

Supplementary table 1: Questionnaire for assessing inclusion and exclusion criteria.

Participant/Category	Questions / Data fields
All Sample	Study ID
	Date of Recruitment
	Site of Recruitment
	Date Sample Collected
	Hospital
	UR
	First Name
	Surname
	Date of Birth
	Sex
	Address
	Ethnicity of Mother
	Ethnicity of Father
	Tube Type Collected and Volume of blood collected
Neonates	Gestation
	Time of Birth
	Day of Bleed
	Nature of Delivery
	Weight
	APGAR Score at 5 minutes
	Feeding Method
	Date/Time of Vitamin K
	Current Medications
Paediatric	Procedure performed
	Current Medications
	Clinical Information
Haematology	Dose the participant have a presence of coagulation disorders?
	Does the participant have a family history of coagulation disorders?
	Is there participant currently on anticoagulation medication?
Immunology	Does the participant have a presence of an immune system disorder or immune deficiency syndrome?
	Does the participant have a presence of a genetic disorder?
	Does the participant have a presence of a rheumatologic disorder?
	Has any family member or relative of your child ever been diagnosed with an immune system disorder or immune deficiency syndrome?
	Has the participant had an infection or a febrile illness within the last 7 days?

	Has the participant had a hospital admission for intravenous (IV) antibiotics to clear an infection on more than 2 occasions in life?
	Has the participant needed 2 or more months of oral antibiotics more than 2 occasions in their life?
	Does the participant have a history of a failure to thrive?
	Has the participant been a recipient of blood products in the last 3 months?
	Has a doctor ever diagnosed your child with food allergy, asthma, eczema or hayfever?
	Has anyone in your child's immediate family (that is, your child's parents and/or siblings) ever been diagnosed with food allergy, asthma, eczema or hayfever?
Biochemistry	Does the participant have a history of liver and renal disease?
	Does the participant have a presence of endocrine diseases?
	Does the participant have a presence of metabolic disease?
	Does the participant have a presence of renal disease?
	Does the participant have a presence of hepatic disease?
	Does the participant have a history of failure to thrive?