**Supplementary Material**

Table S1. Sensitivity analysis for the relationship between serum potassium, spot urinary potassium to creatinine ratio, and cardiac injury defined with a CKD-specific hs-TnT cut-off of ≥ 126 ng/L

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Univariate | | Model 1 | | Model 2 | | Model 3 | |
|  | OR (95% CI) | *P* | OR (95% CI) | *P* | OR (95% CI) | *P* | OR (95% CI) | *P* |
| Serum potassium (mmol/L) | 1.259 (0.426-3.256) | 0.655 | 0.440 (0.132-1.363) | 0.164 | 0.376 (0.069-1.646) | 0.22 | 0.514 (0.074-2.945) | 0.461 |
| Spot urinary potassium to creatinine ratio (10 mmol/g Cr) | 0.891 (0.623-1.179) | 0.482 | 0.877 (0.599-1.208) | 0.460 | 0.76 (0.461-1.171) | 0.245 | 0.553 (0.197-1.221) | 0.193 |

hs-TnT, high sensitive troponin T; CKD, chronic kidney disease; OR, odds ratio; CI, confidence interval. OR and 95% CI for cardiac injury were calculated using logistic regression. In model 1, the covariates were age, sex, smoking status, causes of chronic kidney disease, administration of renin-angiotensin system inhibitors, anti-platelet drugs, anti-lipid drugs, previous cardiovascular disease, age-adjusted Charlson comorbidity index, body mass index, systolic and diastolic blood pressure, fasting glucose, high-density lipoprotein cholesterol, and triglyceride levels. In model 2, the covariates were variables of model 1 with calcium, phosphorus, 25-hydroxy vitamin D, intact parathyroid hormone, albumin, hemoglobin, and white blood cells. In model 3, the covariates were variables of model 2 with blood urea nitrogen, estimated glomerular filtration rate, total CO2, and urine albumin-to-creatinine ratio.