Supplementary Digital Table 2: Sensitivity Analysis with Additional Racial and Ethnic Categories

	White (%)	Black (%)	Asian / Pacific	Hispanic (%)	Other (%)
	(95% CI)	(95% CI)	Islander (%)	(95% CI)	(95% CI)
		p-value (compared	(95% CI)	p-value (compared	p-value (compared
		to White)	p-value (compared	to White)	to White)
			to White)		
Utilization of any	52.7	53.3	51.8	52.2	52.0
Regional	(52.4 –	(52.5 - 54.1)	(50.5 - 53.1)	(51.3 - 53.1)	(50.6 - 53.3)
Anesthesia	53.0)	p = 0.134	p = 0.181	p = 0.321	p = 0.282

*significant at the p<0.05 level.

Supplementary Digital Table 2 presents a sensitivity analysis estimating the association between race and ethnicity and block utilization for postoperative pain, along with sensitivity analyses. This analysis used the Medicare Research Triangle Institute race variable (see Methods for additional detail). Given that this variable improves the validity of the Asian/Pacific Islander and Hispanic categories, we re-categorized patients into White, Black, Asian/Pacific Islander, Hispanic, and Other. Estimates were derived from a multivariable logistic regression that accounted for age, sex, Elixhauser comorbidities, preoperative opioid, anticoagulant, and antiplatelet utilization, and year and hospital fixed effects. Odds ratios were converted to predicted probabilities for ease of interpretation.