Supplemental Material

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Description of Multivariable Model Development

The first multivariable model included age and sex as covariates. The second model included all potential confounding covariates that were significantly associated (p < 0.1) with both the presence of a urinary catheter and subsequent bacteremia (outcome) in univariable analyses. There was no significant interaction between urinary catheter and any covariate. The third model and fourth (final) model were created by adjusting model 2 for clinical relevance and parsimony while preserving the accuracy and precision of the estimate of association between urinary catheter and subsequent bacteremia (Supplemental Table 1). The final model included urinary catheter as the exposure and central venous catheter, other indwelling device, and the location where the culture was obtained as covariates.

Supplemental Table 1: Multivariable Models Estimating the Association Between Urinary

Catheter and Subsequent Bacteremia in Patients with Carbapenem-Resistant

Enterobacterales Bacteriuria

Variable	Model 1	Model 2	Model 3	Model 4 ^a
v ariable	aOR (95% CI)	aOR (95% CI)	aOR (95% CI)	aOR (95% CI)
Urinary catheter ^b	8.4 (1.9–36.7)	5.4 (1.2–24.5)	5.5 (1.2–24.7)	5.3 (1.2–23.6)
Sex	1.2 (0.5–3.1)			
Age	1.0 (0.98–1.0)			
Central venous catheter ^b		1.8 (0.6–5.3)	1.9 (0.7–5.4)	1.8 (0.6–5.1)
Other indwelling device ^b		2.0 (0.6–6.4)	2.3 (0.7–7.2)	2.2 (0.7–6.5)
Location where culture was obtained				
Inpatient		3.4 (0.7–17.3)	3.4 (0.7–17.5)	3.1 (0.6–15.0)
LTCF or LTACH		2.4 (0.4–12.5)	2.1 (0.4–10.8)	2.1 (0.4–11.0)
Outpatient		Ref	Ref	Ref
ICU prior to the culture ^c		0.7 (0.2–2.6)	0.7 (0.2–2.4)	
<i>Klebsiella pneumoniae</i> in culture		5.9 (0.8–45.7)		

Abbreviations: aOR, adjusted odds ratio; CI, confidence interval; Ref, reference; LTCF, long-term care facility; LTACH, long-term acute care hospital; ICU, intensive care unit

a. Final model selected

- b. At the time culture was obtained or in the prior 2 calendar days
- c. Any time in the 7 calendar days prior to the culture

Supplemental Table 2: Pulsed-Field Gel Electrophoresis (PFGE) Results on Paired Urine and Blood Carbapenem-Resistant Enterobacterales Isolates

Patient	Species	Time to Subsequent Bacteremia ^a (days)	Percent Similarity on PFGE
1	Klebsiella pneumoniae	22	100%
2	Klebsiella pneumoniae	25	91%
3	Klebsiella pneumoniae	27	100%
4	Klebsiella pneumoniae	31	100%
5	Klebsiella pneumoniae	35	100%
6	Klebsiella pneumoniae	101	75%
7	Escherichia coli	118	100%
8	Klebsiella pneumoniae	300	91%

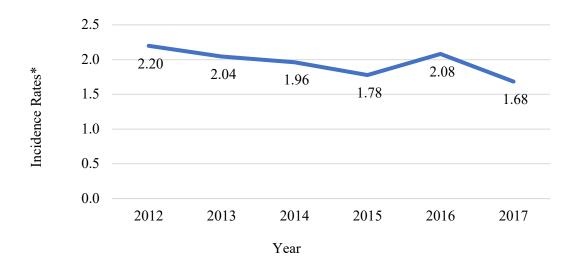
a. Time between first CRE urine culture and first CRE blood culture

Definition	Period	Species	Carbapenem Susceptibility Phenotype
Initial CDC surveillance definition	2011–2015	Escherichia coli Klebsiella pneumoniae Klebsiella oxytoca Enterobacter cloacae Klebsiella aerogenes ^a	Intermediate or resistant to:- Imipenem (MIC $\geq 2 \ \mu g/mL$), or- Meropenem (MIC $\geq 2 \ \mu g/mL$), or- Doripenem (MIC $\geq 2 \ \mu g/mL$)AND resistant to ^b :- Ceftazidime (MIC $\geq 16 \ \mu g/mL$), and- Ceftriaxone (MIC $\geq 4 \ \mu g/mL$), and- Cefotaxime (MIC $\geq 4 \ \mu g/mL$)
Revised CDC surveillance definition	2016–present	Escherichia coli Klebsiella pneumoniae Klebsiella oxytoca Enterobacter cloacae Klebsiella aerogenes ^a	Resistant to:- Imipenem (MIC \geq 4 µg/mL), or- Meropenem (MIC \geq 4 µg/mL), or- Doripenem(MIC \geq 4 µg/mL), or- Ertapenem (MIC \geq 2 µg/mL)
Present Study	2011–2017	Escherichia coli Klebsiella pneumoniae Klebsiella oxytoca Enterobacter cloacae Klebsiella aerogenes ^a	$\label{eq:result} \begin{array}{l} \hline Resistant to: \\ \hline - Imipenem (MIC \geq 4 \ \mu g/mL), \ or \\ \hline - Meropenem (MIC \geq 4 \ \mu g/mL), \ or \\ \hline - Doripenem (MIC \geq 4 \ \mu g/mL), \ or \\ \hline - Doripenem (MIC \geq 4 \ \mu g/mL), \ or \\ \hline \\ \hline - Ceftazidime (MIC \geq 16 \ \mu g/mL), \ and \\ \hline - Ceftriaxone (MIC \geq 4 \ \mu g/mL), \ and \\ \hline \\ - Cefotaxime (MIC \geq 4 \ \mu g/mL) \end{array}$

Supplemental Figure 1: Definitions of carbapenem-resistant Enterobacterales (CRE) used for surveillance during the study period. We created a unified definition for CRE that allowed us to make comparisons across the entire study period.

Abbreviations: CDC, Centers for Disease Control and Prevention; MIC, minimum inhibitory concentrations

- a. Formerly Enterobacter aerogenes
- b. If the antibiotics were tested



*Cases per 100,000 people

Supplemental Figure 2: Trend in annual incidence rates of Carbapenem-Resistant Enterobacterales bacteriuria from 2012 to 2017 in Metropolitan Atlanta