#### Appendix 1

### Descriptions of hospitals that were surveyed

Participant screening and enrolment occurred at seven hospitals in the Cape Town Metro health district, which serves a population of approximately 3.3 million people. Three district hospitals (Mitchell's Plain Hospital, New Somerset Hospital, and Victoria Hospital Wynberg), two tertiary referral hospitals (Groote Schuur Hospital, Red Cross War Memorial Children's Hospital), and two privately funded hospitals (Christian Barnard Hospital, University of Cape Town Private Academic Hospital) were surveyed.

#### Groote Schuur Hospital (GSH) (721 patients surveyed)

GSH opened in 1938. The hospital has a bed capacity of 893 and serves the entirety of the Western Metropol. The hospital offers both tertiary-level services, receiving referrals from three secondary-level hospitals (Victoria Hospital Wynberg, New Somerset Hospital and Mitchell's Plain Hospital) and secondary-level services. The patient population has high rates of communicable and non-communicable disease. Attending clinical teams are consultant physician-led teams usually consisting of medical interns, medical officers, and specialist registrars in internal medicine. Subspecialist patient consultation is readily available. Full radiology and laboratory services are available 24 hours a day.

#### Victoria Hospital Wynberg (VHW) (107 patients surveyed)

VHW opened in 1889 has a bed capacity of 206. The hospital offers primary and secondary level services and serves the Southern Peninsula Health District, as well as Pollsmoor Prison. Attending clinical teams are consultant physician-led teams usually consisting of medical interns, medical officers, and rotating specialist registrars. VWH does not have an obstetric or neonatal service. Patients are referred for subspecialist care to GSH, e.g. renal dialysis, prolonged intensive care unit (ICU) care. Radiology services include 24 hours a day X-rays, and working hours CT and ultrasonography. All laboratory investigations are sent to the NHLS laboratory at GSH.

#### New Somerset Hospital, Greenpoint (NSH) (200 patients surveyed)

NSH is the oldest hospital in South Africa and was built in 1864. NSH has a bed capacity of 330. The hospital offers primary and secondary-level services and serves the Cape Town Central Health District. Attending clinical teams are consultant physician led teams usually consisting of medical interns, medical officers, and rotating specialist registrars. Patients are referred for subspecialist care to GSH, e.g. renal dialysis, but there is a fully functional five-bed ICU on site. Radiology services include 24 hours a day X-

rays, and working hours ultrasonography and CT scanning. All laboratory samples are sent to the accredited NHLS located next door to the hospital site in Greenpoint.

#### Mitchell's Plain Hospital (MPH), Mitchell's Plain (95 patients enrolled)

MPH was built in 2010 has a bed capacity of 200. The hospital offers both primary and secondary-level services. Attending clinical teams are consultant physician-led teams usually consisting of medical interns, officers, and specialist registrars in internal medicine. Patients are referred for subspecialist care to GSH, e.g. renal dialysis and ICU/high-care unit (HCU). Radiology services include 24 hours-a-day X-rays, and working hours ultrasonography and CT scanning. All laboratory investigation (barring histology) are sent to the accredited NHLS laboratory located on site.

#### Christiaan Barnard Memorial Hospital (CBMH) (129 patients surveyed)

CBMH is a privately funded hospital and was relocated in 2016. The facility has a bed capacity of 248. CBMH is situated next to the Cape Town International Conference Centre and offers outpatient and inpatient facilities with onsite radiology services. All laboratory services are outsourced. Clinical care is offered by specialists and hospitalists.

### <u>University of Cape Town Private Academic Hospital (UCTPAH) (45 patients surveyed)</u>

UCTPAH is a privately funded facility adjacent to GSH that was established in 2012 as a joint venture with the University of Cape Town. UCTPAH has a bed capacity of 124. UCTPAH does not have emergency room facilities or obstetric and neonatal services, but offers an ICU/HCU, medical and surgical inpatient and outpatient facilities. Radiology services (X-ray, ultrasound and CT scan) are available 24 hours per day but MRIs are done through GSH. Clinical services are provided by specialists.

## **Supplementary Table 1: Summary of all patients surveyed stratified by hospital**

		Governme	ent funde	Privately funded				
			hospitals					
	All,	GSH,	NSH,	MPDH,	VWH,	RXCH,	ИСТРАН,	СВН,
	n=1486	n=721	n=200	n=95	n=107	n=189	n=45	n=129
Bed capacity	2301	893	330	200	206	300	124	248
Bed occupancy (%)	64.4	80.7	60.6	47.5	51.9	63	36.3	52
Female	785	373	123	64	53	90	26 (57.8)	55 (42.6)
	(52.8)	(51.7)	(61.5)	(67.4)	(49.5)	(47.6)		
Age, IQR in yrs	40 (25;	47 (33;	36	37 (22;	45	1.5	56 (31;	46 (28; 69)
	60)	62)	(26;	58)	(30;	(0.4;	64)	
			58)		62)	5.7)		
Unable to speak to	303	160	40	14	18	15	7 (15.6)	32 (24.8)
patient/parent	(20.4)	(22.2)	(20)	(14.7)	(16.8)	(7.9)		
BLA reported	48	20 (2.8)	11	3 (3.2)	2 (1.9)	0	2 (4.4)	9 (7)
	(3.2)		(5.5)					

Abbreviations: BLA: Beta-lactam allergy; CBH: Christiaan Barnard Memorial Hospital; GSH: Groote Schuur Hospital; IQR: Interquartile range; MPDH: Mitchell's Plain District Hospital; NSH: New Somerset Hospital; UCTPAH: University of Cape Town Academic Hospital; VWH: Victoria Wynberg Hospital

# Supplementary Table 2: Summary of self reported beta-lactam antibiotic allergy divided by hospital funding base and by facility

		Government funded hospitals			Privately funded		
					hospitals		
	All, n=48	GSH,	NSH,	MPDH,	VWH,	UCTPAH,	CBH, n=9
		n=20	n=12	n=3	n=2	n=2	
Female	29 (60.4)	13 (61.2)	4 (30)	3 (100)	2 (100)	2 (100)	6 (66.7)
Age	59 (38;	57 (36;	60 (37;	70 (61;	59, 78	52, 85	58 (46;
	68)	68)	66)	77)			61)
PENFAST, %							
Low risk	31 (64.6)	17 (85)	6 (50)	0	1 (50)	2 (100)	5 (55.6)
Moderate	11 (22.9)	3 (15)	3 (25)	1	1 (50)	0	3 (33.3)
risk				(33.3)			
High risk	5 (10.4)	0	3 (25)	1	0	0	1 (11.1)
				(33.3)			
• Unknown	1 (2)	0	0	1	0	0	0
				(33.3)			
Reaction >10 years	35 (72.9)	18 (90)	8 (66.7)	0	2 (100)	2 (100)	5 (55.6)
Patient can recall	31 (64.6)	12 (60)	8 (66.7)	2	0	1 (50)	8 (88.9)
event				(66.7)			
Family history only	6 (12.5)	2 (10)	2 (10)	0	0	1 (50)	1 (11.1)
Required	30 (62.5)	15 (75)	6 (50)	2	1 (50)	1 (50)	5 (55.6)
treatment				(66.7)			
Required	10 (20.8)	2	4 (40)	1	1 (50)	0	2 (22.2)
adrenaline				(33.3)			
Duration of	6 (4; 15)	9 (4; 16)	4 (2;15)	9	4 and	Unknown	Unknown
admission, days				(9;13)	39		
(IQR)							
Duration of	12 (24.5)	1	0	0	0	Unknown	Unknown
admission not							
known							
Number of re-	0 (0;2)	0 (0; 3)	0 (0;2)	0 (0;2)	0	Unknown	Unknown
admission in							
following 6 months							

Abbreviations: CBH: Christiaan Barnard Memorial Hospital; GSH: Groote Schuur Hospital; MPDH: Mitchell's Plain
District Hospital; NSH: New Somerset Hospital; UCTPAH: University of Cape Town Academic Hospital; VWH: Victoria
Wynberg Hospital

# Supplementary Table 3: summary of antibiotic use in self reported beta-lactam antibiotic allergy patients divided funding base and by facility

		Government funded hospitals				Privately funded hospitals		
		All,	GSH,	NSH,	MPDH,	VWH,	UCTPAH	CBH,
		n=48	n=20	n=12	n=3	n=2	,	n=9
							n=2	
DI A on	antibiotic	25	8 (40)	6 (50)	0	2 (100)	2 (100)	7
	antibiotic		8 (40)	0 (30)	U	2 (100)	2 (100)	
script		(52.1)						(77.8)
On ant	ibiotic	34 (71)	16 (80)	8	1 (33.3)	1 (50)	1 (50)	6
				(66.6)				(66.7)
Indicat	ion for	15	7	2 (25)	0	1 (100)	1 (100)	4 (66.7
antibio	tics on script	(44.1)	(43.8)					)
(% of p	atients on							
antibio	tics)							
•	Gynaecologic	1 (2.9)	1	0	0	0	0	0
	al / obstetric		(6.25)					
•	Blood stream	2 (5.9)	1	1	0	0	0	0
			(6.25)	(12.5)				
•	Pneumonia	4 (11.8)	2	1	0	0	0	1
			(12.5)	(12.5)				(16.7)
•	Abdominal	1 (2.9)	0	0	0	1 (100)	1 (100)	0
	infection							
•	Urinary tract	1 (2.9)	0	0	0	0	0	0
	infection							
•	Not defined	5 (14.7)	2	0	0	0	0	3 (50)
			(12.5)					
Type o	f antibiotics							
Beta-lactam								
antibio	tics							
•	Beta-lactam /	6 (17.6)	2	2 (25)	0	0	0	2
	beta-		(12.5)					(33.3)
	lactamase							
	inhibitor							

Aminopenicilli	5 (14.7)	3	1	0	0	0	1
n		(18.8)	(12.5)				(16.7)
Carbapenam	2 (5.9)	0	0	0	1 (100)	1 (100)	0
<ul> <li>Cephalospori</li> </ul>	9 (26.5)	5	3	0	0	1 (100)	0
n		(31.3)	(37.5)				
Non beta-lactam							
antibiotics							
Aminoglycosi	3 (8.8)	2	0	0	0	0	1
de		(12.5)					(16.7)
<ul> <li>Fluroquinalon</li> </ul>	2 (5.9)	1	0	1 (100)	0	0	0
e / Quinalone		(6.25)					
Glycopeptide	1 (2.9)	0	0	0	0	0	1
							(16.7)
Lincosamide	5 (14.7)	0	2 (25)	0	0	0	3 (50)
Macrolide	2 (5.9)	0	2 (25)	0	0	0	0
Metronidazol	1 (2.9)	1	0	0	0	0	0
e		(6.25)					
<ul> <li>Unknown</li> </ul>	5 (14.7)	5	0	0	1 (100)	0	0
		(31.3)					
More than one	9 (26.5)	1	1	0	0	1 (100)	0
antibiotic		(6.25)	(12.5)				

Abbreviations: BLA: Beta-lactam allergy; CBH: Christiaan Barnard Memorial Hospital; GSH: Groote Schuur Hospital; MPDH: Mitchell's Plain District Hospital; NSH: New Somerset Hospital; UCTPAH: University of Cape Town Academic Hospital; VWH: Victoria Wynberg Hospital

# <u>Supplementary Table 4: Summary of self reported non Beta-lactam antibiotics allergy patients</u>

	Self reported non BL antibiotic
	allergy, n=12
Female	6 (50)
Age, IQR in yrs	52 (29; 66)
Unable to speak	1 (8.3)
to patient/parent	
BLA reported	6 (50)
On antibiotics	11 (8.3)