**Table S1**. *In vitro* susceptibilities of KPC-producing blood isolates collected from patients hospitalized in ICU.

Bacterial species (isolate no.)	Susceptibility rates (%)			
and antimicrobial agent tested	S	I	R	
Klebsiella pneumoniae (N=102)				
Ceftriaxone	-	-	100	
Ceftazidime	-	-	100	
Cefepime	-	-	100	
PIP-TAZ	-	-	100	
Ciprofloxacin	-	-	100	
Levofloxacin	-	-	100	
Amikacin	12.5	14.3	73.2	
Gentamycin	42.9	30.4	26.8	
Meropenem	-	2	98	
Ertapenem	-	-	100	
TMP-SMX	16.1	-	83.9	
Tigecycline	61.5	9.6	28.8	
Colistin	70.9	-	29.1	
Fosfomycin	60.7	-	39.3	

Table S2. Definitive treatment regimens of patients by survival status after a KPC-Kp BSI

	All patients N=102	Patients who survived n=56	Patients who did not survive n=46	p value
No use of <i>in vitro</i> active antibiotics Only one <i>in vitro</i> active antibiotic used within 24 h Two or more <i>in vitro</i> active antibiotics used within 24 h Definitive therapy with fewer than two	11 (10.8%) 18 (17.6%) 37 (36.3%) 28 (27.4%)	2 (3.6%) 13 (23.3%) 26 (46.4%) 18 (33.3%)	9 (19.6%) 5 (10.9%) 11 (23.9%) 10 (27%)	0.010 0.104 0.019
antibiotics displaying in vitro activity  Definitive therapy with two or more antibiotics displaying in vitro activity	63 (61.8%)	36 (66.7%)	27 (63%)	0.522
Antibiotic regimens  Colistin-containing regimen	61 (59.8%)	34 (60.7%)	27 (58.7%)	0.836
CAZ-AVI ± aminoglycosides/fosfomycin	13 (12.7%)	10 (17.9%)	3 (6.5	0.088
Other regimens*	17 (16.7%)	10 (17.9%)	7 (15.2%)	0.722

BSI bloodstream infection, CAZ AVI ceftazidime-avibactam; KPC-Kp KPC-producing Klebsiella pneumoniae

<sup>\*</sup> Other regimens include: 8 tigecycline + meropenem, 6 tigecycline + gentamycin, 3 meropenem+ertapenem

**Table S3**. Comparison between patients who received appropriate antibiotic therapy within the first 24 hours from the blood cultures collection and those who did not.

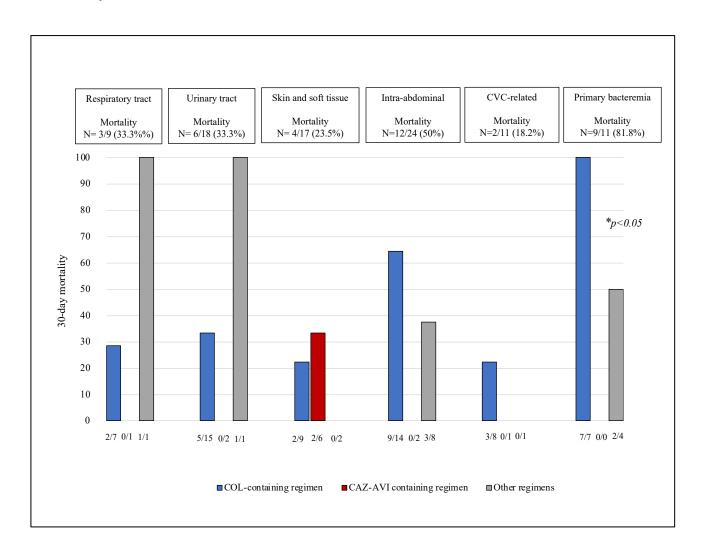
	Patients who	Patients who did	
	received AAT	not received AAT	
Characteristic	<=24 hours	<=24 hours	p value
	N=55	N=47	
Age, years, median (IQR)	60 (53-71)	70 (53-77)	0.132
Male sex	34 (61.8%)	` ´	0.132
Comorbidities	34 (01.8%)	31 (66%)	0.003
	0 (10 10/)	0 (16 40/)	0.712
Diabetes	9 (19.1%)	9 (16.4%)	0.713
Cardiovascular disease	13 (23.6%)	23 (48.9%)	0.008
Chronic renal disease	9 (16.4%)	6 (12.8%)	0.609
Chronic liver disease	9 (16.4%)	4 (8.5%)	0.236
COPD	3 (5.5%)	7 (14.9%)	0.110
Solid cancer	13 (27.7%)	14 (25.5%)	0.801
Hematological malignancy	9 (16.4%)	5 (10.6%)	0.402
Solid organ transplantation	5 (9.1%)	3 (6.4%)	0.612
Primary reason for ICU admission			
Trauma	8 (14.5%)	8 (17%)	0.732
Respiratory failure	7 (12.7%)	9 (19.1%)	0.374
Cardiovascular disease	9 (16.4%)	7 (14.9%)	0.839
Surgery	10 (18.2%)	5 (10.6%)	0.284
Infection	8 (14.5%)	5 (10.6%)	0.555
Burn injury	5 (9.1%)	6 (12.8%)	0.551
Cerebrovascular accident	3 (5.5%)	7 (14.9%)	0.110
Other*	5 (9.1%)	0	0.040
Previous hospitalization	28 (50.9%)	12 (25.5%)	0.009
Previous antibiotic therapy	34 (61.8%)	24 (51.1%)	0.274
Length of ICU stay after KPC-Kp BSI, days, median (IQR)	20 (13-30)	17 (7-25)	0.095
ICU stay, days, median (IQR)	40.5 (25.75-59.25)	33 (16.75-54.75)	0.074
Hospital length of stay before bacteremia, days, median		,	
(IQR)	19 (9-36)	14 (3-41)	0.215
Source of infection			
CVC-related bacteremia	10 (18.2%)	3 (6.4%)	0.075
Primary bacteremia	6 (10.9%)	8 (17%)	0.371
Respiratory tract	5 (9.1%)	6 (12.8%)	0.551
Urinary tract	13 (23.6%)	8 (17%)	0.410
Skin and skin structure	12 (21.8%)	6 (12.8%)	0.232
Intra-abdominal	9 (16.4%)	15 (31.9%)	0.065
Endocarditis	0	1 (2.1%)	0.277
Type of acquisition	U	1 (2.170)	0.277
Healthcare-associated	2 (3.6%)	8 (17%)	0.023
Nosocomial Nosocomial	* *	, ,	
Charlson Comorbidity Index, median (IQR)	52 (94.5%)	37 (78.7%)	0.017
	2 (1-4)	2 (1-3)	0.305
KPC-Kp intestinal colonization	33 (60%)	19 (40.4%)	0.049
Source control	39 (70.9%)	26 (55.3%)	0.103
Septic shock	23 (41.8%)	17 (36.2%)	0.560
Mechanical ventilation	26 (47.3%)	14 (29.8%)	0.071
AKI	9 (16.4%)	6 (12.8%)	0.609
SOFA score, median (IQR)	6 (3-10)	5 (2-9)	0.355
	17 (12 22)	15 (11 21)	0.302
APACHE II score, median (IQR)	17 (12-22)	15 (11-21)	0.302

Overall 30-day mortality	16 (29.1%)	30 (63.8%)	<0.001
Thirty-day mortality attributable to infection	15 (27.3%)	28 (59.6%)	0.001
Overall 14-day mortality	11 (20%)	22 (46.8%)	0.004
Overall 7-day mortality	6 (10.9%)	15 (31.9%)	0.009

AAT appropriate antibiotic therapy, AKI acute kidney injury, BSI bloodstream infection, COPD chronic obstructive pulmonary disease, CVC central venous catheter, DNR do not resuscitate order, ICU intensive care unit, IQR interquartile range, KPC-Kp KPC-producing Klebsiella pneumoniae, SOFA Sequential Organ Failure Assessment

<sup>\*</sup> Other causes of ICU admission include: 1 carbon monoxide poisoning, 1 Sezary syndrome, 1 acute renal failure, 1 Wilson disease with hepatic failure, 1 thyrotoxicosis.

**Figure S1**. Thirty-day mortality among patients who received different treatment regimens stratified by site of infection.



Patients who did not received in vitro active therapy (N=9) were excluded.

One patient with endocarditis treated with ceftazidime/avibactam died (not shown in the Figure).

COL= colistin; CAZ-AVI= ceftazidime-avibactam