Appendix 1. Analysis of evidence-based national guidelines relevant to each of the three clinical vignettes.

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| **Dyspnea Scenario** |
| Guideline | Baseline Scenario | Medical Comorbidity  | Poor Functional Status  | Age >85  | Limited Follow-Up |
| Mandell et al. IDSA/ATS Guidelines. 200529 | Addressed | Not Addressed | Not Addressed | Not Addressed | Not Addressed |
| Miyashita et al. Japanese CAP guidelines. 200559 | Not Addressed | Not Addressed | Not Addressed | Not Addressed | Not Addressed |
| Feldman et al. South African Society Guidelines. 200760 | Addressed | Not Addressed | Not Addressed | Not Addressed | Not Addressed |
| High et al. IDSA Infections in Older Adults Guidelines. 200861 | Not Addressed | Not Addressed | Not Addressed | Not Addressed | Not Addressed |
| NICE Respiratory Infection Guidelines. 200862 | Not Addressed | Not Addressed | Not Addressed | Not Addressed | Not Addressed |
| British Thoracic Society Guidelines.200963 | Addressed | Not Addressed | Not Addressed | Not Addressed | Not Addressed |
| Hoffken et al. German CAP Guidelines. 200964 | Addressed | Not Addressed | Not Addressed | Not Addressed | Not Addressed |
| Correa et al. Brazilian CAP guidelines. 200965 | Addressed | Not Addressed | Not Addressed | Not Addressed | Not Addressed |
| Shouten et al. Dutch CAP Guidelines.201166 | Addressed | Not Addressed | Not Addressed | Not Addressed | Not Addressed |
| Woodhead et al. Guidelines for LRTI. 201167 | Addressed | Not Addressed | Not Addressed | Not Addressed | Not Addressed |
| **Skin Infection Scenario** |
| Guideline | Baseline Scenario | Medical Comorbidity  | Poor Functional Status  | Age >85 Vignette | Poor Follow-Up  |
| Liu et al. MRSA IDSA guidelines. 201168 | Addressed | Not Addressed | Not Addressed | Not Addressed | Not Addressed |
| Stevens et al. SSTI IDSA guidelines. 201430 | Addressed | Not Addressed | Not Addressed | Not Addressed | Not Addressed |
| May et al. Surgical Infection Society Guidelines. 201169 | Not Addressed | Not Addressed | Not Addressed | Not Addressed | Not Addressed |
| Dellit et al. IDSA Stewardship Guidelines. 200711 | Addressed | Not Addressed | Not Addressed | Not Addressed | Not Addressed |
| **Asymptomatic Bacteriuria Scenario** |
| Guideline | Baseline Scenario | Medical Comorbidity  | Poor Functional Status  | Age >85  |  |
| Nicolle et al. IDSA Asymptomatic Bacteriuria Guidelines. 200531 | Addressed | Addressed | Addressed\* | Addressed |
| Hooton et al. IDSA CAUTI Guidelines. 200970 | Addressed | Addressed\* | Addressed\* | Not Addressed |
| Dubeau et al. European Urinary Incontinence Guidelines. 200971 | Not Addressed | Not Addressed | Addressed\* | Addressed |
| Grabe et al. European Association of Urology UTI Guidelines. 201055 | Addressed | Addressed | Addressed\* | Addressed |
| SIGN. Scottish UTI Guidelines.201256 | Addressed | Addressed | Addressed\* | Addressed |
| Geerlings et al. Dutch UTI Guidelines. 201357 | Addressed | Addressed | Not Addressed | Not Addressed |

Appendix 1 Legend. Appendix 1 lists the 20 evidence-based national guidelines relevant to the three clinical vignettes that were reviewed (10 guidelines for the dyspnea case, 4 guidelines for the skin infection case, 6 guidelines for the asymptomatic bacteriuria case). We performed a systematic search of clinical practice guidelines from PubMed (<http://www.ncbi.nlm.nih.gov/pubmed/guide/>), the Agency for Healthcare Research and Quality National Guideline Clearinghouse (<http://www.guideline.gov>), and the Infectious Diseases Society of American (IDSA) practice guidelines database (<http://www.idsociety.org/idsa_practice_guidelines/>), on April 17, 2014 using keywords relevant to the three clinical vignettes (“community-acquired pneumonia,” “lower respiratory tract infection,” “abscess,” “skin and soft tissue infection,” “bacteriuria,” “urinary tract infection,” and “antibiotic stewardship”). Documents not published in peer-reviewed journals were excluded from the analysis. Relevant guidelines were reviewed in detail to assess whether recommendations for antibiotic management were addressed, including recommendations for patients with the following medical complexities: medical comorbidities, poor functional status, older age, and limited follow-up after hospital discharge. Guidelines were coded “Addressed” if they gave recommendations for antibiotic management specific to the clinical scenario for the baseline vignette and the modified vignettes, each with one of four medical complexities (medical comorbidities, poor functional status, older age greater than 85, and poor follow-up). Guidelines were coded at “Not Addressed” if they did not mention antibiotic management relevant to the clinical vignette. Guidelines coded as “Addressed\*” gave specific antibiotic management recommendations for patients with medical complexities different from those that were described in the survey.

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