**Supplemental Table 1 – Guideline Recommended Antibiotic Durations by Syndrome**

|  |  |
| --- | --- |
| **Infectious Syndrome** | **Recommended Duration of Therapy (days)** |
| Community acquired pneumonia | 5  |
| Cellulitis | 5-6  |
| Uncomplicated cystitis | 5  |
| Complicated cystitis | 7  |
| COPD exacerbation | 5  |
| Uncomplicated bacterial sinusitis | 5-7  |

**Supplemental Table 2 – Antibiotics Included on Emergency Department Discharge Preference List**

|  |  |
| --- | --- |
| **Medication Name** | **Default** **Duration of Therapy (days)** |
| Amoxicillin, Amoxicillin/clavulanate, Cefdinir, Cefuroxime, Cephalexin, Ciprofloxacin, Clindamycin, Levofloxacin, Linezolid, Metronidazole, Nitrofurantoin, Penicillin VK, Sulfamethoxazole/trimethoprim | 10 |
| Azithromycin | 5 or 10 |