

Supplemental Information

INCLUSION AND EXCLUSION CRITERIA

Acute Otitis Media

We used modified criteria from a previous study.¹⁹

- Inclusion criteria: children ≥ 2 years old presenting to their pediatrician with acute earache and otoscopic evidence of acute tympanum inflammation (erythema with dull or perforated eardrum, ballooning, or blurring), with or without fever.
- Exclusion criteria: otoscopy with isolated tympanum erythema plus isolated crying, history of fever (low likelihood of otitis diagnosis); history suggestive of serous otitis or chronic suppurative otitis media; serious chronic disease, such as cystic fibrosis or valve heart disease; high fever with crying and severe earache; bilateral involvement; purulent otorrhea; previous complications (septic complications, hearing disturbances); antibiotic intake the previous 2 weeks; symptoms lasting ≥ 4 days; and poor general health status (high fever, hypotonic, somnolence, no response to antipyretic).

Rhinosinusitis

We used modified criteria from a previous study.³⁵

- Inclusion criteria: children ≥ 5 years old presenting with acute inflammation of the nasal or pharyngeal mucosa for more than a week and at least 1 sinus-located

sign or symptom (purulent rhinorrhea or sinus pain).

- Exclusion criteria: clinical presentation for less than a week, antibiotic intake in the previous 2 weeks, and using C-reactive protein quick tests during the visits.

Pharyngitis

We used modified criteria from a previous study.³⁶

- Inclusion criteria: children ≥ 3 years old presenting to their pediatrician or physician with a sore throat or fever as main symptoms and 2 or 3 Centor criteria: pharyngotonsillar exudate, a history of fever or dysthermia, painful lymphadenopathy on the side of the neck, and no coughing.
- Exclusion criteria: other causes of sore throat such as ulcers, aphthous ulcer, or thrush, no presence or presence of 1 or 4 Centor criteria, antibiotic intake in the previous 2 weeks, a history of rheumatic fever, a history of peritonsillar abscess, recurrent pharyngotonsillitis (>5 episodes in the previous year), and using quick antigenic techniques during the visit.

Acute Bronchitis

We used modified criteria from previous studies.^{14,37}

- Inclusion criteria: children ≥ 3 years old acutely ill with uncomplicated disease presenting with cough as the main symptom

and at least 1 sign or symptom in the low airways: expectoration, thoracic pain, breathlessness, wheeze, subcrepitan rale, or rhonchus.

- Exclusion criteria: children <3 years old; suspected pneumonia (crepitan, tubular breath sound, unilateral asymmetric hypophonesis, tachypnea, vomiting, severe diarrhea); high fever (axillary temperature $>38.5^{\circ}\text{C}$); vomiting and/or severe diarrhea; bronchial asthma; other acute or chronic lung diseases including cystic fibrosis; active heart disease; psychiatric diagnoses; antibiotic intake in the previous 2 weeks; and using C-reactive protein quick tests during the visit.