

Supplementary Appendix 1: Urinary Tract Infection Definition (regardless of use of catheterization or spontaneous void, will require all 3 of the following)

1. >100,000 CFU/ml of 1 or 2 speciated organisms
2. > 10 WBC/HPF on urine microscopy and/or leucocyte esterase > 2+ on dipstick
3. At least 2 of the following symptoms
 - Fever > 100.4 degrees
 - Gross hematuria (defined as pink or red urine, not a spot of blood on a catheter)
 - Abdominal, suprapubic, or flank pain or tenderness
 - New or worsening incontinence
 - New or worsening urinary urgency, frequency, or hesitancy
 - Pain with catheterization or urination
 - Malodorous/cloudy urine
 - In infants less than 1 year old:
 - Failure to thrive
 - Dehydration
 - Hypothermia
 - Increasing spasticity
 - Febrile seizures
 - Fussiness/irritability

Supplementary Appendix 2: Anticipated Outcomes & Process Measures

Clinical Outcomes	Short-Term	UTI Development (Febrile, Symptomatic, & Treated) Hydronephrosis Development/Progression VUR Development/Progression
	Medium-Term	Hypertension Development/Progression Change in Urodynamic Classification Surgical Intervention Bladder Continence Bowel Continence
	Long-Term	Renal Scarring Development/Progression Chronic Renal Insufficiency Development/Progression End-Stage Renal Disease Development
Process Measures		Initiation of CIC per protocol Family Adherence to CIC/Medications Suspected UTI Events Treated per Protocol Urodynamics (Frequency and For-Cause Use) Imaging use per protocol Serum Creatinine use per protocol Anthropomorphic measures (Schwartz formula validation)