Supplemental Digital Content 7

TABLE: Summary of Patient Analysis Sets

Analysis Set	Definition
ITT	All randomized patients
Safety	All randomized patients who received ≥1 dose of IV study drug
Safety evaluable	A subset of patients from the safety analysis set who received ≥72 hours of study t <mark>reatment</mark>
	NB. Seven patients were excluded from the safety evaluable analysis set due to having received <72 h of study treatment
Micro-ITT	All randomized patients who had at least 1 Gram-negative baseline pathogen known to cause cUTI and no Gram-positive pathogen at baseline
Clinically evaluable <mark>(CE)</mark>	All patients in the micro-ITT analysis set with a confirmed diagnosis of cUTI who received an adequate course of treatment, had a valid clinical assessment and no protocol deviations or concomitant antibiotics that affected the assessment of efficacy
	NB: clinically evaluable was defined separately for each visit; clinically evaluable at 72 hours, clinically evaluable at EOIV, clinically evaluable at EOT, clinically evaluable at TOC and clinically evaluable at LFU
Microbiologically evaluable (ME)	All patients in the micro-ITT analysis set with a confirmed diagnosis of cUTI who received an adequate course of treatment, had an evaluable microbiological response that was not indeterminate, had at least 1 typical UTI pathogen from an adequate baseline culture that was susceptible to both ceftazidime-avibactam and cefepime, and had no protocol deviations or concomitant antibiotics that would affect the assessment of the microbiological responses
	NB: Microbiologically evaluable was defined separately for each visit; microbiologically evaluable at EOIV, microbiologically evaluable at EOT, microbiologically evaluable at TOC and microbiologically evaluable at LFU
Pharmacokinetic <mark>(PK)</mark>	A subset of patients from the safety analysis set who had ≥1 ceftazidime and/or avibactam plasma measurement available

cUTI, complicated urinary tract infection; EOIV, end of IV; EOT, end of treatment; ITT, intent-to-treat; IV,

intravenous; LFU, late follow-up; micro-ITT, microbiological intent-to-treat; TOC, test of cure.