

Supplementary material

Supplementary Tables 1 Local site symptoms and signs of infections[1]

Symptoms of Lower Respiratory Tract Infection	Fever, Cough, Shortness of breath
Signs of Lower Respiratory Tract Infections	Tachypnoea, Tachycardia, increasing oxygen requirement

Supplementary Tables 2 Sequential Organ Failure Assessment (SOFA) Score (to be decided by the clinician)[2]

Organ System/Parameter (score)	1	2	3	4
Respiratory/PaO ₂ /FiO ₂ [mmHg]	<400	<300	<200 with respiratory support	<100 with respiratory support
Nervous system: GCS	13 - 14	10 - 12	6 - 9	< 6
Cardiovascular/Hypotension (µg/kg/min)	MAP <70 mmHg	Dopamine < 5 (any dose)	Dopamine > 5, nor-epinephrine ≤0.1	Dopamine > 15, nor-epinephrine ≥0.1
Coagulation/Platelets [$\times 10^3/\text{mm}^3$]	<150	<100	<50	<20
Renal/Creatinine (mg/dl) or urine output	1.2-1.9	2.0-3.4	3.5-4.9 or <500 mL/day	≥5 or <200 mL/day
CNS/Glasgow Coma Scale (points)	13-14	10-12	6-9	< 6
Liver: Bilirubin (mg/dl)	1.2 - 1.9	2 - 5.9	6 - 11.9	> 12

Supplementary Tables 3 Any possible source other than Lower Respiratory Tract Infection (LRTI) responsible for the increase in SOFA score

- Any clinical feature other than symptoms and signs of LRTI
 - Any lab parameters suggesting alternative foci
 - Any imaging evidence suggesting foci other than LRTI
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Supplementary Tables 4 Flora of the respiratory tract[3,4]

- Group A Streptococcus
 - *S aureus*
 - *S pneumoniae*
 - Non-typeable *H influenzae*
 - *N meningitidis*
 - Candida species
 - Aspergillus species
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Supplementary Tables 5 Any patient characteristics deciding growth of the organisms for Lower Respiratory Tract Infection (LRTI)[5-11]

- i. Previous h/o LRTI
 - ii. Tracheostomy
 - iii. Neuromuscular disorder
 - iv. Poor oral hygiene (tobacco chewing/smoking, alcoholic, dry mouth, chronic bedridden patients)
 - v. COPD
 - vi. Patients on mechanical ventilation
 - vii. Prior isolation of the organism within 1 year of the incident
 - viii. Recent hospitalization/antibiotic use within 90 days
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Supplementary Tables 6 Any possibility for contamination at different time points[4, 11-13]

SAMPLE COLLECTION

- Was the sample collected with aseptic precautions
- Site cleaned if blood
- Single bout cough if sputum
- Aseptic precautions of BAL or ET/TT aspiration

TRANSPORT

- Was the lead tight condition maintained
- Was the temperature maintained
- Was the sterility maintained

LAB HANDLING

- For LRTI samples - Was the sample stored before processing
 - Was the temperature maintained
 - Was aseptic condition maintained
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