Supplementary Online Content

McDaniel CE, Ralston S, Lucas B, Schroeder AR. Association of diagnostic criteria with urinary tract infection prevalence in bronchiolitis: a systematic review and meta-analysis. *JAMA Pediatr*. Published online January 28, 2019. doi:10.1001/jamapediatrics.2018.5091

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

eAppendix 1. Search Strategy

Medline						
1	urinary tract infections/ or bacteriuria/ or pyuria/ or (bacteriuria$ or pyuria$ or urinary tract infect$).ti.					
2	bronchiolitis/ or bronchiolitis, viral/ or bronchitis, chronic/ or bronchioliti$.tw,kw.					
3	respiratory syncytial viruses/ or respiratory syncytial virus, human/ or ((rsv and respir$) or respir$ syncytial virus$).tw,kw.					
4	bronchopneumonia/ or pleuropneumonia/ or ((pneumonia/ or pneumonia, bacterial/ or chlamydial pneumonia/ or pneumonia, mycoplasma/ or pneumonia, pneumococcal/ or pneumonia, rickettsial/ or pneumonia, staphylococcal/ or pneumonia, necrotizing/ or pneumonia, pneumocystis/ or pneumonia, viral/) and (lung$ or pleur$ or respir$ or bronch$ or pulm$).tw,kw.)					
5	((pneumonia$ and (lung$ or pleur$ or respir$ or bronch$ or pulm$)) or (bronchopneumonia$ or pleuropneumonia$)).tw,kw.					
6	Influenza, Human/ or exp orthomyxoviridae/ or exp orthomyxoviridae infections/					
7	(influenza$ or flu or flus or grippe or orthomyxovir$).tw,kw.					
8	or/2-7 [respiratory infections]					
9	hyperbilirubinemia/ or hyperbilirubinemia, neonatal/ or jaundice, neonatal/ or jaundice/ or jaundice, obstructive/ or kernicterus/ or (hyperbilirubinemi$ or bilirubinemi$ or jaundice or icterus or kernicterus or bilirubin encephalopath$).tw,kw.					
10	brief resolved unexplained event$.mp.					
11	apparent life-threatening event$.mp.					
12	gastroenteritis/ or exp enteritis/ or exp enterocolitis/ or exp proctitis/					
13	(gastroenteriti$ or enteriti$ or duodeniti$ or ileiti$ or pouchiti$ or enterocoliti$ or proctiti$).tw,kw.					
14	rotavirus infections/ or rotavirus/ or rotavir$.tw,kw.					
15	cellulitis/ or soft tissue infection/ or (cellulitis or phlegmon or ((soft tissue or derm$ or epiderm$) adj3 infect$)).tw,kw.					
16	or/2-15					
17	1 and 16					
18	limit 17 to "all infant (birth to 23 months)"					
19	17 and (newborn$ or neonat$ or baby or babies or infant$).ti,ab,kw,so,jw.					
20	18 or 19					
21	limit 20 to english language					
22	remove duplicates from 21					
23	*urinary tract infections/ or *bacteriuria/ or *pyuria/ or (bacteriuria$ or pyuria$ or urinary tract infect$).ti.					
24	limit 23 to (("diagnosis (maximizes specificity)" or "causation-etiology (maximizes specificity)") and last 5 years)					

25	limit 24 to "all infant (birth to 23 months)"					
26	limit 25 to english language					
27	remove duplicates from 26					
28	pregnan$.tw,kw.					
29	27 not 28					

eAppendix 2. Quality Assessment

Study	**Quality Assessment**						
	Was the sample representative of the target population? (I.e. bronchiolitis + UTI)	Were study participants recruited in an appropriate and clear way?	Were the study subjects and the setting described in detail?	Were objective, standard criteria used for the diagnosis of bronchiolitis?	Were objective, standard criteria used for the diagnosis of UTI?	Are all important confounding factors/differences identified and accounted for? (e.g. known urologic abnormalities, severe comorbid conditions)	Was there appropriate statistical analysis?
Antonow et al. 1998							
Melendez and Harper 2003							
Schlecther Salinas et al. 2017							
Kaluarachchi et al. 2014							
Elkhunovich and Wang 2015							
Luginbuhl et al. 2008							
Randolph et al. 2004							
Key	Pass	Fail	Information not provided				

eTable. MOOSE Checklist: Impact of Diagnostic Criteria on UTI Prevalence in Bronchiolitis: a Meta-Analysis

Reporting of background should include	
- Problem definition	Intro, para 2
- Hypothesis statement	Intro, para 4
- Description of study outcomes	Intro, para 4
- Type of exposure or intervention used	Intro, para 4
- Type of study designs used	Study selection, para 1
- Study population	Search strategy, para 1
Reporting of search strategy should include	
- Qualifications of searchers	Search strategy, para 1
- Search strategy, including time period	Search strategy, para 1
- Effort to include all available studies, including contact with authors	Search strategy, para 1
- Databases and registries searched	Search strategy, para 1
- Search software used, name and version, including special features used	n/a
- Use of hand searching	Study selection, para 2
- List of citations located and those excluded, including justification	Figure 1
- Method of addressing articles published in languages other than English	Search strategy, para 1
- Method of handling abstracts and unpublished studies	Figure 1
- Description of any contact with authors	Search strategy, para 2
Reporting of methods should include	
- Description of relevance or appropriateness of studies assembled for assessing hypothesis to be tested	Study selection, para 1
- Rationale for the selection and coding of data	Study selection, para 2
- Documentation of how data were classified and coded	Identification & data extraction
- Assessment of confounding	Quality assessment
- Assessment of study quality	Quality assessment
- Assessment of heterogeneity	Statistical analysis
- Description of statistical methods	Statistical analysis
- Provision of appropriate tables and graphics	Figure 1
Reporting of results should include	
- Graphic summarizing individual study estimates and overall estimate	Figure 2, 3
- Table giving descriptive information for each study included	Table 1
- Results of sensitivity testing	Results, Bronchiolitis Supplement B
- Indication of statistical uncertainty of findings	Results, prevalence of UTI
Reporting of discussion should include	
- Quantitative assessment of bias	Discussion, para 1
- Justification for exclusion	Figure 1
- Assessment of quality of included studies	Discussion, para 1
Reporting of conclusions should include	
- Consideration of alternative explanations for observed results	Discussion, para 2 & 7
- Generalization of conclusions	Discussion, para 8 & Conclusion
- Guidelines for future research	Discussion, para 6
- Disclosure of funding source	Acknowledgments