Supplemental Online Content

Butler AM, Brown DS, Durkin MJ, et al. Association of inappropriate outpatient pediatric antibiotic prescriptions with adverse drug events and health care expenditures. *JAMA Netw Open.* 2022;5(5):e2214153. doi:10.1001/jamanetworkopen.2022.14153

- **eMethods.** Definition of Inappropriate Antibiotic Duration for Bacterial Infections, Statistical Analysis
- eTable 1. Diagnosis Codes to Identify Eligible Patients for Pediatric Cohorts
- eTable 2. Medications to Identify Pediatric Patients for Exclusion
- **eTable 3.** Codes to Identify Pregnancy, Mechanical Ventilation, Hematologic or Solid Organ Malignant Neoplasms, and Hematologic or Immunologic Conditions for Exclusion
- eTable 4. Codes to Identify Pediatric Patients with Viral or Bacterial Infections for Exclusion
- eTable 5. Medications to Identify Index Oral Antibiotic Treatment
- eTable 6. Codes and Timing to Identify Adverse Drug Events for Comparative Safety Analyses
- eTable 7. Codes to Identify Baseline Characteristics
- eTable 8. Diagnosis Codes to Identify Elixhauser Comorbidities
- eTable 9. Distribution of Index Antibiotic Agents Prescribed to Children by Infection Type
- **eTable 10.** Additional Selected Baseline Characteristics of Children Diagnosed with Infections of Interest
- **eTable 11.** Number of Exclusions For Adverse Drug Event Outcomes That Occurred Within 30 Days Prior to the Index Date
- **eTable 12.** Unadjusted and Propensity Score–Weighted Hazard Ratio Estimates of Adverse Drug Events Following Inappropriate vs Appropriate Antibiotic Prescriptions Among Pediatric Patients
- **eTable 13.** Inverse Probability Of Treatment–Weighted 30-Day All Cause and Adverse Drug Event–Related Attributable Expenditure Estimates of Inappropriate Antibiotic Prescriptions Among Children by Setting
- **eTable 14.** Inverse Probability of Treatment–Weighted 30-Day Adverse Drug Event–Related Health Care Utilization and Total Per-Patient Expenditure Estimates of Inappropriate Antibiotic Prescriptions Among Children
- **eTable 15.** Total 30-Day Attributable Expenditure Estimates of Inappropriate Antibiotic Prescriptions in 2017 Pediatric MarketScan Study Population, Age 6 Months to 17 Years
- **eTable 16.** Confidence Intervals for Annual National Attributable 30-Day Expenditures of Inappropriate Antibiotic Prescriptions Among the US Commercially Insured Population, Age 6 Months to 17 Years

- **eTable 17.** Baseline Characteristics of Children Diagnosed with a Noninfectious Clinical Condition
- **eTable 18.** Distribution of Index Antibiotic Agents Prescribed to Children by Noninfectious Clinical Condition
- **eTable 19.** Number of Exclusions For Adverse Drug Event Outcomes That Occurred Within 30 Days Prior to the Index Date by Noninfectious Clinical Condition
- **eTable 20.** Unadjusted and Propensity Score–Weighted Hazard Ratio Estimates of Adverse Drug Events Following Inappropriate vs Appropriate Antibiotic Prescriptions Among Pediatric Patients by Noninfectious Clinical Condition
- **eTable 21.** Inverse Probability of Treatment–Weighted 30-Day Health Care Utilization and All-Cause and Adverse Drug Event–Related Total Per-Patient and Attributable Expenditure Estimates of Inappropriate Antibiotic Prescriptions Among Children by Noninfectious Clinical Condition
- **eTable 22.** Total Attributable Expenditures of Inappropriate Antibiotic Prescriptions Among Children by Noninfectious Clinical Condition
- **eTable 23.** Sensitivity Analyses for Inverse Probability of Treatment–Weighted All-Cause Attributable Expenditure Estimates of Inappropriate Antibiotic Prescriptions Among Children by Condition
- **eFigure 1.** Derivation of Pediatric Infection Cohort in MarketScan Commercial Database (Index Events April 1, 2016, to September 30, 2018)
- **eFigure 2.** Standardized Mean Differences of Patient- and Provider-Level Characteristics Between Treatment Groups, in the Unweighted and Weighted Pediatric Populations, for Acute Kidney Failure Outcome Cohort
- **eFigure 3.** Propensity Score–Weighted Hazard Ratio Estimates of Additional Adverse Drug Events Following Inappropriate vs Appropriate Antibiotic Prescriptions Among Pediatric Patients
- **eFigure 4.** Standardized Mean Differences of Patient- and Provider-Level Characteristics Between Treatment Groups, in the Unweighted and Weighted Populations of Children with Asthma and Allergy or Asthma Exacerbation, for Acute Kidney Failure Safety Outcome Cohort
- **eFigure 5.** Propensity Score–Weighted Hazard Ratio Estimates of Adverse Drug Events Following Inappropriate vs Appropriate Antibiotic Prescriptions Among Asthma or Allergy and Asthma Exacerbation Pediatric Cohorts
- **eFigure 6.** Weighted 30-Day Attributable Expenditures of Inappropriate Antibiotic Prescriptions for Asthma or Allergy and Asthma Exacerbation Pediatric Cohorts

eReferences.

This supplemental material has been provided by the authors to give readers additional information about their work.

eMethods. Definition of Inappropriate Antibiotic Duration for Bacterial Infections, Statistical Analysis

Subgroup and Sensitivity Analysis: Definition of Inappropriate Antibiotic Duration for Bacterial Infections

Inappropriate antibiotic duration was based on guideline recommendations. For suppurative OM, appropriate duration was amoxicillin for 10 days for children <2 years, 7 days for children 2–5 years, and 5–7 days for children ≥6 years.¹ For pharyngitis, appropriate duration was amoxicillin or penicillin for 10 days.² For sinusitis, appropriate duration was amoxicillin or amoxicillin-clavulanate for 10–14 days.³ Note that unusual durations of <5 days or >14 days were excluded for this study; therefore inappropriate duration was 5–14 days and outside the recommended duration per infection.

Statistical Analysis

We used stabilized inverse probability of treatment (IPT) weights to balance treatment groups within each cohort with respect to potential confounding factors. We used logistic regression to estimate the propensity of appropriate (versus inappropriate) antibiotic agent, conditional on baseline covariates. Age and average monthly expenditures were modeled using restricted cubic splines. Propensity scores were used to create weighted cohorts to estimate the treatment effects in the total population (the average treatment effect). To minimize the impact of large weights due to children being treated contrary to prediction, we applied asymmetric trimming of the propensity score as needed to account for areas of non-overlap or by percentiles (i.e., 0.5th percentile of the appropriately treated and 99.5th percentile of the inappropriately treated trimmed in the whole cohort); and propensity scores were re-estimated after these exclusions.^{4,5} After weighting, we assessed the balance of observed covariates between treatment groups; absolute standardized mean differences < 10% in the weighted population were considered adequate.⁶

eTable 1. Diagnosis Codes to Identify Eligible Patients for Pediatric Cohorts^a

	ICD-10-CM	
Primary analysis: Bacterial infections		
Suppurative OM	H66.001-H66.019, H66.3X1-H67.9	
Pharyngitis	A38.0-A38.9, J02.0-J03.91	
Sinusitis	J01.00-J01.91, J32.0-J32.9	
Secondary analysis: Viral infections		
Bronchiolitis	J21.0-J21.9	
Bronchitis	J20.0-J20.9, J40	
uenza J09.X1-J11.89		
Viral URI	J00, J04.0-J06.9, R05	
Non-suppurative OM	H65.00-H65.93, H68.001-H68.029	
Subgroup analysis: Noninfectious clinical conditions		
Asthma/allergy	J30.0-J30.9, J44.0-J45.998, T78.40XA, T78.49XA	
Asthma exacerbation	J44.1, J45.21, J45.31, J45.41, J45.51, J45.901	

Abbreviations: ICD-10-CM, International Classification of Diseases, Tenth Revision, Clinical Modification; OM, otitis media; URI, upper respiratory infection.

^a Eligible diagnoses required a claimline payment > \$0.

eTable 2. Medications to Identify Pediatric Patients for Exclusion

Conditions	Medication Names	HCPCS Codes
Anti-infectives ^a	amoxicillin, amoxicillin/clavulanate, amikacin, ampicillin, ampicillin/sulbactam, azithromycin, aztreonam, cefaclor, cefazolin, cefadroxil, cefepime, cefdinir, cefditoren, cefixime, cefotetan, cefoxitin, cefpodoxime, cefprozil, ceftibuten, ceftazidime, ceftazidime/avibactam, ceftriaxone, cefuroxime, cephalexin, ceftaroline, ciprofloxacin, clarithromycin, clindamycin, dalbavancin, daptomycin, dicloxacillin, doripenem, doxycycline, ertapenem, erythromycin, ethambutol, fosfomycin, gatifloxacin, gemifloxacin, gentamicin, imipenem/cilastain, levofloxacin, linezolid, methicillin, metronidazole, minocycline, moxifloxacin, nafcillin, nitrofurantoin, norfloxacin, ofloxacin, oxacillin, penicillin, piperacillin/tazobactam, quinpristin/dalfopristin, rifabutin, rifampin, tedizolid, telithromycin, tetracycline, ticarcillin/clavulanic acid, tigecycline, tobramycin, trimethoprim/sulfamethoxazole, vancomycin	C9479, J0290, J0295, J0456, J0558, J0561, J0694, J0696, J0697, J0744, J0878, J1364, J1580, J1590, J1956, J2020, J2265, J2280, J2510, J2540, J3243, J3260, J3370, J7342, J7682, J7685, Q0144, S0030, S0034, S0039, S0077
Antibiotic ear drops (exclude for non- suppurative otitis media only)	bacitracin zinc/neomycin/polymyxin b sulfate, bacitracin zinc/polymyxin b sulfate, ciprofloxacin hydrochloride, ciprofloxacin hydrochloride, ciprofloxacin hydrochloride/fluocinolone acetonide, ciprofloxacin hydrochloride/hydrocortisone, clindamycin phosphate, colistin sulf/hc ace/neomycin sulf/thonzonium brom, dexamethasone/neomycin sulfate/polymyxin b sulfate, erythromycin, gentamicin sulfate, hc/neomycin sulf/polymyxin b sulf, moxifloxacin hydrochloride, nystatin, ofloxacin, polymyxin b sulfate/trimethoprim sulfate, tobramycin	
Autoimmune conditions, steroids, or other immunosuppressants	abatacept, adalimumab, alefacept, azathioprine, balsalazide disodium, belimumab, canakinumab, certolizumab pegol, cevimeline, cyclophosphamide, cyclosporine, dexamethasonea, dexamethasone acetatea, dexamethasone sodium phosphatea, dexamethasone micronizeda, efalizumab, etanercept, golimumab, immune globulin, infliximab, leflunomide, mercaptopurine, mesalamine, methotrexate, methylprednisolonea, methylprednisolone acetatea, methylprednisolone sodium succinatea, methylprednisolone micronizeda, mycophenolate mofetil, mycophenolate sodium, omalizumab, prednisolonea, prednisolone acetatea, prednisolone sodium phosphatea, prednisonea, rituximab, sirolimus, sulfasalazine, tacrolimus, tocilizumab, tofacitinib, ustekinumab	C9487, J0129, J0135, J0215, J0490, J0638, J0717, J0850, J1020a, J1030a, J1040a, J1094a, J1100a, J1438, J1459, J1555, J1556, J1557, J1559, J1561, J1562, J1566, J1568, J1569, J1572, J1575, J1599, J1602, J1720, J1745, J2323, J2357, J2650a, J2920a, J2930a, J3262, J3357, J3358, J3380, J7500, J7501, J7502, J7503, J7504,

Conditions	Medication Names	HCPCS Codes
		J7506a, J7507, J7508, J7509a, J7510a, J7511, J7512a, J7515, J7517, J7520, J7525, J8530, J8540a, J8610, J9070, J9250, J9260, J9310, J9330, Q5102, Q9989, S0108
HIV/AIDS	abacavir, abacavir/lamivudine, abacavir/lamivudine/zidovudine, abacavir/dolutegravir/lamivudine, atazanavir, atazanavir/cobicistat, cobicistat, cobicistat/elvitegravir/emtricitabine/tenofovir, dapsone, darunavir, darunavir/cobicistat, dolutegravir, efavirenz, efavirenz/emtricitabine/tenofovir, elvitegravir/cobicistat/emtricitabine/tenovofir disporoxul fumarate, emtricitabine/tenofovir alafenamide, emtricitabine and tenofovir disporoxil fumarate, emtricitabine/rilpivirine/tenofovir, enfuvirtide, etravirine, fosamprenavir, indinavir, lamivudine, lamivudine/zidovudine, lamivudine and tenofovir disporoxil fumarate, lopinavir/ritonavir, maraviroc, nelfinavir, nevirapine, raltegravir, rilpivirine, ritonavir, saquinavir, tipranavir, tenofovir, zidovudine	
Malignancy or myelodysplastic syndromes	aflibercept, aldesleukin, arsenic trioxide, asparaginase, atezolizumab, avelumab, azacitidine, belinostat, bendamustine, bevacizumab, bleomycin, blinatumomab, bortezomib, brentuximab, cabazitaxel, calaspargase, carboplatin, carfilzomib, carmustine, cemiplimab, cetuximab, cisplatin, cladribine, clofarabine, copanlisib, cyclophosphamide, cytarabine, dacarbazine, dactinomycin, daratumumab, daunorubicin, degarelix, denileukin, docetaxel, doxorubicin, durvalumab, elliott, elotuzumab, emapalumab, enfortumab, epirubicin, eribulin, etoposide, floxuridine, fludarabine, fluorouracil, fulvestrant, gemcitabine, gemtuzumab ozogamicin, goserelin, histrelin, hyaluronidase, idarubicin, ifosfamide, inotuzumab ozogamicin, ipilimumab, irinotecan, ixabepilone, leuprolide, mechlorethamine, melphalan, mesna, mitomycin, mitoxantrone, mogamulizumab, moxetumomab, necitumumab, nelarabine, nivolumab, obinutuzumab, ofatumumab, olaratumab, omacetaxine mepesuccinate, oxaliplatin, paclitaxel, panitumumab, pegaspargase, pembrolizumab, pemetrexed, pentostatin, pertuzumab, polatuzumab, porfimer, pralatrexate, ramucirumab, rituximab, romidepsin, streptozocin, tagraxofusp, temozolomide, temsirolimus, thiotepa, topotecan, trabectedin, trastuzumab, valrubicin, vinblastine, vincristine, vinorelbine	

Abbreviations: HCPCS, Healthcare Common Procedure Coding System; HIV/AIDS, human immunodeficiency virus/acquired immunodeficiency syndrome.

^a All exclusions for 180 days of baseline, with the exception of 90 days of baseline for the anti-infectives and 30 days of baseline for dexamethasone, prednisone, and prednisolone.

eTable 3. Codes to Identify Pregnancy, Mechanical Ventilation, Hematologic or Solid Organ Malignant Neoplasms, and Hematologic or Immunologic Conditions for Exclusion

Condition	ICD-10-CM Diagnosis Codes	ICD-10-PCS Procedure Codes	CPT/HCPCS Codes
Pregnancy	O00.0-O9A.53, Z33.1-Z37.9		
Mechanical ventilation	J95.850-J95.859, Z99.11-Z99.12	5A09358-5A0935Z, 5A09458- 5A0945Z, 5A09558-5A0955Z, 5A1935Z-5A1955Z	94002-94004
Hematologic / solid organ malignancies	C00.0-C43.9, C45.0-C45.7, C46.0-C7A.098, C7B.00-C80.1, C81.00-C90.32, C96.0-C96.4, C96.9-C96.Z, D03.0-D03.9, D47.Z9, E31.21-E31.23, R18.0		J9000, J9015, J9017, J9019, J9020, J9022, J9023, J9025, J9027, J9032, J9033, J9034, J9035, J9036, J9039, J9040, J9041, J9042, J9043, J9044, J9045, J9047, J9050, J9055, J9057, J9060, J9065, J9070, J9098, J9100, J9118, J9119, J9120, J9130, J9145, J9150, J9151, J9153, J9155, J9160, J9171, J9173, J9175, J9176, J9177, J9178, J9179, J9181, J9185, J9190, J9198, J9200, J9201, J9202, J9203, J9204, J9205, J9206, J9207, J9208, J9209, J9210, J9211, J9217, J9218, J9219, J9225, J9226, J9228, J9229, J9230, J9245, J9246, J9261, J9262, J9263, J9264, J9266, J9267, J9268, J9269, J9271, J9280, J9267, J9268, J9295, J9299, J9301, J9302, J9303, J9305, J9306, J9307, J9308, J9309, J9311, J9312, J9313, J9315, J9320, J9328, J9330, J9340, J9351, J9352, J9354, J9355, J9356, J9357, J9358, J9360, J9370, J9371, J9390, J9395, J9400, J9600
Hematologic/immunolog		T	T
Hereditary anemias	D55-D58		
Aplastic anemias	D60.0-D61.9, D71		
Hereditary immunodeficiency	D80-D89, D72.0, M30.3, M35.9		
Coagulation/hemorrhagic	D66, D68.2, D69.41-D69.49		
Leukopenia	D70.0, D70.4		

Condition	ICD-10-CM Diagnosis Codes	ICD-10-PCS Procedure Codes	CPT/HCPCS Codes
Hemophagocytic	D76.1-D78.89		
Syndromes			
Sarcoidosis	D86.9		
AIDS	B20		
Polyarteritis nodosa and related conditions	M30.0, M31.0-M31.1, M31.30, M31.4, M31.6l		
Diffuse diseases of	M32.10, M33.90, M34.0-M34.1,		
connective tissue	M34.9		
Spleen resection		07TP0ZZ-07TP4ZZ	
Transplantation	Z48.21-Z48.298, Z94.0-Z94.9		
Rheumatologic	M04.2-M06.9, M08.00-M08.99,		
conditions	M32.0-M33.19, M33.90-M33.99,		
	M35.00-M35.1, M35.5, M35.8-		
	M36.0, M36.8, M45.0-M45.9,		
	M48.8X1-M48.8X9		
Inflammatory bowel	K40.10-K40.11, K40.40-K40.41,		
disease	K50.10-K51.919, K59.31		

Abbreviations: AIDS, acquired immunodeficiency syndrome; CPT, Current Procedural Terminology; HCPCS, Healthcare Common Procedure Coding System; ICD-10-CM, International Classification of Diseases, Tenth Revision, Clinical Modification; ICD-10-PCS, International Classification of Diseases, Tenth Revision, Procedure Coding System.

eTable 4. Codes to Identify Pediatric Patients with Viral or Bacterial Infections for Exclusion

Infection	ICD-10-CM Diagnosis Codes			
Septicemia	A02.1, A20.7, A22.7, A39.2-A39.4, A39.51, A40.0-A41.9, A42.7, A48.3, I26.01, I26.90, I33.0-I33.9, I38-I40.0, I76, M32.11, R78.81, T80.211A			
Clinical sepsis	A26.7, A32.7, B37.7, R65.20-R65.21, T81.12XA			
Pneumonia	A02.22, A20.2, A21.2, A22.1, A37.01, A37.11, A37.81, A37.91, A42.0, A43.0, A48.1, A70, A78, B25.0, B37.1, B38.0-B38.2, B39.0-B39.2, B40.0-B40.2, B41.0, B42.0, B44.0-B44.1, B45.0, B46.0, B77.81, J09.X1, J10.00-J10.08, J11.00-J11.08, J13-J18.1, J18.8-J18.9, J85.0-J85.2, J86.0-J86.9, J95.851			
Skin and soft tissue	A20.1, A21.0, A22.0, A28.1, A36.3, A42.2, A42.89-A42.9, A43.1-A48.0, A48.52, A68.0-A68.9, A69.20-A69.29,			
infection (SSTI)	A77.0-A77.8, A79.0-A79.9, B47.0-B47.9, B60.0, B60.8-B64, B78.1, E83.2, K68.12, L01.00-L03.212, L03.221-L05.02, L08.0-L08.9, L73.2, L88, L92.8, L98.0, L98.3, M60.000-M60.09, M65.00-M65.08, M67.20-M67.29, M67.80-M67.89, M71.00-M71.09, M71.80-M71.89, M72.6, N98.0, O91.011-O91.23, T79.8XXA, T80.212A, T80.218A, T80.219A, T80.22XA, T80.29XA, T87.40-T87.44, T88.0XXA			
Surgical site infection (SSI)	K95.01, K95.81, T81.4XXA-T81.4XXS, T82.6XXA-T82.7XXS, T83.61XA-T83.6XXS, T84.50XA-T84.7XXS, T85.71XA-T85.79XS, T86.842			
Bone infection	A02.23-A02.24, A18.01, A18.03, A25.1, A39.83-A39.84, A54.40-A54.49, H05.021-H05.029, J85.3, M00.00-M01.X9, M46.20-M46.28, M86.00-M86.9, M90.80-M90.89			
Organ infection	A02.21, A18.84, A27.81, A36.81, A39.0-A39.1, A39.50, A39.52-A39.81, A39.89, A42.81-A42.82, A51.41, D73.0, D73.3-D73.5, D73.89, E06.0, E23.6, E24.1, E32.1, G00.0-G01, G03.9, G04.2, G05.3-G07, G09, I30.1-I30.9, I32, M32.12			
Female pelvic infection	A34, A51.0-A51.39, A51.42-A51.9, A54.00-A54.39, A54.6-A58, A63.8-A64, M02.30-M02.39, N34.1-N34.3, N70.01-N73.5, N73.9, N75.1, N76.0-N76.4, O03.0, O03.37, O03.5, O03.87, O04.5, O04.87, O07.0, O07.37, O08.0, O08.82, O23.511-O23.93, O41.1010-O41.1499, O75.3, O85, O86.11-O86.29, O86.81-O86.89, O98.111-O98.33, O98.611-O98.63, O98.811-O98.83, O99.835			
Gastroenteritis	A00.0-A02.0, A02.20, A02.25-A04.6, A04.71-A05.9, A09, A21.3, A22.2			
Intraabdominal abscess / peritonitis	A42.1, B25.2, K20.8, K35.2-K35.891, K50.014, K50.114, K50.814, K50.914, K51.014, K51.214, K51.314, K51.414, K51.514, K51.814, K51.914, K57.00-K57.93, K61.0-K61.4, K63.0, K65.0-K65.2, K65.8-K65.9, K67-K68.11, K68.19-K68.9, K75.0, K80.00-K80.01, K80.12-K80.13, K80.42-K80.43, K80.46-K80.47, K80.62-K80.63, K80.66-K80.67, K81.0, K81.2, K85.0-K85.92, K94.02, K94.12, K94.22, K94.32			
Tonsillitis	A36.0-A36.2, A36.82-A36.84, A36.86-A37.00, A37.10, A37.80, A37.90, A38.0-A38.9, A54.5, A71.0-A74.0, H05.011-H05.019, H05.031-H05.039, H16.311-H16.319, H70.201-H70.229, J34.0-J34.1, J34.89-J35.03, J36, J38.2-J38.3, J38.7-J39.2, J39.8-J39.9, J95.02			
Otitis	H60.00-H60.329, H60.391-H60.399, H61.90-H62.8X9, H70.001-H70.13, H73.001-H73.23			
Oral infections	K04.0-K04.02, K04.5-K04.7, K05.00-K05.329, K11.3, K12.2, K13.0, K14.0, M27.2			
Urinary tract infection (UTI)	A18.14, A36.85, N10-N12, N13.6, N15.1, N15.9-N16, N28.84-N28.86, N30.00-N30.01, N30.20-N30.21, N30.80-N30.91, N34.0, N35.111-N35.114, N35.119-N35.12, N37-N39.0, N41.0-N41.3, N41.9, N43.1, N45.4, N48.21-N48.29, N49.0-N49.9, N51, O23.00-O23.43, O86.11, O86.13-O86.29, T83.510A, T83.511A, T83.512A, T83.518A, T83.51XA, T83.59XA			

Infection	ICD-10-CM Diagnosis Codes
Miscellaneous bacterial	A07.8, A15.0-A32.9, A35-A37.91, A39.0-A44.9, A48.0, A48.2-A59.9, A63.0-A79.9, A82.0-A82.9, A88.1, A96.0-
infections	A96.9, A98.3-A98.5, B07.0-B07.9, B08.1, B08.4-B08.5, B08.8, B15.0-B19.9, B25.0-B33.0, B33.20-B34.8, B45.1,
	B47.1-B47.9, B50.0-B64, B83.4, B85.0-B99.9, D86.0-D86.9, G00.0-G03.1, G03.8-G04.02, G04.2-G05.4, G14,
	G37.4, G92, H70.001-H70.93, H75.00-H75.83, H95.00-H95.199, J17, J20.0-J20.7, J36, K90.81, L08.1, L94.6,
	M00.00-M00.89, M02.30-M02.39, M35.2, M60.009, N34.1, R11.11
Otitis externa	B37.84, H60.00-H60.93, H62.40-H62.43

Abbreviations: ICD-10-CM, International Classification of Diseases, Tenth Revision, Clinical Modification.

eTable 5. Medications to Identify Index Oral Antibiotic Treatmenta

Medication Names ^{b,c}	HCPCS Codes
amoxicillin, amoxicillin-clavanulate, azithromycin, cefaclor, cefadroxil,	G9313, G9314, G9315, Q0144
cefdinir, cefditoren, cefixime, cefpodoxime, cefprozil, ceftibuten,	
cefuroxime, cephalexin, ciprofloxacin, clarithromycin, clindamycin,	
dicloxacillin, doxycycline, erythromycin, fosfomycin, gemifloxacin,	
levofloxacin, linezolid, metronidazole, minocycline, moxifloxacin,	
nitrofurantoin, norfloxacin, ofloxacin, penicillin V, rifampin,	
sulfamethoxazole-trimethoprim, telithromycin, tetracycline,	
trimethoprim, vancomycin	

Abbreviations: HCPCS, Healthcare Common Procedure Coding System.

^a Eligible prescriptions required a payment > \$0, and days' supply and metric quantity > 0.

^b We defined 36 index oral antibiotics of interest based on the 2016 "antibiotic utilization" measure in the Healthcare Effectiveness Data and Information Set (HEDIS), which is a collection of quality measures reported by more than 90% of U.S. health insurance plans. We did not consider three antibiotics (i.e., sulfadiazine, lincomycin, ampicillin) because they are used to treat conditions not relevant to this study.

^c For bacterial infections, antibiotics were considered appropriate if they were first-line agents per treatment guidelines and inappropriate otherwise. For viral infections and noninfectious clinical conditions, appropriate treatment was defined as no prescription for any of the 36 listed antibiotics, and a prescription of any of the 36 listed antibiotic agents was considered inappropriate. See "Antibiotic Exposure" section of the manuscript for additional details.

eTable 6. Codes and Timing to Identify Adverse Drug Events for Comparative Safety Analyses

Adverse Drug Event	Follow-up Duration	ICD-10-CM Diagnosis Codes ^a	
-	Relative to Index Date		
Dermatologic	-		
Skin rash	1-14 days	R21	
Stevens-Johnson syndrome	1-14 days	L511	
Toxic epidermal necrolysis	1-14 days	L51.2-L51.3	
Urticaria	1-14 days	L50.0-L50.1, L50.6-L50.9	
Gastrointestinal	·		
Nausea/vomiting	1-14 days	R11.0-R11.12, R11.2	
Abdominal pain	1-14 days	R10.0-R10.33, R10.84-R10.9	
Non-C. difficile diarrhea	1-30 days	K52.29-K52.3, K52.831-K52.9, R19.7	
C. difficile infection	1-90 days	A04.7-A04.72	
Hypersensitivity	·		
Anaphylaxis	0-2 days	T78.2XXA, T88.6XXA	
Angioedema	0-2 days	H02.841-H02.849, T78.3XXA	
Laryngeal edema	0-2 days	J38.4	
Unspecified allergy	1-14 days	T78.40XA, T78.49XA	
Neuromuscular and skeletal	·		
Tendinopathy (including tendon rupture)	1-90 days	M66.20, M66.221-M66.80, M66.821-M66.9, M75.120-M75.122,	
		M76.50-M76.62, M76.811-M76.829, M77.9	
Kidney			
Kidney failure	1-14 days	N17.0-N17.9	

Abbreviations: ICD-10-CM, International Classification of Diseases, Tenth Revision, Clinical Modification.

^a Diagnostic/rule out claims were not included in identifying adverse drug events.

eTable 7. Codes to Identify Baseline Characteristics

	CPT/HCPCS	
Office visits		
Office visits	99201-99205, 99211-99215, 99241-99245, 99381-99386, 99391-99396, 99401-99409	
Durable medical equipment		
Oxygen equipment	E0430-E0435, E0439-E0444, E1390-E1392	
Home hospital bed	E0290-E0297, E0301-E0304, E0250, E0251, E0255, E0256, E0260, E0261, E0265, E0266, E0270, E0316	
Mobility aids	E0100 E0105 E0130 E0135 E0140 E0141 E0143 E0144 E0147 E0148 E0149, E0163-E0175, E0240-	
	E0248, E0950-E1228, E1230, E1240-E1298, K0001-K0009	
Other		
Non-SNF-related rehabilitation	92507, 92508, 92521, 92522, 92523, 92524, 92526, 92607, 92608, 92609, 92610, 92611, 92612, 92613,	
services	92616, 92617, 97001, 97002, 97003, 97004, 97110-97150, 97161, 97162, 97163, 97164, 97165, 97166,	
	97167, 97168, 97530, 97532-97546, G0129, G0151, G0152, G0153, G0157, G0158, G0159, G0160,	
	G0161, G8699, S9128, S9129, S9131	
Ambulance / life support	A0426 A0427 A0428 A0429 A0999	

Abbreviations: CPT, Current Procedural Terminology; HCPCS, Healthcare Common Procedure Coding System; SNF, skilled nursing facility.

eTable 8. Diagnosis Codes to Identify Elixhauser Comorbidities

ICD-10-CM Diagnosis Codes	
F10.10-F10.29, F10.921, F10.94-F10.99	
D50.1-D53.9, D63.0-D63.8, D64.9	
L90.0, L94.0-L94.1, L94.3, M05.00-M06.9, M08.00-M08.99, M12.00-M12.09, M32.0-M35.1, M35.3, M35.5, M35.8-	
M36.0, M36.8, M45.0-M46.1, M46.50-M46.99, M48.8X1-M48.8X9, M49.80-M49.89	
D50.0, O90.81, O99.011-O99.03	
J40-J64, J66.0-J67.9, J68.4	
109.81, 150.1-150.9	
I12.0, I13.11-I13.2, N18.3-N19, Z49.01-Z49.32, Z91.15, Z94.0, Z99.2	
D65-D68.4, D68.8-D68.9, D69.1, D69.3-D69.6, D75.82, O99.111-O99.13	
F32.0-F32.3, F32.8-F33.3, F33.8-F33.9, F34.1, F43.21	
E08.00-E13.9, O24.011-O24.33, O24.811-O24.93, P70.2	
F11.10-F11.29, F12.10-F12.229, F12.250-F12.29, F13.10-F13.29, F14.10-F14.29, F15.10-F15.29, F16.10-	
F16.29, F18.10-F18.29, F19.10-F19.29, F55.0-F55.8, O99.320-O99.325	
I10-I16.9, I67.4, O10.011-O11.9, O16.1-O16.9	
E00.0-E00.9, E01.8-E03.3, E03.8-E03.9, E89.0	
B18.0-B18.2, I85.00-I85.11, K70.0, K70.2-K70.9, K72.10-K74.69, K75.4-K75.81, K76.0, K76.6, K76.89-K76.9,	
Z94.4	
C81.00-C90.32, C96.0-C96.4, C96.9-C96.Z, D47.Z9	
E86.0-E87.8	
C77.0-C79.9, C7B.00-C80.1, R18.0	
E75.00-E75.19, E75.23, E75.25, E75.29, E75.4, F84.2, G10-G12.9, G13.2-G13.8, G20, G21.4, G24.01-G24.09,	
G24.2, G24.8, G25.4-G25.5, G25.81, G30.0-G31.9, G32.81, G35, G36.1-G40.B19, G47.411-G47.429, G80.3,	
G89.0, G91.0-G91.9, G93.7, G93.89-G94, O99.350-O99.355, P91.60-P91.63, R41.0, R41.82, R47.01, R56.00-	
R56.9	
E66.01-E66.2, E66.8-E66.9, O99.210-O99.215, R93.9, Z68.30-Z68.45, Z68.54	
G04.1, G80.0-G80.2, G80.4-G83.9, I69.031-I69.069, I69.131-I69.169, I69.231-I69.269, I69.331-I69.369, I69.831-I69.869, I69.931-I69.969, R53.2	
I70.0-I72.9, I73.1-I73.9, I74.2-I74.4, I76, I77.1, I77.70-I77.79, I79.0-I79.8, K55.1, K55.8-K55.9, Z95.820-Z95.828	

Condition	ICD-10-CM Diagnosis Codes
Pulmonary circulation disorders	I26.01-I26.92, I26.99-I27.1, I27.81-I27.9, I28.9, T80.0XXA, T82.817A, T82.818A
Psychoses	F20.0-F20.9, F22-F31.9, F32.4-F32.5, F33.40-F33.42, F34.8-F39, F44.89, F84.3
Solid tumor without metastasis	C00.0-C43.9, C45.0-C45.7, C46.0-C76.8, C7A.00-C7A.098, D03.0-D03.9, E31.21-E31.23
Valvular disease	A52.03, I05.0-I08.9, I09.1, I09.89, I34.0-I39, Q23.0-Q23.3, Z95.2-Z95.4
Weight loss	E40-E46, E64.0, R63.4, R63.6

Abbreviations: ICD-10-CM, International Classification of Diseases, Tenth Revision, Clinical Modification.

eTable 9. Distribution of Index Antibiotic Agents Prescribed to Children by Infection Type^a

Antibiotic	Ва	cterial Infectio	ns			Viral Infections		
agent	Suppurative OM n = 601,711 (%)	Pharyngitis n = 617,215 (%)	Sinusitis n = 382,093 (%)	Influenza n = 180,996 (%)	Viral URI n = 772,040 (%)	Bronchiolitis n = 23,931 (%)	Bronchitis n = 72,407 (%)	Non- suppurative OM n = 153,852 (%)
None	0.0	0.0	0.0	96.2	88.0	91.1	29.8	52.3
Amoxicillin- clavulanate	9.9	5.8	21.5	0.2	0.8	0.6	3.1	4.2
Amoxicillin	69.0	63.3	42.6	1.3	4.2	4.5	8.1	31.9
Azithromycin	6.4	13.1	16.7	1.8	5.6	2.9	53.4	4.3
Cefdinir	12.6	7.7	14.3	0.3	0.9	0.7	2.9	5.9
Cefprozil	0.9	0.8	1.2	0.0	0.1	0.1	0.3	0.4
Cephalexin	0.4	4.8	0.8	0.1	0.2	0.1	0.4	0.3
Penicillin V	0.0	2.9	0.0	0.0	0.0	0.0	0.0	0.0
Other antibiotic	0.9	1.5	2.8	0.1	0.3	0.0	1.9	0.6

Abbreviations: OM, otitis media; URI, upper respiratory infection.

^a Grey box denotes appropriate treatment per guidelines. Antibiotic agents used by ≥ 1% of ≥ 1 infection cohorts are reported individually for all infection cohorts.

eTable 10. Additional Selected Baseline Characteristics of Children Diagnosed with Infections of Interest (N = 2,804,245)^{a,b}

	Bacterial Inf (Primary A		-	fections ^c ry Analysis)
	Appropriate Antibiotic (n = 1,068,417)	Inappropriate Antibiotic	Appropriate Antibiotic (n = 977,102)	Inappropriate Antibiotic (n = 226,124)
	n (%)	(n = 532,602) n (%)	n (%)	n (%)
Month of index date		, ,		
January	89,025 (8.3)	41,551 (7.8)	128,353 (13.1)	20,665 (9.1)
February	95,772 (9.0)	44,518 (8.4)	138,248 (14.2)	21,144 (9.4)
March	81,209 (7.6)	37,208 (7.0)	77,932 (8.0)	15,483 (6.9)
April	99,330 (9.3)	47,990 (9.0)	71,800 (7.4)	18,203 (8.1)
May	96,124 (9.0)	47,500 (8.9)	57,026 (5.8)	16,120 (7.1)
June	65,590 (6.1)	32,487 (6.1)	38,941 (4.0)	11,839 (5.2)
July	60,403 (5.7)	31,389 (5.9)	37,395 (3.8)	11,680 (5.2)
August	77,803 (7.3)	43,478 (8.2)	58,276 (6.0)	16,137 (7.1)
September	102,873 (9.6)	55,176 (10.4)	86,661 (8.9)	22,270 (9.9)
October	79,887 (7.5)	41,495 (7.8)	72,242 (7.4)	18,219 (8.1)
November	103,231 (9.7)	52,361 (9.8)	93,427 (9.6)	25,436 (11.3)
December	117,170 (11.0)	57,449 (10.8)	116,801 (12.0)	28,928 (12.8)
Year of index date				
2016	355,610 (33.3)	192,671 (36.2)	273,555 (28.0)	79,802 (35.3)
2017	453,654 (42.5)	222,331 (41.7)	417,590 (42.7)	95,774 (42.4)
2018	259,153 (24.3)	117,600 (22.1)	285,957 (29.3)	50,548 (22.4)
Baseline Elixhauser Comorbidities				
Alcohol abuse	232 (0.02)	172 (0.03)	193 (0.02)	71 (0.03)
Deficiency anemias	814 (0.1)	316 (0.1)	899 (0.1)	147 (0.1)
Rheumatoid arthritis/	193 (0.0)	160 (0.0)	164 (0.0)	51 (0.0)
collagen vascular disease				
Chronic blood loss anemia	22 (0.0)	16 (0.0)	13 (0.0)	1 (0.0)
Chronic pulmonary	11,916 (1.1)	7,693 (1.4)	13,886 (1.4)	3,004 (1.3)
disease				
Congestive heart failure	43 (0.0)	8 (0.0)	59 (0.0)	8 (0.0)
Kidney failure	34 (0.0)	12 (0.0)	18 (0.0)	11 (0.0)

	Bacterial Inf		Viral Infections ^c		
	(Primary Ar			y Analysis)	
	Appropriate Antibiotic	Inappropriate	Appropriate Antibiotic	Inappropriate Antibiotic	
	(n = 1,068,417)	Antibiotic	(n = 977,102)	(n = 226,124)	
	n (%)	(n = 532,602)	n (%)	n (%)	
		n (%)			
Coagulopathy	103 (0.0)	78 (0.0)	130 (0.0)	27 (0.0)	
Depression	6,982 (0.7)	5,042 (1.0)	5,963 (0.6)	1,799 (0.8)	
Diabetes (complicated and	1,915 (0.2)	1,481 (0.3)	1,568 (0.2)	533 (0.2)	
uncomplicated)					
Drug abuse	568 (0.1)	420 (0.1)	535 (0.1)	201 (0.1)	
Hypertension	239 (0.0)	191 (0.0)	252 (0.0)	71 (0.0)	
Hypothyroidism	559 (0.1)	406 (0.1)	605 (0.1)	176 (0.1)	
Liver disease	50 (0.0)	42 (0.0)	56 (0.0)	16 (0.0)	
Fluid and electrolyte	519 (0.1)	263 (0.1)	477 (0.1)	100 (0.0)	
disorders					
Other neurological	2,580 (0.2)	1,362 (0.3)	2,537 (0.3)	556 (0.3)	
disorders				, ,	
Obesity	20,496 (1.9)	12,475 (2.3)	18,202 (1.9)	4,540 (2.0)	
Paralysis	1,006 (0.1)	481 (0.1)	1,009 (0.1)	234 (0.1)	
Peripheral vascular	14 (0.0)	16 (0.0)	12 (0.0)	3 (0.0)	
disorders	, ,	,	,	, ,	
Pulmonary circulation	2,369 (0.2)	1,607 (0.3)	1,884 (0.2)	574 (0.3)	
disorders		, , ,		, ,	
Psychoses	26 (0.0)	9 (0.0)	45 (0.0)	5 (0.0)	
Valvular disease	255 (0.0)	124 (0.0)	320 (0.0)	64 (0.0)	
Weight loss	4,259 (0.4)	1,814 (0.3)	5,345 (0.6)	854 (0.4)	
Prior durable medical	1,200 (011)	.,(0.0)	5,010 (010)		
equipment					
Oxygen equipment	290 (0.0)	133 (0.0)	490 (0.1)	71 (0.0)	
Home hospital bed	9 (0.0)	11 (0.0)	18 (0.0)	3 (0.0)	
Mobility aids	472 (0.0)	276 (0.1)	426 (0.0)	121 (0.1)	
Prior other frailty markers	` ′	\ /			
Ambulance / life support	3,996 (0.4)	2,113 (0.4)	4,474 (0.5)	811 (0.4)	
Non-SNF-related	41,406 (3.9)	23,806 (4.5)	39,614 (4.1)	8,722 (3.9)	
rehabilitation services	, , ,	, , ,			

Abbreviations: SNF, skilled nursing facility.

^a Elixhauser comorbidities, durable medical equipment, and other frailty markers were assessed from days -180 to 0 from the index date.

^b For children diagnosed with bacterial infections (i.e., suppurative OM, pharyngitis, or sinusitis), antibiotic prescriptions were was categorized as appropriate (i.e., first-line antibiotic agent) or inappropriate (i.e., non-first-line antibiotic agent); patients without an antibiotic prescription were excluded. First-line antibiotic agents were defined as amoxicillin for suppurative OM; amoxicillin or penicillin for pharyngitis; and amoxicillin or amoxicillin-clavulanate for sinusitis.

^c For children diagnosed with viral infections (i.e., influenza, viral URI, bronchiolitis, bronchitis, or non-suppurative OM,), antibiotic prescriptions were categorized as appropriate (no antibiotic) or inappropriate (antibiotic).

eTable 11. Number of Exclusions For Adverse Drug Event Outcomes That Occurred Within 30 Days Prior to the Index Date

Adverse	Ва	cterial Infectio	ns			Viral Infection	าร	
Drug Event Outcome	Suppurative OM N=601,711 n (%)	Pharyngitis N=617,215 n (%)	Sinusitis N=382,093 n (%)	Influenza N=180,996 n (%)	Viral URI N=772,040 n (%)	Bronchiolitis N=23,931 n (%)	Bronchitis N=72,407 n (%)	Nonsuppurative OM N=153,852 n (%)
Nausea / vomiting / abdominal pain	5,004 (0.8)	4,379 (0.7)	3,635 (1.0)	1,700 (0.9)	5,000 (0.6)	286 (1.2)	612 (0.8)	1,087 (0.7)
Non-C. difficile diarrhea	5,039 (0.8)	3,456 (0.6)	2,281 (0.6)	1,152 (0.6)	7,429 (1.0)	435 (1.8)	363 (0.5)	1,262 (0.8)
C. difficile infection	0 (0.0)	1 (0.0)	2 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	1 (0.0)	1 (0.0)
Anaphylaxis / angioedema / laryngeal edema	70 (0.0)	69 (0.0)	59 (0.0)	21 (0.0)	121 (0.0)	2 (0.0)	9 (0.0)	24 (0.0)
Skin rash / urticaria	4,847 (0.8)	6,614 (1.1)	2,089 (0.5)	603 (0.3)	8,330 (1.1)	290 (1.2)	286 (0.4)	1,291 (0.8)
Unspecified allergy	348 (0.1)	336 (0.1)	301 (0.1)	64 (0.0)	970 (0.1)	26 (0.1)	72 (0.1)	119 (0.1)
Tendinopathy	237 (0.0)	479 (0.1)	441 (0.1)	90 (0.0)	482 (0.1)	0 (0.0)	82 (0.1)	66 (0.0)
Stevens- Johnson syndrome / toxic epidermal necrolysis	0 (0.0)	0 (0.0)	1 (0.0)	0 (0.0)	2 (0.0)	0 (0.0)	1 (0.0)	1 (0.0)
Acute kidney failure	5 (0.0)	2 (0.0)	3 (0.0)	2 (0.0)	2 (0.0)	0 (0.0)	0 (0.0)	1 (0.0)

Abbreviations: OM, otitis media; URI, upper respiratory infection.

eTable 12. Unadjusted and Propensity Score-weighted Hazard Ratio Estimates of Adverse Drug Events Following Inappropriate versus Appropriate Antibiotic Prescriptions Among Pediatric Patients

Index Diagnosis / Adverse Drug Event Outcome	HR (95% CI) ^a			
	Unadjusted	IPT-weighted ^b		
Bacterial infections (primary analysis)				
Suppurative OM				
Nausea / vomiting / abdominal pain	1.17 (1.09-1.27)	1.20 (1.10-1.30)		
Non-C. difficile diarrhea	1.00 (0.93-1.08)	1.30 (1.20-1.41)		
C. difficile infection	5.78 (2.11-15.82)	6.23 (2.24-17.32)		
Anaphylaxis / angioedema / laryngeal edema	3.25 (1.97-5.35)	4.14 (2.48-6.92)		
Skin rash / urticaria	0.47 (0.44-0.50)	0.62 (0.58-0.66)		
Unspecified allergy	0.58 (0.50-0.67)	0.67 (0.57-0.78)		
Tendinopathy	1.34 (1.09-1.64)	0.91 (0.74-1.12)		
Stevens-Johnson syndrome / toxic epidermal	NE	NE		
necrolysis				
Acute kidney failure	NE	NE		
Pharyngitis				
Nausea / vomiting / abdominal pain	1.23 (1.15-1.32)	1.20 (1.12-1.28)		
Non-C. difficile diarrhea	1.13 (1.03-1.23)	1.16 (1.06-1.27)		
C. difficile infection	6.60 (2.44-17.88)	8.42 (3.09-22.95)		
Anaphylaxis / angioedema / laryngeal edema	1.41 (0.88-2.29)	1.49 (0.91-2.43)		
Skin rash / urticaria	0.52 (0.49-0.56)	0.60 (0.56-0.65)		
Unspecified allergy	0.63 (0.54-0.74)	0.69 (0.59-0.81)		
Tendinopathy	1.58 (1.37-1.83)	1.25 (1.08-1.45)		
Stevens-Johnson syndrome / toxic epidermal	NE	NE		
necrolysis				
Acute kidney failure	NE	NE		
Sinusitis				
Nausea / vomiting / abdominal pain	1.12 (1.03-1.22)	1.06 (0.97-1.16)		
Non-C. difficile diarrhea	1.01 (0.82-1.12)	1.11 (1.00-1.23)		
C. difficile infection	2.57 (0.92-7.27)	2.99 (1.05-8.49)		
Anaphylaxis / angioedema / laryngeal edema	0.69 (0.40-1.21)	0.71 (0.39-1.28)		
Skin rash / urticaria	0.56 (0.50-0.62)	0.64 (0.58-0.71)		
Unspecified allergy	0.70 (0.56-0.89)	0.74 (0.58-0.93)		
Tendinopathy	1.24 (1.06-1.44)	1.07 (0.91-1.25)		
Stevens-Johnson syndrome / toxic epidermal	NE	NE		
necrolysis				
Acute kidney failure	NE	NE		
Viral infections (secondary analysis)				
Influenza				
Nausea / vomiting / abdominal pain	1.06 (0.78-1.44)	0.98 (0.70-1.37)		
Non-C. difficile diarrhea	0.70 (0.43-1.15)	0.55 (0.31-0.95)		
C. difficile infection	NE	NE		
Anaphylaxis / angioedema / laryngeal edema	NE	NE		
Skin rash / urticaria	1.58 (1.02-2.45)	1.30 (0.81-2.10)		

Index Diagnosis / Adverse Drug Event Outcome	HR (95% CI) ^a			
	Unadjusted	IPT-weighted ^b		
Unspecified allergy	ŇE	NE		
Tendinopathy	0.83 (0.27-1.88)	0.93 (0.39-2.20)		
Stevens-Johnson syndrome / toxic epidermal	NE	NE		
necrolysis				
Acute kidney failure	NE	NE		
Viral URI				
Nausea / vomiting / abdominal pain	0.99 (0.89-1.09)	0.97 (0.86-1.09)		
Non-C. difficile diarrhea	0.93 (0.83-1.03)	1.12 (0.98-1.27)		
C. difficile infection	NE	NE		
Anaphylaxis / angioedema / laryngeal edema	0.69 (0.43-1.12)	0.76 (0.45-1.28)		
Skin rash / urticaria	1.79 (1.62-1.99)	2.35 (2.09-2.65)		
Unspecified allergy	2.25 (1.77-2.85)	2.77 (2.09-3.67)		
Tendinopathy	1.16 (0.93-1.43)	0.98 (0.76-1.27)		
Stevens-Johnson syndrome / toxic epidermal necrolysis	NE	NE		
Acute kidney failure	NE	NE		
Bronchiolitis	111	114		
Nausea / vomiting / abdominal pain	0.81 (0.44-1.50)	1.61 (0.68-3.81)		
Non- <i>C. difficile</i> diarrhea	1.29 (0.85-1.96)	1.68 (0.99-2.84)		
C. difficile infection	NE	NE		
Anaphylaxis / angioedema / laryngeal edema	NE NE	NE NE		
Skin rash / urticaria	1.33 (0.71-2.51)	1.46 (0.71-2.99)		
Unspecified allergy	NE	NE		
Tendinopathy	NE NE	NE NE		
Stevens-Johnson syndrome / toxic epidermal	NE NE	NE		
necrolysis				
Acute kidney failure	NE	NE		
Bronchitis		1		
Nausea / vomiting / abdominal pain	0.68 (0.55-0.85)	0.72 (0.57-0.90)		
Non- <i>C. difficile</i> diarrhea	0.86 (0.63-1.19)	0.82 (0.58-1.14)		
C. difficile infection	NE	NE		
Anaphylaxis / angioedema / laryngeal edema	NE	NE		
Skin rash / urticaria	1.24 (0.87-1.76)	1.20 (0.83-1.73)		
Unspecified allergy	1.19 (0.64-2.22)	1.47 (0.75-2.87)		
Tendinopathy	0.89 (0.59-1.35)	0.77 (0.49-1.19)		
Stevens-Johnson syndrome / toxic epidermal	NE	NE		
necrolysis				
Acute kidney failure	NE	NE		
Non-suppurative OM				
Nausea / vomiting / abdominal pain	0.86 (0.73-1.01)	0.84 (0.69-1.01)		
Non- <i>C. difficile</i> diarrhea	1.25 (1.08-1.44)	1.19 (1.01-1.40)		
C. difficile infection	NE	NE		
Anaphylaxis / angioedema / laryngeal edema	0.56 (0.21-1.52)	0.52 (0.19-1.43)		
Skin rash / urticaria	2.55 (2.23-2.93)	2.21 (1.91-2.56)		

Index Diagnosis / Adverse Drug Event Outcome	HR (95% CI) ^a		
	Unadjusted	IPT-weighted ^b	
Tendinopathy	0.75 (0.50-1.11)	0.73 (0.49-1.10)	
Stevens-Johnson syndrome / toxic epidermal	NE	NE	
necrolysis			
Acute kidney failure	NE	NE	

Abbreviations: CI, confidence interval; HR, hazard ratio; IPT, inverse probability of treatment; NE, not estimable; OM, otitis media; URI, upper respiratory infection.

^a For hazard ratio estimation, we required ≥ 5 adverse event cases in both the reference category (i.e., appropriate antibiotic prescription) and the comparator group (i.e., inappropriate antibiotic prescription) to ensure stability of the effect estimate.

^b Results for weighted hazard ratios are also presented in Figure 1 of main manuscript.

eTable 13. Inverse Probability Of Treatment–Weighted 30-Day All Cause and Adverse Drug Event–Related Attributable Expenditure Estimates of Inappropriate Antibiotic Prescriptions Among Children by Setting^a

Expenditure Category	Patient-Level Attributable Expenditure Estimates (95% CI), \$
Bacterial infections (primary analysis)	
Suppurative OM	
All-cause total	56 (43, 68)
Inpatient medical	3 (-9, 14)
Emergency department	2 (0, 3)
Outpatient medical	17 (13, 22)
Outpatient pharmacy	34 (30, 38)
Adverse drug event-related	2 (0, 5)
Pharyngitis	
All-cause total	42 (29, 52)
Inpatient medical	-1 (-12, 9)
Emergency department	5 (3, 7)
Outpatient medical	13 (10, 17)
Outpatient pharmacy	25 (22, 28)
Adverse drug event-related	1 (-4, 6)
Sinusitis	
All-cause total	21 (3, 36)
Inpatient medical	-1 (-16, 12)
Emergency department	1 (-2, 4)
Outpatient medical	1 (-7, 8)
Outpatient pharmacy	20 (16, 24)
Adverse drug event-related	0 (-8, 7)
Viral infections (secondary analysis)	
Influenza	
All-cause total	97 (43, 141)
Inpatient medical	-6 (-49, 28)
Emergency department	-3 (-19, 16)
Outpatient medical	69 (41, 86)
Outpatient pharmacy	38 (29, 47)
Adverse drug event-related	19 (-30, 40)
Viral URI	
All-cause total	81 (54, 106)
Inpatient medical	23 (-5, 44)
Emergency department	2 (-2, 6)
Outpatient medical	35 (28, 43)
Outpatient pharmacy	21 (17, 25)
Adverse drug event-related	11 (1, 17)
Bronchiolitis	
All-cause total	-8 (-98, 67)
Inpatient medical	-74 (-156, -18)
Emergency department	11 (-32, 47)

Expenditure Category	Patient-Level Attributable Expenditure Estimates (95% CI), \$
Outpatient medical	20 (-36, 57)
Outpatient pharmacy	35 (17, 48)
Adverse drug event-related	56 (-61, 109)
Bronchitis	
All-cause total	-24 (-56, 11)
Inpatient medical	8 (-13, 33)
Emergency department	-19 (-27, -10)
Outpatient medical	-34 (-50, -17)
Outpatient pharmacy	22 (12, 31)
Adverse drug event-related	-10 (-22, 7)
Non-suppurative OM	
All-cause total	-96 (-124, -73)
Inpatient medical	0 (-21, 19)
Emergency department	-6 (-11, -2)
Outpatient medical	-112 (-124, -101)
Outpatient pharmacy	22 (15, 28)
Adverse drug event-related	3 (-1, 7)

Abbreviations: CI, confidence interval; OM, otitis media; URI, upper respiratory infection

^a In the inverse probability of treatment (IPT)-weighted population, all measured baseline characteristics were well-balanced between treatment groups (standardized mean differences [SMD] < 0.10) with the following exceptions: provider specialty for all-cause and ADE-related expenditures for the suppurative otitis media (SMD=0.14), influenza (SMD=0.14), and bronchiolitis (SMD=0.18) cohorts.

eTable 14. Inverse Probability of Treatment–Weighted 30-Day Adverse Drug Event–Related Health Care Utilization and Total Per-Patient Expenditure Estimates of Inappropriate Antibiotic Prescriptions Among Children

	Appropriate Antibiotic	Inappropriate Antibiotic	Appropriate Antibiotic	Inappropriate Antibiotic
Index diagnosis	Health Care Utilization N (%)	Health Care Utilization N (%)	Total Per-patient Expenditure Estimates (mean (SD)), \$	Total Per-patient Expenditure Estimates (mean (SD)), \$
Bacterial infections (primary analysis)				
Suppurative OM	9,424 (2.3)	3,756 (2.1)	16 (422)	19 (758)
Pharyngitis	7,956 (2.0)	3,578 (1.8)	19 (843)	22 (1,377)
Sinusitis	4,211 (1.8)	2,100 (1.6)	21 (849)	23 (1,653)
Viral infections (secondary analysis)				
Influenza	1,919 (1.2)	70 (1.1)	14 (450)	51 (2,640)
Viral URI	8,070 (1.3)	1,571 (1.8)	14 (520)	22 (992)
Bronchiolitis	366 (1.9)	72 (3.6)	16 (302)	49 (1,423)
Bronchitis	228 (1.1)	545 (1.1)	27 (973)	15 (376)
Non-suppurative OM	873 (1.4)	1,345 (2.2)	14 (436)	18 (426)

Abbreviations: OM, otitis media; SD, standard deviation; URI, upper respiratory infection.

eTable 15. Total 30-Day Attributable Expenditure Estimates of Inappropriate Antibiotic Prescriptions in 2017 Pediatric MarketScan Study Population, Age 6 Months to 17 Years^a

		Attribut	able Expenditures (201	I8 USD)	
	Inpatient Medical, \$	Emergency Department, \$	Outpatient Medical, \$	Outpatient Pharmacy, \$	Total, \$
Bacterial infections (prima	ary analysis)				
Suppurative OM	205,120 (-686,389,	129,169 (-14,819,	1,302,841 (975,856,	2,564,018	4,201,050
	1,023,786)	258,000)	1,638,577)	(2,272,945, 2,818,236)	(3,248,039, 5,062,570)
Pharyngitis	-125,048 (-	427,498 (231,817,	1,117,876 (820,783,	2,125,705	3,545,682
	1,056,613, 743,823)	589,766)	1,473,947)	(1,888,669,	(2,477,750,
				2,407,574)	4,425,400)
Sinusitis	-83,192 (-876,691,	45,862 (-120,000,	67,266 (-366,076,	1,139,120 (920,392,	1,168,699 (140,731,
	660,927)	208,550)	452,932)	1,317,809)	1,995,259)
Viral infections (secondar	ry analysis)				
Influenza	-17,600 (-142,670,	-9,599 (-54,295,	201,688 (119,337,	109,680 (84,884,	284,023 (125,835,
	82,028)	45,260)	250,992)	137,385)	412,514)
Viral URI	894,350 (-194,798,	72,385 (-73,884,	1,357,454	827,237 (649,309,	3,150,638
	1,690,734)	216,700)	(1,079,019,	972,339)	(2,092,262,
			1,653,214)		4,119,284)
Bronchiolitis	-68,912 (-146,056, -	10,093 (-30,183,	18,313 (-33,713,	32,767 (16,237,	-7,803 (-91,717,
	16,668)	43,534)	53,201)	45,136)	62,651)
Bronchitis	164,411 (-263,597,	-402,590 (-562,727, -	-717,702 (-	463,832 (259,280,	-492,599 (-
	688,161)	210,225)	1,032,880, -359,228)	641,196)	1,167,722, 228,498)
Non-suppurative OM	-2,729 (-555,725,	-161,490 (-285,601, -	-3,015,469 (-	598,548 (413,101,	-2,581,946 (-
	505,091)	57,967)	3,336,334, -	764,408)	3,321,732, -
			2,709,938)		1,954,618)

Abbreviations: OM, otitis media; URI, upper respiratory infection; USA, United States dollar.

^a Bronchiolitis cohort was restricted to ages 6 months to 3 years; bronchitis cohort was restricted to ages 5–17 years.

eTable 16. Confidence Intervals for Annual National Attributable 30-Day Expenditures of Inappropriate Antibiotic Prescriptions Among the US Commercially Insured Population, Age 6 Months to 17 Years^a

		Attributable Expenditures (2018 USD)						
	Inpatient Medical, \$	Emergency	Outpatient Medical,	Outpatient	Total, \$			
		Department, \$	\$	Pharmacy, \$				
Bacterial infections (prin	mary analysis)							
Suppurative OM	1,235,313 (-		7,846,200	15,441,487	25,300,317			
	4,133,695,	777,904 (-89,245,	(5,876,975,	(13,688,535,	(19,560,922,			
	6,165,627)	1,553,777)	9,868,131)	16,972,489)	30,488,716)			
Pharyngitis	-750,188 (-	2,564,653	6,706,388	12,752,577	21,271,338			
	6,338,857,	(1,390,722,	(4,924,062,	(11,330,547,	(14,864,574,			
	4,462,360)	3,538,139)	8,842,534)	14,443,571)	26,548,959)			
Sinusitis	-503,873 (-			6,899,358				
	5,309,896,	277,773 (-726,807,	407,416 (-2,217,231,	(5,574,584,	7,078,513 (852,372,			
	4,003,067)	1,263,137)	2,743,293)	7,981,632)	12,084,775)			
Viral infections (seconda	ary analysis)							
Influenza	-98,806 (-800,965,	-53,888 (-304,819,	1,132,300 (669,970,	615,754 (476,547,	1,594,541 (706,451,			
	460,513)	254,097)	1,409,102)	771,296)	2,315,904)			
Viral URI	5,430,897 (-		8,243,074	5,023,360	19,132,099			
	1,182,902,	439,555 (-448,658,	(6,552,289,	(3,942,899,	(12,705,163,			
	10,266,901)	1,315,898)	10,039,062)	5,904,483)	25,014,159)			
Bronchiolitis	-334,451 (-708,855,	48,984 (-146,488,	88,877 (-163,622,	159,028 (78,805,	-37,871 (-445,134,			
	-80,897)	211,286)	258,203)	219,061)	304,064)			
Bronchitis	1,059,296 (-	-2,593,873 (-	-4,624,124 (-	2,988,452				
	1,698,346,	3,625,627, -	6,654,804, -	(1,670,530,	-3,173,797 (-			
	4,433,790)	1,354,471)	2,314,488)	4,131,198)	7,523,579, 1,472,204)			
Non-suppurative OM		-962,935 (-	-17,980,659 (-	3,569,023	-15,395,644 (-			
	-16,270 (-3,313,681,	1,702,981, -	19,893,913, -	(2,463,241,	19,806,845, -			
	3,011,763)	345,646)	16,158,840)	4,558,019)	11,655,009)			

Abbreviations: OM, otitis media; URI, upper respiratory infection; USA, United States dollar.

^a Bronchiolitis cohort was restricted to ages 6 months to 3 years; bronchitis cohort was restricted to ages 5–17 years.

eTable 17. Baseline Characteristics of Children Diagnosed with a Noninfectious Clinical Condition^{a,b}

	Noninfectious Clinical Condition ^c			
	Appropriate Antibiotic n = 546,793 (%)	Inappropriate Antibiotic n = 29,558 (%)		
Demographic characteristics	, , ,			
Age, mean (SD), y	10 (3)	9 (5)		
Male sex	310,579 (56.8)	16,754 (56.7)		
Health insurance plan type				
Basic, comprehensive	79,808 (14.6)	3,983 (13.5)		
CDHP	69,934 (12.8)	3,935 (13.3)		
EPO or PPO	292,977 (53.6)	16,463 (55.7)		
НМО	56,749 (10.4)	2,687 (55.7)		
POS or POS with capitation	36,551 (6.7)	1,921 (6.5)		
Unknown	10,774 (1.2)	569 (1.9)		
Urban residence	464,023 (84.9)	24,134 (81.7)		
Geographic region				
Midwest	110,739 (20.3)	4,671 (15.8)		
Northeast	108,377 (19.8)	5,516 (18.9)		
South	233,764 (42.8)	14,833 (50.2)		
West	93,913 (17.2)	4,538 (15.4)		
Month of index date				
January	23,760 (4.4)	1,843 (6.2)		
February	25,067 (4.6)	2,020 (6.8)		
March	30,610 (5.6)	1,976 (6.7)		
April	56,028 (10.3)	3,076 (10.4)		
May	59,906 (11.0)	2,914 (9.9)		
June	46,950 (8.6)	1,797 (6.1)		
July	50,393 (9.2)	1,437 (4.9)		
August	72,439 (13.3)	2,345 (7.9)		
September	64,596 (11.8)	3,530 (11.9)		
October	45,299 (8.3)	2,665 (9.0)		
November	40,170 (7.4)	3,078 (10.4)		
December	31,575 (5.8)	2,877 (9.7)		
Year of index date				
2016	204,683 (37.4)	11,320 (38.3)		
2017	207,774 (38.0)	11,932 (40.4)		
2018	134,336 (24.6)	6,306 (21.3)		
Index characteristics				
Index provider specialty				
Emergency medicine	11,095 (2.0)	399 (1.4)		
Internal medicine	12,494 (2.3)	787 (2.7)		
Other/unknown	189,016 (34.6)	6,919 (23.4)		
Pediatrics/family medicine	334,188 (61.1)	21,453 (72.6)		
Index provider location				
Emergency department	22,941 (4.2)	294 (1.0)		
Office	493,765 (90.3)	27,398 (92.7)		
Other / unknown	18,467 (3.4)	576 (2.0)		
Retail clinic	298 (0.1)	19 (0.1)		
Urgent care center	11,322 (2.1)	1,271 (4.3)		
Baseline characteristics prior to index	, ,	` '		
Prior emergency department visit	36,476 (6.7)	2,151 (7.3)		

	Noninfectious Clinical Condition ^c			
	Appropriate Antibiotic n = 546,793 (%)	Inappropriate Antibiotic n = 29,558 (%)		
Prior number of office visits,				
median (IQR)	1 (0-2)	1 (0-3)		
Prior number of unique medication				
classes, median (IQR)	0 (0-1)	1 (0-2)		
Baseline Elixhauser Comorbidities				
Alcohol abuse	150 (0.0)	8 (0.0)		
Deficiency anemias	376 (0.1)	15 (0.1)		
Rheumatoid arthritis/				
collagen vascular disease	116 (0.0)	9 (0.0)		
Chronic blood loss anemia	21 (0.0)	0 (0.0)		
Chronic pulmonary disease	19,792 (3.6)	4,018 (13.6)		
Congestive heart failure	7 (0.0)	1 (0.0)		
Kidney failure	15 (0.0)	0 (0.0)		
Coagulopathy	78 (0.0)	6 (0.0)		
Depression	5,415 (1.0)	238 (0.8)		
Diabetes (complicated and uncomplicated)	943 (0.2)	57 (0.2)		
Drug abuse	445 (0.1)	35 (0.1)		
Hypertension	225 (0.0)	14 (0.1)		
Hypothyroidism	365 (0.1)	24 (0.1)		
Liver disease	25 (0.0)	1 (0.0)		
Fluid and electrolyte	184 (0.0)	19 (0.1)		
disorders				
Other neurological	1,475 (0.3)	83 (0.3)		
disorders	, ,	,		
Obesity	19,261 (3.5)	872 (3.0)		
Paralysis	598 (0.1)	33 (0.1)		
Peripheral vascular	9 (0.0)	0 (0.0)		
disorders	- (5.5)	(515)		
Pulmonary circulation	20 (0.0)	0 (0.0)		
disorders	(3.3)			
Psychoses	1,669 (0.3)	82 (0.3)		
Valvular disease	118 (0.0)	4 (0.0)		
Weight loss	2,666 (0.5)	130 (0.4)		
Prior durable medical equipment	2,000 (0.0)	100 (0.1)		
Oxygen equipment	253 (0.1)	13 (0.0)		
Home hospital bed	11 (0.0)	2 (0.0)		
Mobility aids	286 (0.1)	20 (0.1)		
Prior other frailty markers	200 (0.1)	25 (5.1)		
Ambulance / life support	3,516 (0.6)	123 (0.4)		
Non-SNF-related rehabilitation	22,434 (4.1)	1,224 (4.1)		
services	, ,	',== '()		

Abbreviations: CDHP, consumer directed health plan; EPO, exclusive provider organization; HMO, health maintenance organization; IQR, interquartile range; POS, point of service; PPO, preferred provider organization; SD, standard deviation; SNF, skilled nursing facility.

^a Demographic characteristics were assessed on the index date. Index characteristics were assessed on the index date. Baseline characteristics prior to index were assessed in the 180-day baseline period before the index date (days -180 to -1) with the exception of Elixhauser comorbidities, durable medical equipment, and other frailty markers, which were assessed through the index date (days -180 to 0).

^b Results are expressed as N (%) unless otherwise indicated.

° For children diagnosed with asthma/allergy or asthma exacerbation, a antibiotic) or inappropriate (antibiotic).	antibiotic prescriptions were categorized as appropriate (no

eTable 18. Distribution of Index Antibiotic Agents Prescribed to Children by Noninfectious Clinical Conditiona

Antibiotic Agent	Asthma/Allergy n = 507,429 (%)	Asthma Exacerbation n = 68,922 (%)
None	96.7	81.2
Amoxicillin-clavulanate	0.3	2.2
Amoxicillin	1.0	6.6
Azithromycin	1.5	7.2
Cefdinir	0.3	2.0
Other antibiotic agent	0.3	0.9

^a Grey box denotes appropriate treatment per guidelines. Antibiotic agents used by ≥ 1% of either noninfectious clinical condition cohort are reported individually for both cohorts.

eTable 19. Number of Exclusions For Adverse Drug Event Outcomes That Occurred Within 30 Days Prior to The Index Date By Noninfectious Clinical Condition

	Noninfectious Clinical Condition		
Adverse Drug Event Outcome	Asthma/Allergy N=507,429 (%)	Asthma Exacerbation N=68,922 (%)	
Nausea / vomiting / abdominal pain	3,388 (0.7)	1,510 (2.2)	
Non-C. difficile diarrhea	2,800 (0.6)	434 (0.6)	
C. difficile infection	4 (0.0)	2 (0.0)	
Anaphylaxis / angioedema / laryngeal edema	180 (0.0)	13 (0.0)	
Skin rash / urticaria	11,769 (2.3)	613 (0.9)	
Unspecified allergy	16,828 (3.3)	170 (0.3)	
Tendinopathy	567 (0.1)	69 (0.1)	
Stevens-Johnson syndrome / toxic epidermal necrolysis	5 (0.0)	0 (0.0)	
Acute kidney failure	6 (0.0)	1 (0.0)	

eTable 20. Unadjusted and Propensity Score–Weighted Hazard Ratio Estimates of Adverse Drug Events Following Inappropriate vs Appropriate Antibiotic Prescriptions Among Pediatric Patients by Noninfectious Clinical Condition

Index Diagnosis / Adverse Drug Event Outcome	HR (95% CI) ^a		
•	Unadjusted	IPT-weighted ^b	
Asthma/Allergy			
Nausea / vomiting / abdominal pain	1.18 (0.94–1.48)	1.09 (0.85-1.41)	
Non-C. difficile diarrhea	1.14 (0.86–1.51)	1.03 (0.74-1.43)	
C. difficile infection	NE	NE	
Anaphylaxis / angioedema / laryngeal edema	0.44 (0.27-0.74)	0.92 (0.46-1.83)	
Skin rash / urticaria	1.59 (1.25-2.02)	1.96 (1.44-2.66)	
Unspecified allergy	1.96 (1.23-3.11)	2.77 (1.50-5.11)	
Tendinopathy	0.57 (0.34-0.95)	0.45 (0.26-0.77)	
Stevens-Johnson syndrome / toxic epidermal necrolysis	NE	NE	
Acute kidney failure	NE	NE	
Asthma Exacerbation			
Nausea / vomiting / abdominal pain	0.93 (0.72-1.22)	0.84 (0.72-1.23)	
Non-C. difficile diarrhea	0.94 (0.69-1.30)	0.96 (0.69-1.34)	
C. difficile infection	NE	NE	
Anaphylaxis / angioedema / laryngeal edema	NE	NE	
Skin rash / urticaria	1.55 (1.14-2.11)	1.55 (1.13-2.14)	
Unspecified allergy	1.01 (0.52-1.97)	1.24 (0.57-2.71)	
Tendinopathy	1.23 (0.75-2.05)	1.31 (0.76-2.24)	
Stevens-Johnson syndrome / toxic epidermal necrolysis	NE	NE	
Acute kidney failure	NE	NE	

Abbreviations: CI, confidence interval; HR, hazard ratio;; IPT, inverse probability of treatment; NE, not estimable.

^a For hazard ratio estimation, we required ≥ 5 adverse event cases in both the reference category (i.e., appropriate antibiotic prescription) and the comparator group (i.e., inappropriate antibiotic prescription) to ensure stability of the effect estimate.

eTable 21. Inverse Probability of Treatment–Weighted 30-Day Health Care Utilization and All-Cause and Adverse Drug Event–Related Total Per-Patient and Attributable Expenditure Estimates of Inappropriate Antibiotic Prescriptions Among Children by Noninfectious Clinical Condition^a

	Appropriate	Inappropriate	Appropriate	Inappropriate	
Expenditure Category	Health Care Utilization N (%)	Health Care Utilization N (%)	Total Per-patient Expenditure Estimates (mean (SD)), \$	Total Per-patient Expenditure Estimates (mean (SD)), \$	Patient-level Attributable Expenditure Estimates (95% CI), \$
Asthma/Allergy					
All-cause total expenditures	465,736 (100.0)	15,834 (100.0)	727 (2,969)	928 (8,675)	246 (147, 327)
Inpatient medical expenditures	1,101 (0.2)	42 (0.3)	54 (2,354)	164 (8,401)	60 (-23, 122)
Emergency department expenditures	23,918 (5.1)	1,003 (6.3)	93 (626)	70 (559)	28 (11, 45)
Outpatient medical expenditures	457,914 (98.3)	15,435 (97.5)	455 (1,410)	506 (1,638)	95 (60, 126)
Outpatient pharmacy expenditures	250,147 (53.7)	15,833 (100.0)	125 (641)	188 (990)	64 (46, 77)
Adverse drug event-related					21 (-13, 45)
expenditures	6,143 (1.3)	266 (1.7)	17 (1,762)	52 (2,722)	_ (, ,
Asthma Exacerbation					
All-cause total expenditures	48,432 (100.0)	12,363 (100.0)	947 (4,131)	1019 (9,196)	48 (-96, 162)
Inpatient medical expenditures	206 (0.4)	45 (0.4)	102 (3,622)	170 (9,013)	50 (-110, 155)
Emergency department					
expenditures	1,459 (3.0)	319 (2.6)	73 (672)	66 (557)	-6 (-18, 7)
Outpatient medical expenditures	48,410 (100.0)	12,361 (100.0)	529 (1,314)	512 (1,418)	-20 (-48, 5)
Outpatient pharmacy expenditures	34,628 (71.5)	12,359 (100.0)	243 (1,018)	272 (726)	23 (9, 37)
Adverse drug event-related		•			-26 (-59, 46)
expenditures	667 (1.4)	197 (1.6)	50 (5,275)	30 (722)	

Abbreviations: CI, confidence interval; SD, standard deviation.

^a In the inverse probability of treatment (IPT)-weighted population, all measured baseline characteristics were well-balanced between treatment groups (standardized mean differences [SMD] < 0.10) with the following exceptions: provider specialty for all-cause and ADE-related expenditures for the asthma/allergy cohort (SMD=0.11), and plan type for all-cause and ADE-related expenditures for the asthma/allergy cohort (SMD=0.15).

eTable 22. Total Attributable Expenditures of Inappropriate Antibiotic Prescriptions Among Children by Noninfectious Clinical Condition

	Attributable Expenditures (2018 USD)					
Index Diagnoses	Inpatient Medical,	Emergency	Outpatient	Outpatient	Total, \$	
	\$	Department, \$	Medical, \$	Pharmacy, \$		
Noninfectious clinical condition-	- standardized to the 20	17 US employer-insur	ed population			
Asthma/Allergy			3,848,991	2,587,002	10,013,746	
	2,439,085 (-	1,140,576 (435,878,	(2,435,651,	(1,876,808,	(5,974,159,	
	950,915, 4,960,713)	1,830,835)	5,136,757)	3,141,250)	13,298,088)	
Asthma Exacerbation	1,641,822 (-				1,564,286 (-	
	3,589,834,	-197,130 (-580,191,	-645,578 (-	765,364 (299,895,	3,159,342,	
	5,077,715)	236,145)	1,583,992, 154,846)	1,211,160)	5,290,930)	
Noninfectious clinical condition- in 2017 MarketScan study population						
Asthma/Allergy	390,877 (-152,389,	182,784 (69,852,	616,822 (390,326,	414,581 (300,769,	1,604,758 (957,392,	
	794,981)	293,401)	823,193)	503,402)	2,131,091)	
Asthma Exacerbation	256,737 (-561,353,	-30,826 (-90,726,	-100,951 (-247,694,	119,682 (46,895,	244,612 (-494,036,	
	794,018)	36,927)	24,214)	189,393)	827,359)	

Abbreviations: USD, United States dollar...

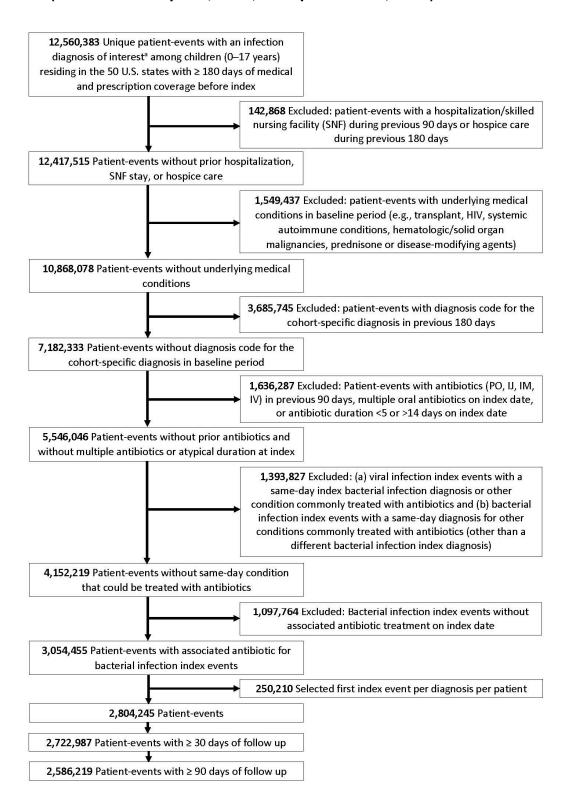
eTable 23. Sensitivity Analyses for Inverse Probability of Treatment–Weighted All-Cause Attributable Expenditure Estimates of Inappropriate Antibiotic Prescriptions Among Children by Condition

Index Diagnosis	Patient-level All-Cause Attributable Expenditure Estimates (95% CI), \$
90-day expenditures	
Bacterial infections (primary analysis)	
Suppurative OM	105 (83, 129)
Pharyngitis	72 (43, 98)
Sinusitis	14 (-33, 57)
Viral infections (secondary analysis)	
Influenza	521 (-302, 979)
Viral URI	157 (106, 202)
Bronchiolitis	107 (-150, 324)
Bronchitis	-7 (-78, 74)
Non-suppurative OM	-114 (-171, -61)
30-day expenditures, excluding HMO and POS with capitation plans	
Bacterial infections (primary analysis)	
Suppurative OM	52 (41, 66)
Pharyngitis	41 (30, 51)
Sinusitis	24 (4, 43)
Viral infections (secondary analysis)	
Influenza	82 (24, 321)
Viral URI	79 (47, 103)
Bronchiolitis	16 (-91, 100)
Bronchitis	-20 (-56, 17)
Non-suppurative OM	-104 (-127, -79)
30-day expenditures, inappropriate antibiotic definition	
expanded to include inappropriate agent or duration ^a	
Bacterial infections (primary analysis)	
Suppurative OM	44 (12, 74)
Pharyngitis	39 (25, 51)
Sinusitis	18 (3, 36)

Abbreviations: CI, confidence interval; OM, otitis media; URI, upper respiratory infection.

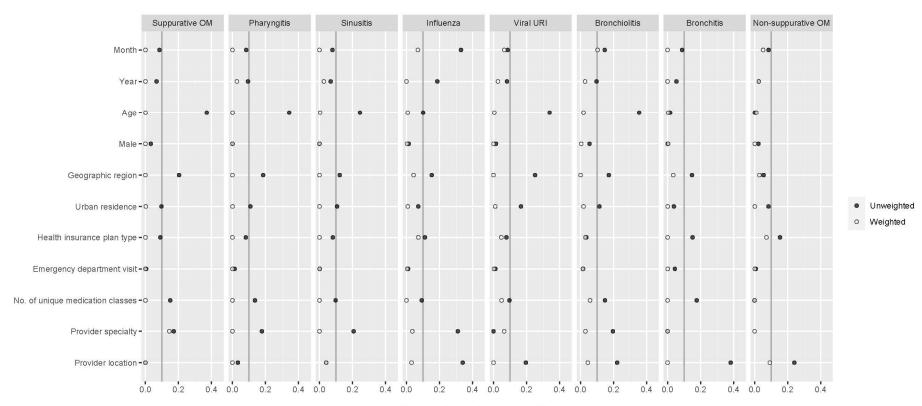
^a Inappropriate duration was only relevant for bacterial infections; any antibiotic was considered inappropriate for viral infections.

eFigure 1. Derivation of Pediatric Infection Cohort in MarketScan Commercial Database (Index Events April 1, 2016, to September 30, 2018)





eFigure 2. Standardized Mean Differences of Patient- and Provider-Level Characteristics Between Treatment Groups, in the Unweighted and Weighted Pediatric Populations, for Acute Kidney Failure Outcome Cohort^{a,b,c,d,e}



Absolute standardized mean difference

Abbreviations: OM, otitis media; URI, upper respiratory infection.

^a Standardized mean difference (SMD) calculated as the difference in means or proportions of a variable divided by the pooled standard deviation of the variable. All standardized mean difference estimates compare children who received an appropriate antibiotic (reference) versus an inappropriate antibiotic within each infection cohort, after cohort-specific trimming. Standardized mean differences <0.1 indicate no substantial difference in means or proportions between groups. In the inverse probability of treatment (IPT)-weighted population, all measured baseline characteristics were well-balanced between treatment groups (standardized mean differences < 0.10) with the following exceptions: provider specialty for suppurative otitis media for the analysis of nausea/vomiting/abdominal pain, non-*C. difficile* diarrhea, *C. difficile* infection, anaphylaxis/angioedema/laryngeal edema, skin rash/urticaria, unspecified allergy, and tendinopathy (all SMDs=0.15); month of index for bronchiolitis for the analysis of nausea/vomiting/abdominal pain, non-*C. difficile* diarrhea, *C. difficile* infection, anaphylaxis/angioedema/laryngeal edema, unspecified allergy, and tendinopathy (all SMDs=0.10); month of index for viral URI for the analysis of nausea/vomiting/abdominal pain (SMD=0.11).

^b Each outcome was evaluated in a separate cohort with a separate propensity score model and weights. The acute kidney failure cohort is presented here as a representative example because it had few cases of acute kidney failure in the 30 days prior to the index date (i.e., 15 cases across all viral and bacterial infection cohorts) and thus made few exclusions based on previous ascertainment of the outcome.

^c Demographics were identified in the month of index. Emergency department visits and unique medication classes were identified in the baseline period before index. Provider specialty and provider location refer to the index diagnosis.

^d Grey shaded circles reflect overlap of unweighted and weighted SMDs.

The unweighted SMD for provider specialty for the non-suppurative OM cohort is not presented as the SMD was >0.6.

eFigure 3. Propensity Score–Weighted Hazard Ratio Estimates of Additional Adverse Drug Events Following Inappropriate vs Appropriate Antibiotic Prescriptions Among Pediatric Patients^{a, b}

	No. of events (Rate per 10,000 person-days)			
	Appropriate Inappropriate		Weighted HR	Inappropriate agent Inappropriate agen
	Agent	Agent	(95% CI)	nonharmful harmful
Stevens-Johnson syndrome/toxic epidermal necrolysis				
Suppurative OM	1 (0.00)	0 (0.00)	NE	
Pharyngitis	4 (0.01)	2 (0.01)	NE	
Sinusitis	0 (0.00)	1 (0.01)	NE	
Influenza	0 (0.00)	0 (0.00)	NE	
Viral URI	4 (0.00)	1 (0.01)	NE	
Bronchiolitis	0 (0.00)	0 (0.00)	NE	
Bronchitis	0 (0.00)	0 (0.00)	NE	
Non-suppurative OM	0 (0.00)	0 (0.00)	NE	
Acute kidney failure				
Suppurative OM	1 (0.00)	1 (0.00)	NE	
Pharyngitis	8 (0.01)	2 (0.01)	NE	
Sinusitis	4 (0.01)	1 (0.01)	NE	
Influenza	2 (0.01)	0 (0.00)	NE	
Viral URI	6 (0.01)	2 (0.02)	NE	
Bronchiolitis	0 (0.00)	0 (0.00)	NE	
Bronchitis	0 (0.00)	0 (0.00)	NE	
Non-suppurative OM	0 (0.00)	1 (0.01)	NE	
Fendinopathy plus tendon rupture				
Suppurative OM	254 (0.08)	151 (0.11)	0.91 (0.74, 1.12)	 _
Pharyngitis	413 (0.13)	328 (0.20)	1.25 (1.08, 1.45)	
Sinusitis	390 (0.21)	269 (0.26)	1.07 (0.91, 1.25)	
Influenza	178 (0.13)	6 (0.11)	0.93 (0.39, 2.20)	-
Viral URI	582 (0.12)	98 (0.14)	0.98 (0.76, 1.27)	
Bronchiolitis	1 (0.01)	0 (0.00)	NE	
Bronchitis	31 (0.22)	77 (0.19)	0.77 (0.49, 1.19)	
Non-suppurative OM	56 (0.11)	43 (0.08)	0.73 (0.48, 1.10)	
				0.50 1.5 2 HR (95% CI)

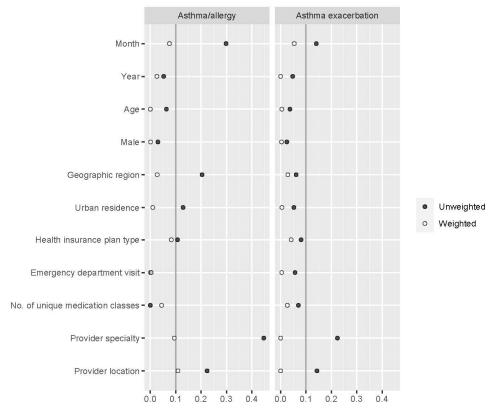
Abbreviations: CI, confidence interval; HR, hazard ratio; NE, not estimable; OM, otitis media; URI, upper respiratory infection.

^a Results for other adverse drug events are presented in Figure 1 (main manuscript).

^b Shaded infections are bacterial infections, others are viral infections.

© 2022 Butler AM et al. JAMA Network Open.

eFigure 4. Standardized Mean Differences of Patient- and Provider-Level Characteristics Between Treatment Groups, in the Unweighted and Weighted Populations of Children with Asthma and Allergy or Asthma Exacerbation, for Acute Kidney Failure Safety Outcome Cohort^{a,b,c,d}



Absolute standardized mean difference

^a Standardized mean difference (SMD) calculated as the difference in means or proportions of a variable divided by the pooled standard deviation of the variable. All standardized mean difference estimates compare children who received an appropriate antibiotic (reference) versus an inappropriate antibiotic within each infection cohort, after cohort-specific trimming. Standardized mean differences <0.1 indicate no substantial difference in means or proportions between groups. In the inverse probability of treatment (IPT)-weighted population, all measured baseline characteristics were well-balanced between treatment groups (standardized mean differences < 0.10) with the following exceptions: provider location for asthma/allergy for the outcomes of nausea/vomiting/abdominal pain, non-*C. difficile* diarrhea, *C. difficile* infection, anaphylaxis/angioedema/laryngeal edema, skin rash/urticaria, unspecified allergy, and tendinopathy (SMDs 0.11–0.18).

^b Each outcome was evaluated in a separate cohort with a separate propensity score model and weights. The acute kidney failure cohort is presented here as a representative example because it had few cases of acute kidney failure in the 30 days prior to the index date (i.e., 7 cases in the asthma/allergy cohort) and thus made few exclusions based on previous ascertainment of the outcome.

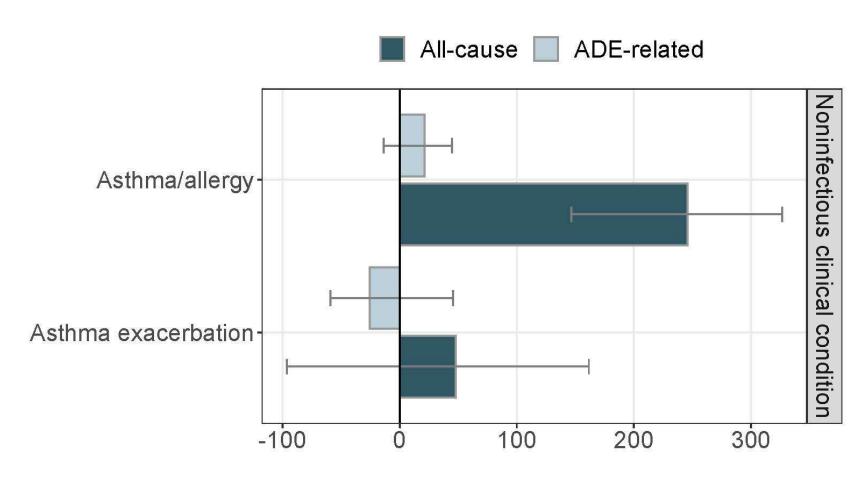
[°] Demographics were identified in the month of index. Emergency department visits and unique medication classes were identified in the baseline period before index. Provider specialty and provider location refer to the index diagnosis. ^d Grey shaded circles reflect overlap of unweighted and weighted SMDs.	

eFigure 5. Propensity Score–Weighted Hazard Ratio Estimates of Adverse Drug Events Following Inappropriate vs Appropriate Antibiotic Prescriptions Among Asthma or Allergy and Asthma Exacerbation Pediatric Cohorts

ausea/vomiting/abdominal pain	Appropriate Agent	00 person-days) Inappropriate	Weighted HR	Inappropriate agent Ina	
	Agent			mappropriate agent ma	propriate agen
		Agent	(95% CI)	nonharmful har	
Northwest of Bosons					
Asthma/allergy	1,935 (3.02)	78 (3.56)	1.09 (0.85, 1.41)		
Asthma exacerbation	281 (4.39)	70 (4.12)	0.94 (0.72, 1.22)	-	
on-C. difficile diarrhea					
Asthma/allergy	1,292 (0.96)	50 (1.09)	1.03 (0.74, 1.43)	-	-1
Asthma exacerbation	187 (1.39)	47 (1.31)	0.96 (0.69, 1.34)	-	
difficile infection					
Asthma/allergy	6 (0.00)	1 (0.01)	NE		
Asthma exacerbation	1 (0.00)	0 (0.00)	NE		
naphylaxis/angioedema/laryngeal edema					
Asthma/allergy	995 (7.06)	15 (3.11)	0.92 (0.46, 1.83)		_
Asthma exacerbation	23 (1.57)	0 (0.00)	NE		
kin rash/urticaria					
Asthma/allergy	1,289 (2.05)	71 (3.26)	1.96 (1.44, 2.66)		
Asthma exacerbation	138 (2.13)	57 (3.31)	1.55 (1.13, 2.14)	-	-
nspecified allergy					
Asthma/allergy	279 (0.45)	19 (0.88)	2.77 (1.50, 5.11)		-
Asthma exacerbation	41 (0.63)	11 (0.63)	1.24 (0.57, 2.71)		
tevens-Johnson syndrome/toxic epidermal necrolysis					
Asthma/allergy	0 (0.00)	0 (0.00)	NE		
Asthma exacerbation	0 (0.00)	0 (0.00)	NE		
cute kidney failure					
Asthma/allergy	6 (0.01)	1 (0.05)	NE		
Asthma exacerbation	1 (0.02)	0 (0.00)	NE		
endinopathy plus tendon rupture					
Asthma/allergy	787 (0.21)	15 (0.12)	0.45 (0.26, 0.77)		
Asthma exacerbation	61 (0.17)	20 (0.20)	1.31 (0.76, 2.24)		

Abbreviations: CI, confidence interval; HR, hazard ratio; NE, not estimable.

eFigure 6. Weighted 30-Day Attributable Expenditures of Inappropriate Antibiotic Prescriptions for Asthma or Allergy and Asthma Exacerbation Pediatric Cohorts



30-day Attributable Expenditures (2018 US\$)

Abbreviations: ADE, adverse drug event.

Grey bars denote 95% confidence interval estimates.

eReferences.

- 1. Lieberthal AS, Carroll AE, Chonmaitree T, et al. The diagnosis and management of acute otitis media. *Pediatrics*. Mar 2013;131(3):e964-99. doi:10.1542/peds.2012-3488
- 2. Shulman ST, Bisno AL, Clegg HW, et al. Clinical practice guideline for the diagnosis and management of group A streptococcal pharyngitis: 2012 update by the Infectious Diseases Society of America. *Clinical infectious diseases : an official publication of the Infectious Diseases Society of America*. Nov 15 2012;55(10):1279-82. doi:10.1093/cid/cis847
- 3. Chow AW, Benninger MS, Brook I, et al. IDSA clinical practice guideline for acute bacterial rhinosinusitis in children and adults. *Clinical infectious diseases : an official publication of the Infectious Diseases Society of America*. Apr 2012;54(8):e72-e112. doi:10.1093/cid/cir1043
- 4. Sturmer T, Rothman KJ, Avorn J, Glynn RJ. Treatment effects in the presence of unmeasured confounding: dealing with observations in the tails of the propensity score distribution--a simulation study. *American journal of epidemiology*. Oct 1 2010;172(7):843-54. doi:10.1093/aje/kwq198
- 5. Stürmer T, Webster-Clark M, Lund JL, et al. Propensity Score Weighting and Trimming Strategies for Reducing Variance and Bias of Treatment Effect Estimates: A Simulation Study. *American journal of epidemiology*. Aug 1 2021;190(8):1659-1670. doi:10.1093/aje/kwab041
- 6. Austin PC. Balance diagnostics for comparing the distribution of baseline covariates between treatment groups in propensity-score matched samples. *Statistics in medicine*. Nov 10 2009;28(25):3083-107. doi:10.1002/sim.3697