





Supplemental Figure 1 A-L. Detection of test bacteria in the presence of common co-

colonizers. GBS (A-I), *E. faecalis* (J and K), and *N. gonorrhoeae* (L) were prepared at 0.5 McFarland in PBS and diluted out serially. In Panels A-I, dilutions of GBS were compared against samples in which the concentration of GBS was diluted out in the presence of a constant amount of a competing bacteria (held steady at 10⁸ bacteria per ml). For panels J and K, dilutions of *E. faecalis* were compared against dilutions also containing either GBS (Panel J) or *E. coli* (Panel K), both held steady at 10⁸ bacteria per ml. Panel L shows dilutions of *N. gonorrhoeae* compared with dilutions of the same organism, but with GBS held steady at 10⁸ bacteria per ml in each sample. For Panels A-I, three distinct strains of GBS were tested, for panels J and K, two strains of *E. faecalis* were used and for Panel L, two strains of *N. gonorrhoeae* were utilized. Results shown are of GBS clinical isolate 01.12.76, (Panels A-I), *E. faecalis* ATCC strain 29212 (Panels J and K), and *N. gonorrhoeae* strain 19424 (Panel L). Each test was performed in triplicate and data shown are representative of three individual experiments. Bacterial concentrations were confirmed by CFUs following plating on agar for 24-48 hours.





*E. faecalis/*ml



Supplemental Figure 3 A-H. Demonstration of bacterial resistance to selected antibiotics. After preparing a 0.5 McFarland in Fastidious Broth and then diluting bacterial isolates out, antibiotics were added to the wells giving the final concentrations indicated. A clinical isolate of GBS sensitive to penicillin (strain 12386) was diluted in the presence of either cefazolin at 0, 0.5, 0.05, or 0.005 μg/ml (Panel A), 0, 0.25, 0.025, or 0.0025 μg/ml clindamycin (Panel B), 0, 0.25, 0.025, or 0.0025 µg/ml erythromycin (Panel C). In Panels D and E, a clinical isolate of GBS sensitive to erythromycin but resistant to clindamycin was diluted in the presence of either 0, $0.25, 0.025, \text{ or } 0.0025 \,\mu\text{g/ml}$ erythromycin (Panel D), or 0, 1, 0.1, or 0.01 $\mu\text{g/ml}$ clindamycin (Panel E). Panel F shows a vancomycin-resistant strain of *E. faecalis*, strain 51299, diluted in either 0 or 4 μg/ml vancomycin. In Panel G, a penicillin-resistant strain of *N. gonorrhoeae*, strain 31426, was diluted in the presence of 0, 0.5, 1, 2, or 4 µg/ml penicillin. Finally, Panel H shows a ceftriaxone-sensitive strain of N. gonorrhoeae, strain 1279, diluted in the presence of 0, 0.0625 or 0.125 µg/ml ceftriaxone. Incubations were for 6 hours for all studies, except those involving N. gonorrhoeae, which were overnight. Each test was performed in triplicate and data shown are representative of three individual experiments. Bacterial concentrations were confirmed by CFUs following plating on agar for 24-48 hours.







Supplemental Figure 2 A-H. Demonstration of bacterial resistance to selected antibiotics. After preparing a 0.5 McFarland in Fastidious Broth and then diluting bacterial isolates out, antibiotics were added to the wells giving the final concentrations indicated. A clinical isolate of GBS sensitive to penicillin (strain 12386) was diluted in the presence of either cefazolin at 0, 0.5, 0.05, or 0.005 μg/ml (Panel A), 0, 0.25, 0.025, or 0.0025 μg/ml clindamycin (Panel B), 0, 0.25, 0.025, or 0.0025 µg/ml erythromycin (Panel C). In Panels D and E, a clinical isolate of GBS sensitive to erythromycin but resistant to clindamycin was diluted in the presence of either 0, $0.25, 0.025, \text{ or } 0.0025 \,\mu\text{g/ml}$ erythromycin (Panel D), or 0, 1, 0.1, or 0.01 $\mu\text{g/ml}$ clindamycin (Panel E). Panel F shows a vancomycin-resistant strain of *E. faecalis*, strain 51299, diluted in either 0 or 4 μg/ml vancomycin. In Panel G, a penicillin-resistant strain of *N. gonorrhoeae*, strain 31426, was diluted in the presence of 0, 0.5, 1, 2, or 4 µg/ml penicillin. Finally, Panel H shows a ceftriaxone-sensitive strain of N. gonorrhoeae, strain 1279, diluted in the presence of 0, 0.0625 or 0.125 µg/ml ceftriaxone. Incubations were for 6 hours for all studies, except those involving N. gonorrhoeae, which were overnight. Each test was performed in triplicate and data shown are representative of three individual experiments. Bacterial concentrations were confirmed by CFUs following plating on agar for 24-48 hours.