Study		
reference		Panel of antimicrobial agents tested against E. coli
Country	Testing methodology	and/or K. pneumoniae
	Antibiotics susceptibility testing was performed by Kirby-Bauer methods, confirmed, if required, by testing minimum inhibitory	
	concentration using E. strip test. Interpretation followed the CLSI M100 guidelines. ESBL activity was detected by using E test ESBL	
Al-Saif et al.	CTX/CTX+clavulanic acid strip and CAZ/CAZ+clavulanic acid strip.	
[11]	For a given uropathogen and a given antibiotic, antibiotics sensitivity as proportion rounded to the nearest whole number (the	E. coli and K. pneumoniae: AMP, CXM, NIT, SXT, CTX, CAZ,
Saudi Arabia	number of sensitive organisms/the total number of tested organisms) with its 95% CI calculated.	CRO, GEN, AMK, TZP, and IPM.
Hussain at al		
nussam et al.		
[15]		E. coli and K. pneumoniae: AMP, AMC, AMK, CEF, CTX,
Kuwait	N/A	CAZ, MEM, TZP, TMP, and NIT.
Sharef et al.		
[16]		E. coli and K. pneumoniae: AMP, AMC, AMK, CIP, CTX,
Oman	N/A	CRO, CXM, NIT, GEN, MEM, SXT, and TZP.
		AMP, AMK (only ESBL-E. coli and K. pneumoniae), CFZ
Kabbani et al.		(only E. coli and ESBL-K. pneumoniae), CTX, GEN, SXT, NIT,
[17]	CLSI was used in our cases to determine the susceptibility of microbial organisms to antibiotics using the breakpoint dilution	CIP, MEM (only ESBL-E. coli, K. pneumoniae, and ESBL-K.
Saudi Arabia	method.	pneumoniae), and IPM.

Supplementary Table 3. Antimicrobial susceptibility testing methodologies of the studies included in Table 2

Study		
reference		Panel of antimicrobial agents tested against E. coli
Country	Testing methodology	and/or K. pneumoniae
	Sensitivity and resistance of <i>E. coli</i> isolates were determined using VITEK test method. Susceptibility interpreted according to the	
	CLSI guidelines. Resistance of E. coli to one or more of three antibiotics (AMP, SXT, and CIP) were studied and classified to SSR	
	(sensitive to AMP, sensitive SXT, and resistance CIP); RRR (resistance AMP, resistance SXT and resistance CIP); SSS (sensitive AMP,	
Alanazi et al.	sensitive SXT and sensitive CIP); RRS (resistance AMP, resistance SXT and sensitive CIP); SRS (sensitive AMP, resistance SXT and	
2018a [18]	sensitive CIP), and SRR (sensitive AMP, resistance SXT and resistance CIP). Multidrug resistance was defined as resistance to three	
Saudi Arabia	or more antimicrobials.	Only E. coli: AMP, AMC, SXT, CIP, NIT, and CFZ.
Hamood at al		
Hailleeu et al.		
[23]		E. coli and K. pneumoniae: AMP, AMC, CFZ, CTX, CIP, SXT,
Saudi Arabia	Resistance rates included isolates in the intermediate category.	GEN, IPM, MEM, and NIT.
Abyzeyad et		
al. [25]		
Bahrain	N/A	Only <i>E. coli</i> : AMC and CXM.
Alavudeen et		E. coli and K. pneumoniae: AMK, AMC, AMP, FEP, FOX,
al. [27]		CRO, CXM, CIP, LVX, ETP, GEN, IPM, MEM, NIT, TZP, TGC,
Saudi Arabia	N/A	SXT, CTX, CAZ, and FOF.

Study		
reference		Panel of antimicrobial agents tested against E. coli
Country	Testing methodology	and/or K. pneumoniae
		<i>E. coli</i> : AMK, AMP, AMC, ATM, FEP, CTX, FOX, CAZ, CRO, CXM, CEF, CIP, CST, SXT, GEN, IPM, LVX, MEM, NAL, NIT, NOR, TZP, and TGC. ESBL- <i>E. coli</i> : AMK, AMP, AMC, ATM, FEP, FOX, CAZ, CRO,
		CXM, CEF, CIP, SXT, GEN, IPM, LVX, MEM, NIT, NOR, and TZP.
Alzahrani et		K. pneumoniae: AMK, AMP, AMC, ATM, cedoxitine, FOX,
al. [30]	The VITEK system was used to perform comprehensive confirmation and antibiotic susceptibility tests. The collected data were	CRO, CXM, CEF, CIP, SXT, GEN, IPM, LVX, MEM, NIT, NOR,
Saudi Arabia	examined and interpreted in accordance with the CLSI's criteria.	TZP, and TOB.
El-Naggari et		
al. [32]		Only E. coli: AMP, AMC, AMK, CIP, CTX, CRO, CXM, NIT,
Oman	Pure cultures of pathogenic organisms were tested for antimicrobial susceptibility based on CLSI guidelines.	GEN, MEM, SXT, and TZP.
Saeed et al.		
[33]	The antimicrobial susceptibility testing of all isolates was done by the standard Kirby-Bauer disk diffusion method using commercial	
Bahrain	disks (Oxoid) according to CLSI.	Only <i>E. coli</i> : CIP, SXT, NIT, and FOF.

Study		
reference		Panel of antimicrobial agents tested against E. coli
Country	Testing methodology	and/or K. pneumoniae
Shaaban et		
al. [34]	Bruker MALDI-TOF was used for the identification of clinically relevant organisms and BD Phoenix M50 was used for both the	E. coli and K. pneumoniae: AMP, NIT, SXT, CIP, AMC, CFZ,
Bahrain	identification of clinically relevant organisms as well as antibiotic sensitivity testing by measuring MIC.	GEN, AMK, CXM, CRO, TZP, and CAZ.

AMC, amoxicillin-clavulanic acid (Augmentin or co-amoxiclav); AMK, amikacin; AMP, ampicillin; ATM, aztreonam; CAZ, ceftazidime; CEF, cephatholin; CFZ, cefazolin; CI, confidence interval; CLSI, Clinical and Laboratory Standards Institute; CRO, ceftriaxone; CST, colistin; CTX, cefotaxime; CXM, cefuroxime; ESBL, extended-spectrum β-lactamase; ETP, ertapenem; FEP, cefepime; FOF, fosfomycin; FOX, cefoxitin; GEN, gentamicin; IPM, imipenem; LVX, levofloxacin; MALDI-TOF, matrix-assisted laser desorption/ionization-time-of-flight; MEM, meropenem; MIC, minimum inhibitory concentration; NA, data not available/reported; NAL, nalidixic acid; NIT, nitrofurantoin; NOR, norfloxacin; SXT, trimethoprim-sulfamethoxazole (Bactrim or co-trimoxazole); TET, tetracycline; TGC, tigecycline; TMP, trimethoprim; TOB, tobramycin; and TZP, piperacillin-tazobactam (Tazocin).