

Supplementary Table 1. Policies of prevention of early-onset group B *Streptococcus* (GBS) infection, use of a central venous line, and use of antibiotics

Prevention of early-onset GBS infection

- All pregnant women were screened at 33 to 37 weeks' gestation for vaginal and rectal GBS colonization.
- Pregnant women with previous infants with invasive GBS disease, a positive GBS vaginal-rectal screening culture, or unknown GBS status were treated with antibiotics (mainly penicillin) during labor or after premature rupture of the membranes.

Use of a central venous line

- For maintaining a central venous line, peripherally inserted central catheters were used. When a central venous line using peripherally inserted central catheters could not be successfully placed because of ELBW infants or newborns with severe asphyxia, umbilical vein catheters were used instead.
- Premature newborns such as those with a birth weight below 1,800 g and/or gestational age of less than 34 weeks, those with intestinal disorders, those who needed total parenteral nutrition and those who had drugs that caused angitis used a central venous line.
- When the status of newborns was improved, central venous lines were immediately removed.

Use of antibiotics

- For newborns with suspected infection or sepsis, antibiotics were used for treatment. Prophylactic antibiotics were sometimes used for newborns less than 1,500 g BW and newborns with respirators and/or central venous lines.
 - Penicillin or oxacephem was used as the first choice for early-onset infection. Aminoglycoside was added when required for treatment.
 - For late-onset infection, the specific antibiotic choice was driven by center-specific guidelines based on the major cause of nosocomial infection and organism susceptibility patterns in that specific center.
 - De-escalation for use of specific antibiotics (definitive therapy) was performed when a targeted organism was found by culture.
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Supplementary Table 2. The characteristics of newborn patients with sepsis and deceased newborn patients due to sepsis.

	Gestational age (weeks)	Birth weight (g)	The onset of sepsis (days after birth)
Patients with sepsis			
Total, n = 51	30 (22 to 41)	1,626 (404 to 3,664)	10 (0 to 152)
EOS, n = 9	36 (24 to 41)	2,452 (465 to 3,252)	0 (0 to 2)
LOS, n = 42	28 (22 to 40)	1,036 (404 to 3,664)	13 (3 to 152)
Deceased patients with sepsis			
Total, n = 10	26 (22 to 40)	553 (438 to 3,504)	10 (0 to 98)

Data are expressed as median (range). EOS, early-onset sepsis; LOS, late-onset sepsis.