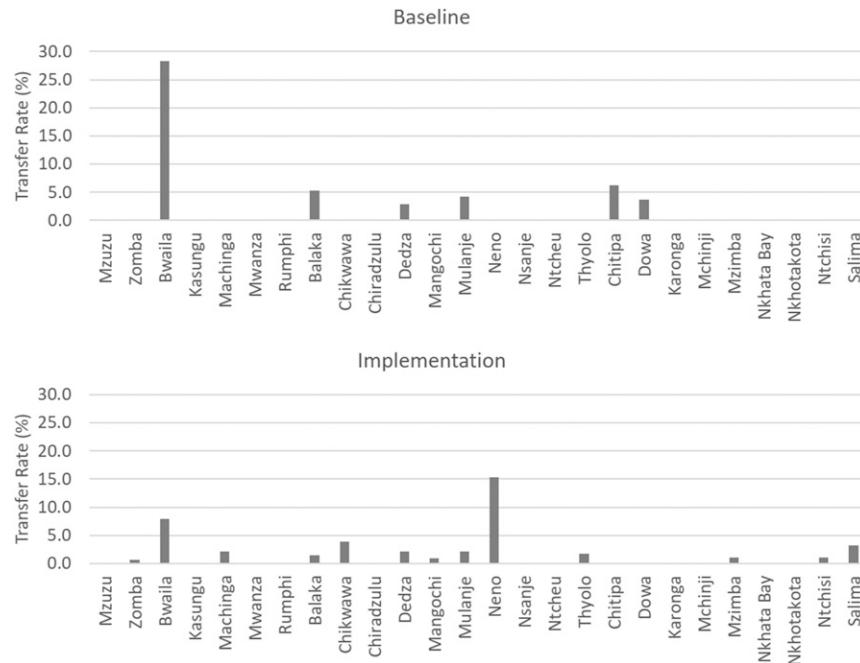
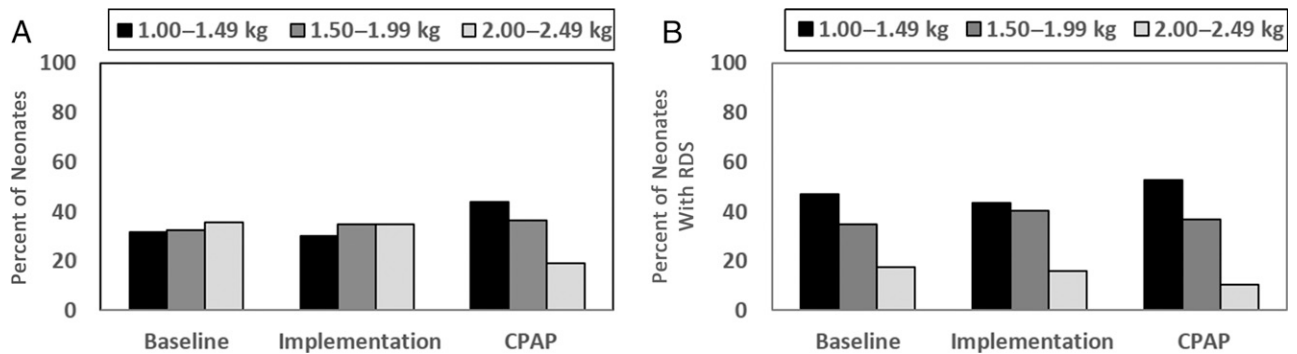


## Supplemental Information



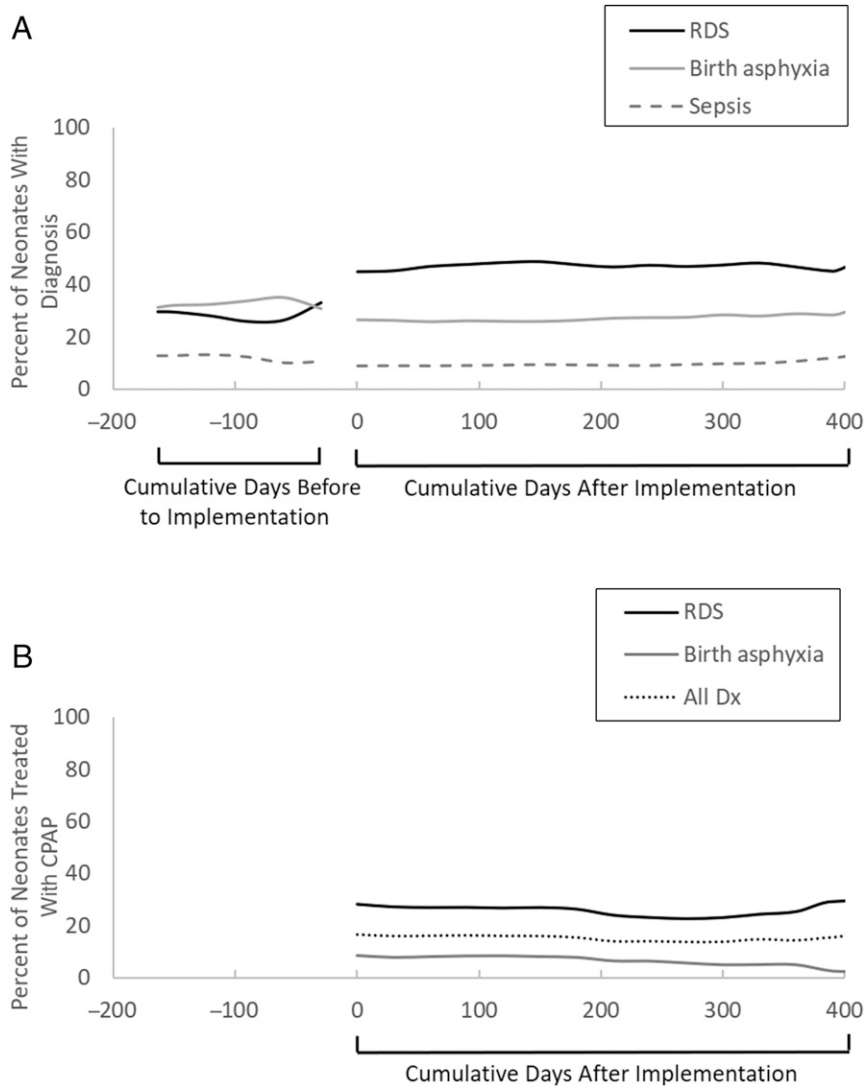
**SUPPLEMENTAL FIGURE 6**

Transfer rates for eligible neonates with admission weight 1 to 2.49 kg admitted with respiratory distress and treated with nasal oxygen during baseline (top) and nasal oxygen and/or CPAP after the implementation of CPAP (bottom) by hospital.



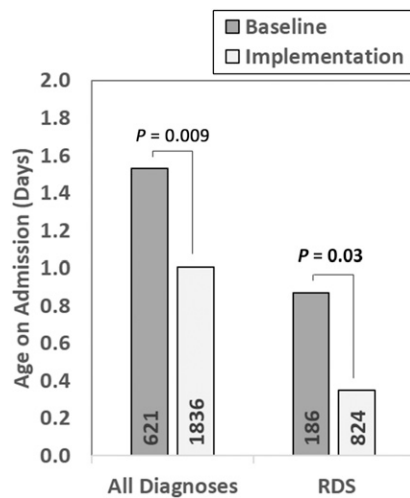
**SUPPLEMENTAL FIGURE 7**

Percentage of eligible neonates treated with oxygen and/or CPAP and stratified by admission weight during baseline and after the implementation of CPAP for (A) all neonates with admission weight 1 to 2.49 kg admitted with respiratory distress and (B) the subset of neonates diagnosed with RDS. The subset of these neonates treated with CPAP after implementation is also plotted.



**SUPPLEMENTAL FIGURE 8**

A, Cumulative percentage of neonates treated with nasal oxygen and/or CPAP with admission weight 1 to 2.49 kg receiving diagnoses of RDS, birth asphyxia, and sepsis before and after the implementation of CPAP. Although diagnosis rates of birth asphyxia and sepsis generally remained constant, diagnosis rates of RDS increased after the implementation of CPAP. B, Cumulative percentage of neonates treated with CPAP by diagnosis. Throughout implementation, ~17% of neonates admitted for respiratory distress with admission weight 1 to 2.49 kg were treated with CPAP.

**SUPPLEMENTAL FIGURE 9**

Average age on admission before and after the implementation of CPAP for all neonates, those treated with nasal oxygen and/or CPAP with admission with weight 1 to 2.49 kg, and the subset of neonates diagnosed with RDS. For both groups, there was a significant decrease in the admission age after the implementation of CPAP.