median household income; Utilisation of emergency services; Weekend admission; Elective admission; Index hospitalization LOS; Bed size; Teaching status of the hospital; Hospital control/ownership; Discharge disposition | Age (12-18) (OR=1.59; 95% CI 1.22-2.07) Central County classification (OR=1.50; 95% CI 1.00-2.24) Micropolitan (OR=2.146; 95% CI 1.36-4.45) LOS >4 days (OR=1.56; 95% CI 1.02-2.38) Urban non-teaching hospital (OR=2.11; 95% CI 1.03-4.32) Urban teaching hospital (OR=2.25; 1.16-4.439) Discharge to unfavourable/skilled facilities (OR=2.52; 95% CI 1.33- 4.79) Pediatric CCC (OR=3.21; 95% CI 2.31-4.47) Factors that Predisposed to UHR Private payer (OR=0.69; 95% CI 0.59-0.95) |
| Vicendese 2015 | Asthma | 28-day UHRs | Indoor sampling (Bedroom airborne fungus); Number of people in house; Pets; Frequency of vacuuming; Carpet; Vacuum cleaner; Bedding; Heating | In children's bed room: Higher level of airborne Cladosporium (OR=1.68; 95% Cl 1.04-2.72) & yeast (OR=1.52; 95% Cl 0.99-2.34) Carpeted floors (OR=4.07; 95% Cl 1.03-16.06); Synthetic doonas (OR=14.6; 95% Cl 1.26-169.4); Frequent vacuuming using bagged cleaners (OR=15.7; 95% Cl 2.82-87.2) |
| Neuman 2014 | Pneumonia | 30-day UHRs | Age; Gender; Race/Ethnicity; Government payer; Distance to hospital; Household income; CCI; Asthma; Technology dependence; Number of hospitalization in previous year; Pneumonia-specific hospitalization in previous year; LOS; ICU stay; Complicated pneumonia | All cause UHR Age <1month (OR=1.96; 95% CI 1.33-2.87); 1-12monts (OR=1.73; 95% CI 1.63-1.83); 13-18years (OR=1.01; 95% CI 0.91-1.11) CCls (OR=3.01; 95% CI 2.82-3.21) Previous hospitalization 3+ (OR=4.60; 95% CI 4.22-5.01) LOS >7d (OR= 1.39; 95% CI 1.23-1.56) Complicated pneumonia (OR=1.32; 95% CI 1.11-1.56) Pneumonia-specific UHR Age <1month (OR=1.48; 95% CI 0.62-3.52); 1-12monts (OR=1.36; 95% CI 1.14-1.61); 13-18years (OR=1.18; 95% CI 1.00-1.39) CCls (OR=1.84; 95% CI 1.69-2.01) Previous hospitalization 3+ (OR= 2.70; 95% CI 2.35-3.10) LOS 3-7d (OR= 1.05; 95% CI 0.96-1.16) Complicated pneumonia (OR=1.82; 95% CI 1.44-2.31) |
| Vicendese 2014 | Asthma | 28-day & 1-year UHRs | Gender; Age; Season (Autumn vs. Winter vs. Spring vs. Summer vs. Grass pollen season <oct-jan>)</oct-jan> | 28-day UHR: Female (OR=1.15; 95% Cl 1.0041-1.32) Grass pollen season in boys (<i>p</i> =0.01) 1-year UHR: Female (OR=1.11; 95%Cl 1.05-1.19) |

| Kun 2012 | Chronic respiratory failure | 1-year UHRs | Gender; Race/ethnicity; Reasons for Chronic respiratory failure; Comorbidities; Ventilator type; Hours of ventilator support; Initial disposition; Type of insurance | Inconclusive findings |
|--------------------|-----------------------------------|-------------------------|---|--|
| McNally 2005 | Preschool viral-wheeze | 6-month UHRs | Age; Female; GA; Maternal smoking; History of eczema; or wheeze on exercise; Salbutamol inhaler only prescribed by GP; Prophylactic inhaled steroids; LOS; Minimum oxygen saturation in air; Salbutamol nebulisations during admission; Prednisolone given during admission | Inconclusive findings |
| Cohen 2000 | Asthma | 30-day UHRs | Gender; Race; Age; Type of admission; Month of admission; Previous history (Asthma admission; NICU admission; CLD/BHD; Other chronic disease; Exposure to smoke; Discharge medications | History of previous NICU admission (OR=5.2; 95% CI 1.7-15.4) Comorbidity with other chronic disease (OR=4.3; 95% CI 1.9-9.8) History of previous admission for asthma (OR=4.9; 95% CI 3.2-7.3) |
| Sobota 2012 | Sickle Cell disease | 30-day UHRs | Patient demographics (Age; Gender; Race; Sickle Genotype); Payer/Insurance; Hospitalization factors (LOS; Discharge day of the week and season); Co-morbidities (Asthma, Acute chest syndrome); Additional therapies/treatment (Corticosteroids, hydroxyurea, oxygen on the day of discharge, narcotic pain medication, simple and exchange transfusion; ICY are and ventilator support); APR-DRG severity score; Hospital factors (number of beds or number of sickle admission s during study period) | Age/each year (OR=1.06; 95% CI 1.04-1.07) Inpatient use of steroid (OR=1.48; 95% CI 1.09-2.02) Admission for pain (OR=1.53; 95% CI 1.24 -1.86) |
| Frei-Jones 2009 | Sickle cell disease | 30-day UHRs | LOS; Primary admission diagnosis; Primary discharge diagnosis; Pain & Management; Respiratory symptoms & use of steroid; Oxygen requirement; Fever; Follow-up (Appointment given; Seen in SCD-clinic for F/U) | No outpatient haematology F/U in within 30-days of discharge (OR=7.7; 95% CI 2.4-24.4); Asthma (OR=2.9; 95% CI 1.2-7.3); Oxygen requirement: on room air \leq 24 hours at discharge (OR=3.3; 95% CI 1.1-9.7); Disease severity with \geq 3 admissions in the previous 12 months (OR=7.3; 95% CI 2.8-18.9) |
| Slone 2008 | ALL | 28-day UHRs | Age at diagnosis; Absolute neutrophil count (ANC) at discharge; Absolute phagocyte count (APC) at discharge; Total WBC at diagnosis; LOS | Absolute neutrophil count (ANC) \leq 200/mm ³ at discharge (OR=3.3; 95% CI 1.42-7.73) |
| Braddock 2015 | Complex chronic/ medical | 7; 30; & 90 day UHRs | Type of insurance; Consult by critical care; Indwelling technology/device; Mobility support; Number of medication at discharge; LOS; Type of admission; APR-DRG (Nervous system; ENT/Craniofacial; All others); Service line (Neuroscience; other surgery; other medicine; all others); Sum of CCC diagnoses; Sum of physician specialties consulting | Presence of indwelling technology (OR=2.33-3.13); Increasing numbers of medications at discharge (OR=1.08-1.10); Nervous System APR-DRG diagnoses (OR=1.78-2.51) |
| Attard 2017 | Gastrointestin al bleeding | 30-day UHRs | Gender; Race; Urban/Rural; CCI; Gastrointestinal haemorrhage (GIH)symptoms; Blood transfusion (Red cell or Platelet); ICU stay; Hospital LOS (IQR); Day of EGD; Chronic liver disease; GIH present on admission; Sepsis; Shock; Pharmaceutical interventions; Diagnostic imaging; Surgical interventions | CCCs of 1 or 2 (OR=1.869; 95% CI 1.562-2.237) CCCs ≥3 (OR=2.851; 95% CI 2.351-3.457) Chronic liver disease (OR=1.79; 95% CI 1.330-2.408) Receiving a PPI on the 1 st or 2 nd day of index admission (OR=1.368; 95% CI 1.151-1.625) Longer LOS – a 10% increase in LOS (OR=1.130; 95%CI 1.118-1.144) Factors that Predisposed to UHR Endoscopic procedures (OR=0.774; 95%CI 0.661-0.906) |

| | Meckel scan in the 1 st 3 days of index admission (OR=0.513; 95% CI |
|--|--|
| | 0.362-0.727) |