

SUPPLEMENTARY 1: DEFINITIONS

Term	Study definition
Clinical changes consistent with sepsis	(1) temperature ≥ 38 or $\leq 36.5^{\circ}\text{C}$ (2) new marked tachycardia (>180 bpm) or bradycardia <80 bpm (including episodes of bradycardia increased from baseline) (3) new apnea (4) extended capillary refill time (≥ 4 seconds) (5) new metabolic acidosis ($\text{pH} \leq 7.25$ or bicarbonate ≤ 18 mmol/L) (6) new hyperglycemia (glucose >10 mmol/L) (7) change in energy, change in level of consciousness or seizure
Laboratory changes consistent with sepsis	(1) new thrombocytopenia ($<100/\text{nl}$) (2) CRP >15 mg/L (3) immature/total neutrophil ratio >0.2 (4) white blood cell count under $5/\text{nl}$
Suspected sepsis	neonate with physician or nurse practitioner order to draw a blood culture
Culture-proven sepsis	(1) at least one clinical or laboratory change consistent with sepsis, <u>and</u> (2) a positive blood or cerebrospinal fluid culture of a pathogenic species (other than CoNS)
CoNS sepsis	(1) two or more clinical or laboratory changes consistent with sepsis, (2) blood culture positive for CoNS, <u>and</u> (3) an indwelling catheter present
Clinical sepsis	(1) two or more clinical or laboratory changes consistent with sepsis, (2) treatment with antibiotics for ≥ 5 days, <u>and</u> (3) no apparent better explanation
Non-septic	patients who do not meet criteria for sepsis as outlined above

Abbreviations: CoNS (coagulase-negative staphylococci), CRP (C-reactive protein)