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| **Supplementary Table S1｜**CONSORT checklist |
| Section | Item NO  | Checklist item |
| Title and abstract | 1a | Identification as a randomized trial in the title |
| 1b | Structured summary of trial design, methods, results, and conclusions |
| Introduction |
| Background and objectives | 2a | Scientific background and explanation of rationale |
| 2b | Specific objectives or hypotheses |
| Methods |
| Trial design | 3a | Description of trial design (such as parallel, factorial) including allocation ratio |
| 3b | Important changes to methods after trial commencement, with reasons |
| Participants | 4a | Eligibility criteria for participants |
| 4b | Settings and locations where the data were collected |
| Interventions | 5 | The interventions for each group with sufficient details to allow replication, including how and when they were actually administered |
| Outcomes | 6a | Completely defined pre-specified primary and secondary outcome measures, including how and when they were assessed |
| 6b | Any changes to trial outcomes after the trial commenced, with reasons |
| Sample size | 7a | How sample size was determined |
| 7b | When applicable, explanation of any interim analyses and stopping guidelines |
| Randomization |
| Sequence generation | 8a | Method used to generate the random allocation sequence |
| 8b | Type of randomization; details of any restriction (such as blocking and block size) |
| Allocation concealment mechanism | 9 | Mechanism used to implement the random allocation sequence (such as sequentially numbered containers), describing any steps taken to conceal the sequence until interventions were assigned |
| Implementation | 10 | Who generated the random allocation sequence, who enrolled participants, and who assigned participants to interventions |
| Blinding | 11a | If done, who was blinded after assignment to interventions (for example, participants, care providers, those assessing outcomes) and how |
| 11b | If relevant, description of the similarity of interventions |
| Statistical methods | 12a | Statistical methods used to compare groups for primary and secondary outcomes |
| 12b | Methods for additional analyses, such as subgroup analyses and adjusted analyses |
| Results  |
| Participant flow | 13a | For each group, the numbers of participants who were randomly assigned, received intended treatment, and were analyzed for the primary outcome |
| 13b | For each group, losses and exclusions after randomization, together with reasons |
| Recruitment | 14a | Dates defining the periods of recruitment and follow-up  |
| 14b |
| Baseline data  | 15 | A table showing baseline demographic and clinical characteristics for each group  |
| Numbers analysed  | 16 | For each group, number of participants (denominator) included in each analysis and whether the analysis was by original assigned groups  |
| Outcomes and estimation  | 17a | For each primary and secondary outcome, results for each group, and the estimated effect size and its precision (such as 95% confidence interval) |
| 17b  |
| Ancillary analyses  | 18 | Results of any other analyses performed, including subgroup analyses and adjusted analyses, distinguishing pre-specified from exploratory  |
| Harms  | 19 | All important harms or unintended effects in each group |
| Discussion |
| Limitations  | 20 | Trial limitations, addressing sources of potential bias, imprecision, and, if relevant, multiplicity of analyses  |
| Generalizability  | 21 | Generalizability (external validity, applicability) of the trial findings  |
| Interpretation  | 22 | Interpretation consistent with results, balancing benefits and harms, and considering other relevant evidence  |
| Other information |
| Registration | 23 | Registration number and name of trial registry  |
| Protocol  | 24 | Where the full trial protocol can be accessed, if available |
| Funding  | 25 | Sources of funding and other support (such as supply of drugs), role of funders  |

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| **Supplementary Table S2｜**PSI rating scale |
| Indicators | Score |
| Sex |  |
| Male | 0 |
| Female | -10 |
| Residence |  |
| Nursing Home | +10 |
| Combined disease |  |
| Tumor | +30 |
| Hepatopathy | +20 |
| Congestive heart failure | +10 |
| Cerebrovascular disease | +10 |
| Nephropathy | +10 |
| Chest radiography |  |
| Hydrothorax | +10 |
| Signs |  |
| Altered mental status | +20 |
| Respiratory rate ≥30 beats/min | +20 |
| SBP<90mmHg | +20 |
| Body temperature<35℃ or >40℃ | +15 |
| Pulse≥125 beats/min | +10 |
| Laboratory testing |  |
| Blood urea nitrogen ≥11mmol/L | +20 |
| Serum sodium<130mmol/L | +20 |
| Blood glucose≥14mmol/L | +10 |
| Hematocrit value<0.3 | +10 |
| pH<7.35 | +30 |
| PaO2<60mmHg or SaO2<90% | +10 |

\* I:0, II:≤70, III: 71-90, IV: 91-130, V: >130

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| **Supplementary Table S3∣**The normal values of laboratory tests  |
| Items | Units | Age | Male | Female |
| Red blood cells | ×1012/L | 3m-6m | 3.3-5.2 |
| 6m-6y | 4.0-5.5 |
| 6y-13y | 4.2-5.7 |
| 13y-15y | 4.5-5.9 | 4.1-5.3 |
| White blood cells | ×109/L | 3m-6m | 4.3-14.2 |
| 6m-1y | 4.8-14.6 |
| 1y-2y | 5.1-14.1 |
| 2y-6y | 4.4-11.9 |
|  | 6y-13y | 4.3-11.3 |
| 13y-15y | 4.1-11.0 |
| Platelets | ×109/L | 3m-6m | 183-614 |
| 6m-1y | 190-579 |
| 1y-2y | 190-524 |
| 2y-6y | 188-472 |
|  | 6y-12y | 167-453 |
| 12y-15y | 150-407 |
| Neutrophil percentage | % | 3m-6m | 7-56 |
| 6m-1y | 9-57 |
| 1y-2y | 13-55 |
| 2y-6y | 22-65 |
|  | 6y-13y | 31-70 |
| 13y-15y | 37-77 |
| Lymphocyte percentage | % | 3m-6m | 26-83 |
| 6m-1y | 31-81 |
| 1y-2y | 33-77 |
| 2y-6y | 23-69 |
|  | 6y-13y | 23-59 |
| 13y-15y | 17-54 |
| CRP | mg/L | 3m-15y | <8 |
| PCT | ng/mL | 3m-15y | <0.25 |
| Alanine aminotransferase | U/L  | 3m-1y | 8-71 |
| 1y-2y | 8-42 |
| 2y-13y | 7-30 |
| 13y-15y | 7-43 | 6-29 |
| Aspartate aminotransferase | U/L  | 3m-1y | 21-80 |
| 1y-2y | 22-59 |
| 2y-13y | 14-44 |
| 13y-15y | 12-37 | 10-31 |
| Alkaline phosphatase | U/L  | 3m-6m | 98-532 |
| 6m-1y | 106-420 |
| 1y-2y | 128-432 |
| 2y-9y | 143-406 |
|  | 9y-12y | 146-500 |
| 12y-14y | 160-610 | 81-454 |
| 14y-15y | 82-603 | 63-327 |
| Total bilirubin | μmol/L | 3m-15y | 3.42-20.5 |
| Blood creatinine | μmol/L | 3m-2y | 13-33 |  |
| 2y-6y | 19-44 |  |
| 6y-13y | 27-66 |  |
| 13y-15y | 37-93 | 33-75 |
| Blood urea nitrogen | mmol/L | 3m-6m | 0.8-5.3 |  |
| 6m-1y | 1.1-5.9 |  |
| 1y-2y | 2.3-6.7 |  |
| 2y-15y | 2.7-7.0 | 2.5-6.5 |
| Creatinine clearance | ml/min/1.73m2 | 3m-15y | 80-130  |
| Urinary protein |  |  | negative |
| Urinary red blood cells |  |  | negative |
| \*According to Health Industry Standards of the People's Republic of China (WS/T 779—2021, WS/T 780—2021) |

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| **Supplementary Table S4∣** Classification and management of AEs |
| Classification | Characteristic | Management |
| Mild | AEs are mild and do not require medical intervention | Keep on study |
| Moderate | AEs are mild and tolerable to the patient but require medical intervention | Stop study |
| Severe | AEs are severe and intolerable to the patient and require medical intervention | Stop study |

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| **Supplementary Table S5∣**The judgment criteria for the correlation between AEs and meropenem |
| Correlation | Description |
| Certain | * A clinical event, including a laboratory test abnormality, that occurs in a plausible time relation to drug administration, and which cannot be explained by concurrent disease or other drugs or chemicals.
* The response to withdrawal of the drug (dechallenge) should be clinically plausible.
* The event must be definitive pharmacologically or phenomenologically, using a satisfactory rechallenge procedure if necessary.
 |
| Probable/Likely | * A clinical event, including a laboratory test abnormality, with a reasonable time relation to administration of the drug, unlikely to be attributed to concurrent disease or other drugs or chemicals, and which follows a clinically reasonable response on withdrawal (dechallenge).
* Rechallenge information is not required to fulfil this definition.
 |
| Possible | * A clinical event, including a laboratory test abnormality, with a reasonable time relation to administration of the drug, but which could also be explained by concurrent disease or other drugs or chemicals.
* Information on drug withdrawal may be lacking or unclear
 |
| Unlikely | * A clinical event, including a laboratory test abnormality, with a temporal relation to administration of the drug, which makes a causal relation improbable, and in which other drugs, chemicals, or underlying disease provide plausible explanations.
 |
| Conditional/Unclassified | * A clinical event, including a laboratory test abnormality, reported as an adverse reaction, about which more data are essential for a proper assessment or the additional data are being examined
 |
| Unassessable/ Unclassifiable | * A report suggesting an adverse reaction that cannot be judged, because information is insufficient or contradictory and cannot be supplemented or verified
 |