Table 2. Concordance and discordance of empiric regimen by pathogen with fatalities\* from overall cohort (n=452 overall).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Pathogen** | | | **30-day Case Fatality** | | **Total** |
| **Survivor** | **Non-survivor** |
| *Staphylococcus aureus* | Empiric treatment | Concordant | 76 (96%) | 3 (4%) | 79 (90.8%) |
| Discordant | 8 (100%) | 0 (0%) | 8 (9.2%) |
| Total | | 84 (96.6%) | 3 (3.4%) | 87 (100%) |
| *Escherichia coli* | Empiric treatment | Concordant | 67 (92%) | 6 (8%) | 73 (90.1%) |
| Discordant | 5 (62%) | 3 (38%) | 8 (9.9%) |
| Total | | 72 (88.9%) | 9 (11.1%) | 81 (100%) |
| *Klebsiella spp.* | Empiric treatment | Concordant | 41 (89%) | 5 (11%) | 46 (83.6%) |
| Discordant | 8 (89%) | 1 (11%) | 9 (16.4%) |
| Total | | 49 (89.1%) | 6 (10.9%) | 55(100%) |
| *Enterobacter spp*. | Empiric treatment | Concordant | 21 91%) | 2 (9%) | 23 (82.1%) |
| Discordant | 2 (40%) | 3 (60 %) | 5 (17.9%) |
| Total | | 23 (82.1%) | 5 (17.9%) | 28 (100%) |
| *Pseudomonas aeruginosa* | Empiric treatment | Concordant | 18 (86%) | 3 (14%) | 21 (95.5%) |
| Discordant | 0 (0%) | 1 (100%) | 1 (4.5%) |
| Total | | 18 (81.8%) | 4 (18.2%) | 22 (100%) |
| *Acinetobacter baumannii* | Empiric treatment | Concordant | 5 (71%) | 2 (29%) | 7 (50%) |
| Discordant | 5 (71%) | 2 (29%) | 7 (50%) |
| Total | | 10 (71.4%) | 4 (28.6%) | 14 (100%) |
| *Serratia spp.* | Empiric treatment | Concordant | 7 (87%) | 1 (13%) | 10 (71.4%) |
| Discordant | 2 (50%) | 2 (50%) | 4 (28.6%) |
| Total | | 11 (78.6%) | 3 (21.4%) | 14 (100%) |
| *Streptococcus pyogenes* | Empiric treatment | Concordant | 8 (89%) | 1 (11%) | 9 (90.0%) |
| Discordant | 1 (100%) | 0 (0%) | 1 (10.0%) |
| Total | | 9 (90.0%) | 1 (10.0%) | 10 (100%) |
| **Total** | | | **276** | **35** | **311** |

\*Salmonella spp., Streptococcus pneumoniae, Streptococcus agalactiae, Enterococcus faecalis, Enterococcus faecium, Enterococcus spp., Haemophilus influenza, Burkholderia cepacia and Proteus spp. had no fatalities. Concordance and discordance of these pathogens are presented in table, Supplemental Digital Content 6.