


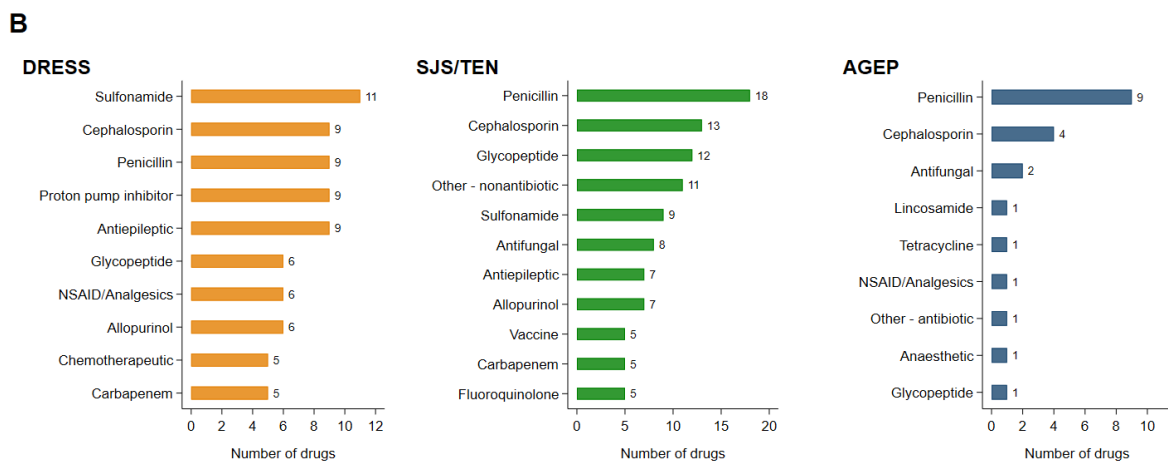
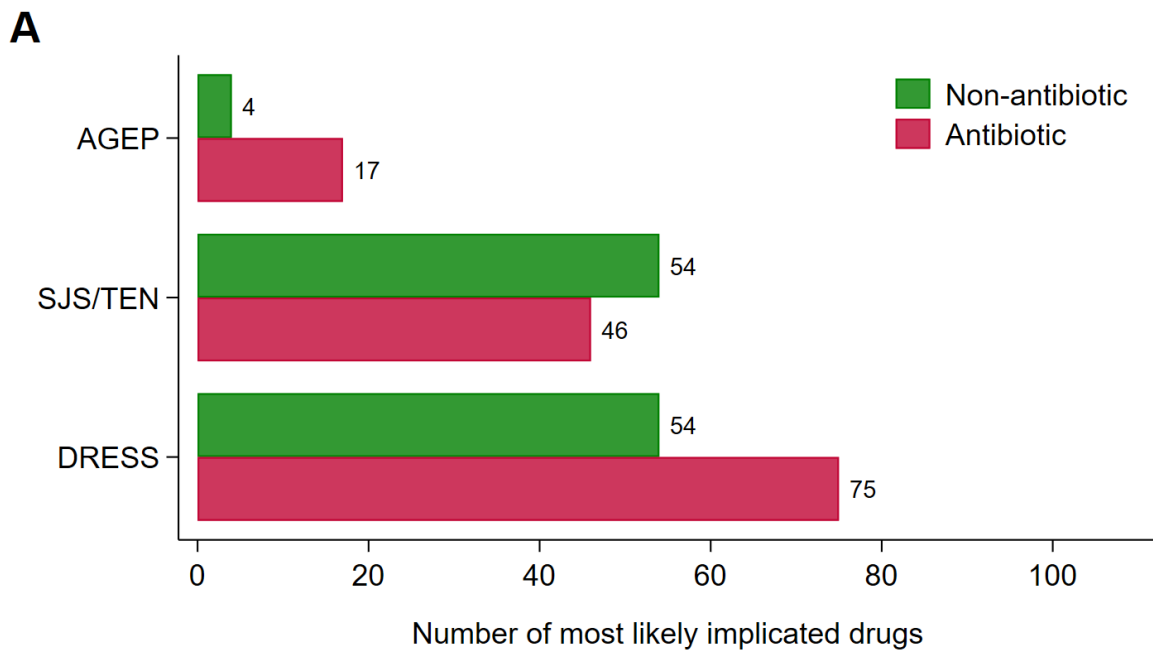


Supplementary Figure 1 – Example of Case Summary for external validation

Study ID: 8-2		Study Site: Austin		Index Date: 3-Aug-2019		Phenotype: DRESS													
Rash features																			
Components	Maculopapular																		
Distribution	>50%																		
Facial oedema	Yes																		
Palms/soles involved	Yes																		
Pruritus	Yes																		
Fever > 38°C	NO																		
Enlarged lymph nodes	No																		
Atypical lymphocytes	Yes																		
Eosinophilia	Yes ->= 1.5X10 ⁹ /L																		
Organ involvement	Yes - kidneys																		
Duration >= 15 days	Yes																		
Other causes excluded	Yes																		
RegiSCAR score	5																		
Prior skin disorder	Eczema																		
Concurrent infection	Yes- Staphylococcus epidermidis endocarditis																		
HSV / mycoplasma detected	Not detected																		
Treatment	Systemic and topical steroids 14 days.																		
Skin testing results	IDT- Vancomycin 5, 50mg/ml positive at 24 hours. IDT- Negative telocaplanin 5, 50 mg/ml																		
<table border="1"> <thead> <tr> <th>Drug</th> <th>Date Start</th> <th>Date Ceased</th> <th>Latency (d)</th> </tr> </thead> <tbody> <tr> <td>Vancomycin</td> <td>03-Jul-19</td> <td>06-Aug-19</td> <td>31</td> </tr> <tr> <td></td> <td></td> <td></td> <td>N/A</td> </tr> </tbody> </table>								Drug	Date Start	Date Ceased	Latency (d)	Vancomycin	03-Jul-19	06-Aug-19	31				N/A
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<p>Patient Demographics 56 yr old Australian male with prosthetic aortic valve endocarditis (Staphylococcus epidermidis). Initial AVR 3rd June, presented with sternal wound infection 28th June. Commenced on vancomycin, rifampicin and cipro.</p> <p>Medical history 1. Congestive heart failure 2. Asthma 3. Eczema 4. HT 5. Prostate Cancer 6. Allergies: Bee sting, aspirin, morphine</p> <p>Histopathology report CLINICAL NOTES: ? DRESS. Specimen 2. Direct immunofluorescence studies have been performed. There is no specific intraepidermal basement membranes nor dermal/vascular staining with IgG, IgA, IgM, C3c or C1q. CONCLUSION 1&2. Skin punch biopsies, back-- spongiotic dermatitis with eosinophilia. An eczematous process and spongiotic drug eruption are both considered possible.</p>																			
HLA typing																			
HLA-A Allele 1	HLA-A Allele 2	HLA-B Allele 1	HLA-B Allele 2	HLA-C Allele 1	HLA-C Allele 2														
02:01:01G	03:01:01G	07:02:01G	52:01:01G	07:02:01G	12:02:01G														
																			
																			
																			

Supplementary Figure 2: All listed drugs classes by phenotype



Supplementary 2 Figure Legend

A. Phenotypes stratified for all antibiotic vs. non-antibiotic implicated drug causality

B. Phenotypes stratified for drug class for all implicated drugs

Other antibiotic: daptomycin

Other nonantibiotic: amiodarone, atorvastatin, noradrenaline