## **Supplemental Digital Content**

# The diagnostic yield of routine admission blood cultures in critically ill patients

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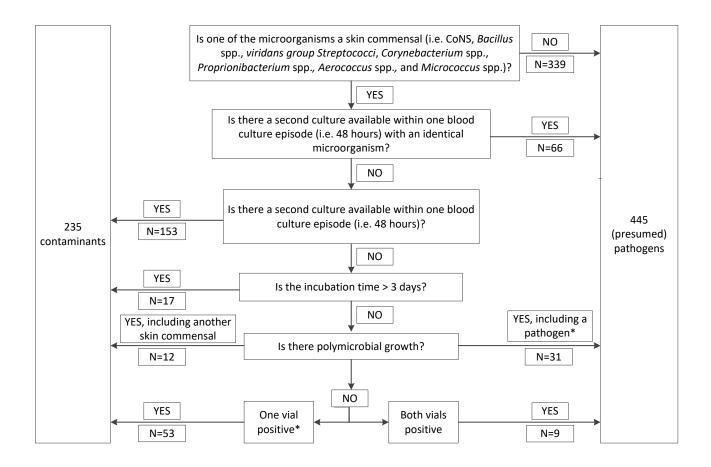
Table S1. Clas	ssification of pathogenic micro-org	anisms after a	djudication			
		Control per	Control period		Intervention period	
		N cultures	N patients	N cultures	N patients	
Enterobacterales		33	27	70	49	
•	Escherichia coli	26	21	35	25	
•	Klebsiella oxytoca	-	-	7	4	
•	Klebsiella pneumoniae	1	1	5	4	
•	Proteus mirabilis	2	2	8	5	
•	Raoultella species	2	1	-	-	
•	Salmonella enterica	-	-	2	2	
- Amp C	<sup>C</sup> producing					
•	Citrobacter freundii	1	1	4	1	
•	Enterobacter cloacae complex	1	1	3	3	
•	Morganella morganii	-	-	1	1	
•	Pantoea agglomerans	-	-	1	1	
•	Serratia marcescens	1	1	4	3	
		N cultures	N patients	N cultures	N patients	
Other Gram-negatives		17	15	40	24	
- Gram-negative anaerobes						
•	Bacteroides spp.	3	3	4	3	
•	Fusobacterium necrophorum	-	-	1	1	
•	Prevotella nigrescens	-	-	1	1	
•	Gram negative anaerobe (not further specified)	-	-	1	1	
- Other						
•	Aeromonas veronii	-	-	2	1	
•	Capnocytophaga species	-	-	1	1	
•	Haemophilus influenzae	1	1	-	-	
•	Moraxella catarrhalis	-	-	2	1	
•	Neisseria meningitidis	1	1	2	1	
•	Oligella urethralis	-	-	1	1	
•	Pseudomonas aeruginosa	9	8	24	12	
•	Pseudomonas putida	-	-	1	1	
•	Sphingomonas species	2	1	-	-	
•	Vibrio parahaemolyticus	1	1	-	-	
	· · ·	N cultures	N patients	N cultures	N patients	
Staphylococci		42	19	85	34	
	Coagulase negative staphylococci	27	11	41	17	

Staphylococcus aureus	15	8	45	18
	N cultures	N patients	N cultures	N patients
Streptococci	22	19	35	24
- Pyogenic streptococci				
Streptococcus agalactiae	2	2	-	-
Streptococcus dysgalactiae	3	2	6	4
Streptococcus pyogenes	3	3	2	2
- Non-pyogenic streptococci				
Streptococcus gallolyticus	-	-	2	1
Streptococcus pneumoniae	9	9	14	9
• Viridans streptococci	4	2	3	2
- Other streptococci				
Aerococcus species	-	-	3	1
Gemella morbillorum	-	-	1	1
Granulicatella adiacens	-	-	2	2
	N cultures	N patients	N cultures	N patients
Enterococci	20	13	46	25
Enterococcus faecalis	5	4	13	8
Enterococcus faecium	16	10	33	17
Other Gram-positives	9	5	17	13
- Gram-positive anaerobes				
Actinomyces odontolyticus			3	3
Clostridium innocuum			1	1
Clostridium perfringens			3	2
Clostridium symbiosum	1	1		
Lactobacillus sakei			1	1
Lactococcus lactis	1	1		
Parvimonas micra			1	1
Peptostreptococcus species			1	1
- Other				
Bacillus species	-	-	1	1
Kocuria species	1	1	1	1
Listeria monocytogenes	-	-	4	1
Pseudoclavibacter species	2	1		
Rothia mucilaginosa	4	1	1	1
	N cultures	N patients	N cultures	N patients
Yeast	9	6	16	6
Candida albicans	2	2	6	3

• Co	andida glabrata	7	4	2	2
• Co	andida krusei	-	-	8	1
Total		145	95	282	154

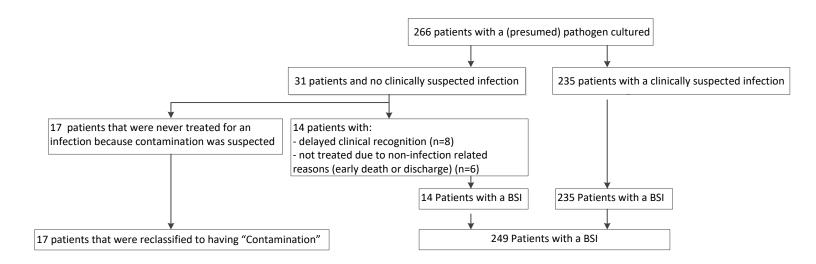
This table reports the number of unique cultures and unique patients with a positive result, therefore numbers of cultures and patients do not necessarily add up per type of micro-organism.

#### Figure S1. Classification of blood culture results

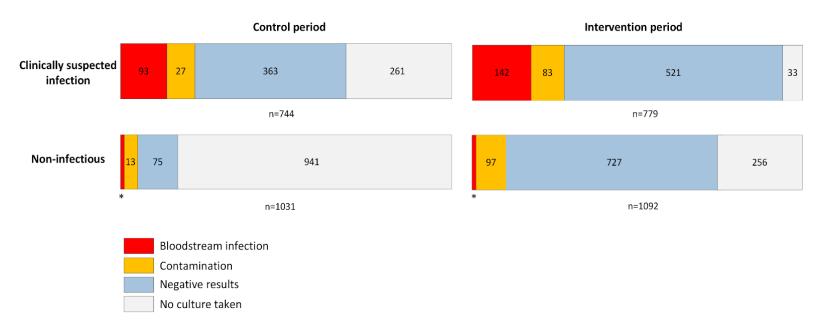


\*Culture results with an obligate aerobe (*Micrococcus spp.*, n=5), were all classified as contaminants. Thirty-one cultures (in 27 patients) contained both a contaminant and a (presumed) pathogen according to this algorithm, and were classified as (presumed) pathogen in this figure.

# Figure S2. Adjudication of bloodstream infections and contamination in patients after aggregating blood culture results



*ICU:* intensive care unit. *BSI:* Bloodstream infection. Presence of a (clinically suspected) infection was based on the prospective data collection within the MARS study (1), and was based on the presence of sepsis or use of therapeutic antimicrobial therapy within the first two days of ICU admission.



### Figure S3. Included patients in the before and after period by clinically suspected infection

The box size represents the relative proportion of number of subjects within the particular subgroup. Clinically suspected infections include all infections in the first two days of ICU admission. \*2 patients without clinical suspicion of infection had a BSI in the before period, compared to 12 in the after period.

### References

1. Klein Klouwenberg PM, Ong DS, Bos LD, et al. Interobserver agreement of Centers for Disease Control and Prevention criteria for classifying infections in critically ill patients. *Crit Care Med.* 2013; 41:2373–8.