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# **SUPPLEMENTARY MATERIAL**

# Part 1

Table S1. Patients characteristics with obstetrics and neonatal outcomes										
Type of cerclage	Cervical culture before cerclage	Cervical culture after cerclage		Gestational age during	Delivery	Amniotic	Women	Fetus/newborn		
		Culture during pregnancy	Culture before labor	labor [weeks of gestation]	method	fluid culture	symptoms of infection	complications		
PCC	Normal	E. faecalis, E. coli, B. ovatus	E. faecalis, E. coli, B. ovatus	16	Miscarriage	-	Elevated inflammatory markers	Miscarriage		
UCC	GBS, P. bivia, C. albicans	GBS, E. coli	GBS, E. coli	25	Vaginal delivery	-	Elevated inflammatory markers	Neonatal death; congenital sepsis caused by <i>E. coli</i> , RDS, IVH III degree		
UCC	E. faecalis	E. coli, C. albicans	Normal	28	Intrapartum caesarean section	C. albicans	Threatening intrauterine infection	Respiratory failure; early onset infection; IVH II degree		
PCC	Normal	Normal	Normal	30	Intrapartum caesarean section	E. faecalis	Threatening intrauterine infection	Respiratory failure; early onset infection; IVH II degree		
PCC	Normal	Normal	E. coli	34	Intrapartum caesarean section	Normal	Elevated inflammatory markers	-		
UCC	Ureoplasma spp. M. hominis	E. faecalis, E. coli	E. coli	36	Vaginal delivery	-	-	Cephalohematoma		
UCC	GBS	C. glabrata, C. albicans, E. faecalis, P. melaninogenica, C. koseri	E. coli	36	Intrapartum caesarean section	Normal	-	-		
PCC	C. albicans	C. albicans	C. albicans	37	Intrapartum caesarean section	Normal	-	-		
PCC	Normal	Normal	E. faecalis	37	Intrapartum caesarean section	Normal	-	-		
PCC	C. albicans	E. coli	Normal	37	Caesarean section	Normal	-	Mild respiratory distress		
PCC	Normal	E. coli	Normal	37	Intrapartum caesarean section	Normal	-	-		
PCC	Normal	Normal	E. coli	37	Vaginal delivery	-	-	-		
PCC	Normal	Normal	Normal	37	Vaginal delivery	-	-	-		
PCC	Normal	Normal	Normal	37	Intrapartum caesarean section	Normal	-	-		
PCC	Normal	Normal	Normal	38	Vaginal delivery	-	-	-		
PCC	Normal	Normal	Normal	38	Caesarean section	Normal	-	-		
PCC	C. parapsilosis, E. coli	E. faecalis, E. coli, P. bivia, Ureoplasma spp., M. hominis, K. pneumoniae	E. faecalis, K. pneumoniae	38	Intrapartum caesarean section	Normal	-	-		
PCC	E. faecalis, E. coli	E. coli	E. coli	38	Vaginal delivery	-	-	-		

PCC	Bacteroides spp., E. coli	E. coli, K. pneumoniae, E. faecalis, E. cloacae	E. faecalis	38	Vacuum extractor	-	-	Cephalohematoma
PCC	Normal	Normal	E. coli	38	Vaginal delivery	-	-	-
PCC	Normal	GBS	Normal	38	Vaginal delivery	-	-	Clavicle fracture
PCC	Normal	P. intermedia, P. bivia, G. vaginalis, GBS, E. coli	GBS, E. coli	38	Vaginal delivery	-	-	-
PCC	Normal	Normal	Normal	38	Caesarean section	Normal	-	-
PCC	Normal	Normal	Normal	38	Vaginal delivery	-	-	-
PCC	Normal	Normal	Normal	38	Caesarean section	Normal	-	-
PCC	G. vaginalis	Normal	C. albicans	39	Caesarean section	Normal	-	-
PCC	Normal	Normal	K. pneumonia, E. coli	39	Vaginal delivery	-	-	-
PCC	Normal	Normal	Normal	39	Intrapartum caesarean section	Normal	-	-
PCC	Normal	Normal	Normal	39	Vaginal delivery	-	-	-
PCC	Normal	E. coli	Normal	40	Intrapartum caesarean section	Normal	-	-
PCC	Normal	P. bivia, G. vaginalis	G. vaginalis	40	Vaginal delivery	-	-	-
PCC	C. albicans	Normal	Normal	40	Vaginal delivery	-	-	Mild respiratory distress
PCC	Normal	Normal	M. morganii, E. faecalis	40	Intrapartum caesarean section	Normal	-	-
PCC	Normal	Normal	Normal	40	Vaginal delivery	-	-	-
PCC	Normal	Normal	Normal	40	Vaginal delivery	-	-	-

UCC — ultrasound-indicated cervical cerclage; PCC — prophylactic cervical cerclage; RDS — respiratory distress syndrome. IVH — intraventricular hemorrhage; B. ovatus — Bacteroides ovatus; C. albicans — Candida albicans; C. parapsilosis — Candida parapsilosis; C. koseri — Citrobacter koseri; E. cloacae — Enterobacter cloacae; E. faecalis — Enterococcus faecalis; E. coli — Escherichia coli; GBS — Group B Streptococcus; G. vaginalis — Gardnerella vaginalis; K. pneumoniae — Klebsiella pneumoniae; M. hominis — Mycoplasma hominis; M. morganii — Morganella morganii; P. bivia — Prevotella bivia; P. intermedia — Prevotella intermedia; P. melaninogenica — Prevotella melaninogenica

# Part 2

### Cervical smears methodology

Cervical smears samples were collected and cultured for aerobic and anaerobic bacteria, and fungi on the following media:

- ij Shaedler Anaerobe Agar/S.A. KV Selektive Agar (VL), incubated at  $36 \pm 1$ °C for 40 h,
- ij Columbia blood (Ak) agar, incubated at 36  $\pm$  1°C for 15–40 h:
- ij Gardnerella agar (GV), incubated at  $36 \pm 1^{\circ}$ C for 15-40 h;
- ij Chocolate agar with POLYVITEX (BHI), incubated at  $36 \pm 1^{\circ}$ C for 15–40 h;
- ij MacConkey (Mc) medium, incubated at 36  $\pm$  1°C for 15–40 h;
- ij StreptoB medium, incubated at  $36 \pm 1^{\circ}$ C for 15-40 h;
- ij Sabouraud medium with chloramphenicol (SAB), incubated at  $30 \pm 1^{\circ}$ C for 15-40 h.

The Ak and BHI media were assessed after 24 h. If a negative result was obtained, the observation was prolonged by

72 h; if a positive result was obtained, the observation was prolonged by another 96 h. ChromID ESBL, ChromID VRE, ChromID MRSA, chromogenic medium for *Pseudomonas aeruginosa*, chromogenic medium for *Streptococcus aureus* and *Streptococcus saprophiticus* were used as necessary.

Smears for *Streptococcus agalactie* were obligatory collected from vulval vestibule and anus area between 34 and 37 week of gestation. The smears were cultured on the following media: Colombia blood agar (15–40 h incubation at  $36 \pm 1^{\circ}$ C), Chrom ID StreptoB medium (15–40 h incubation at  $36 \pm 1^{\circ}$ C) and Brain Heart Infusion Broth (24–48 h incubation at  $35 \pm 2^{\circ}$ C).

The culture results were classified as non-pathogenic or, if positive, containing the name of the identified microorganisms. All of the cultures for aerobic and anaerobic bacteria, and fungi were analysed in the microbiological laboratory of the 2<sup>nd</sup> Department of Obstetrics and Gynaecology, Medical University of Warsaw. Atypical bacteria were detected by Mycoplasma IST 2 testing (BioMérieux).

#### Part 3

#### Well-child visits

### Well-child visit in age of 6-9 weeks

- 1. Postnatal age:
- Postconceptional age (for children born before 37 + 0 week of qestation):
- 2. Weight\*: [g]
- 3. Length\*: [cm]
- 4. Head circumference\*: [cm]
- 5. Chest circumference\*: [cm]
- \*Assessment according to the sex-adjusted growth chart for polish population
- 6. Anterior fontanel: size
- Cranial sutures: width
- 7. Medications:
- 8. Screening tests assessing:
  - ij visual disorders:
    - hirschberg test
    - cover test
  - ij hearing disorders (assessment of hearing reactions and presence of hearing impairment risk factors):
  - ij congenital dysplasia of the hip:
  - ij cryptorchidism: testicles in scrotum/testicles in inguinal canal/impalpable
- Physical examination (pay special attention to: changes in oral cavity: Bohn's nodules, Epstein's pearls, congenital epulis, abnormalities of frenulum, lips and tongue)
  - ij skin
  - ij head
  - ij neck
  - ij eyes
  - ij ears
  - ij oral cavity/pharynx
  - ij lymph nodes
  - ij lungs
  - ij heart
  - ij abdomen
  - ij urogenital system
  - ij musculoskeletal system
  - ij nutrition status
- 10. Feeding (efficacy of breast feeding, frequency and volume of meals in case of formula feeding):
- 11. Neurodevelopmental assessment examination of muscle tension and primitive reflexes, assessment of developmental milestones:
- 12. Important data from parent history:
  - ij sucking difficulties
  - ij swallowing difficulties
  - ij apnea
  - ij vomiting
  - ij seizures
  - ij abnormal crying
  - ij no response to sounds

- ij other (behavior, activity, injuries, daily routine, who is a caregiver *etc.*)
- 13. Abnormalities in additional tests:
- 14. Recommendations:
- 15. Nutritional counseling, diet, vitamins:
- 16. Recommended consultations:
- 17. Recommended diagnostic tests:

### Well-child visit in age of 3-4 months

1. Postnatal age:

Postconceptional age (for children born before 37 + 0 week of gestation):

- 2. Weight\*: [g]
- 3. Length\*: [cm]
- 4. Head circumference\*: [cm]
- 5. Chest circumference\*: [cm]
- \*Assessment according to the sex-adjusted growth chart for polish population
- 6. Anterior fontanel: *size*
- Cranial sutures: width
- 7. Medications:
- 8. Screening tests assessing:
  - ij visual disorders:
    - strabismus
    - hirschberg test
    - cover test
  - ij hearing disorders (assessment of hearing reactions and presence of hearing impairment risk factors):
  - ij congenital dysplasia of the hip:
  - ij cryptorchidism: testicles in scrotum/testicles in inguinal canal/impalpable
- 9. Physical examination (pay special attention teething, abnormalities in oral cavity)
  - ij skin
  - ij head
  - ij neck
  - ij eyes
  - ij ears
  - ij oral cavity/pharynx
  - ij lymph nodes
  - ij lungs
  - ij heart
  - ij abdomen
  - ij urogenital system
  - ij musculoskeletal system
  - ij nutrition status
- Feeding (efficacy of breast feeding, frequency and volume of meals in case of formula feeding)
- 11. Neurodevelopmental assessment examination of muscle tension and primitive reflexes, assessment of developmental milestones:
- 12. Important data from parent history
  - ij sucking difficulties

- ij swallowing difficulties
- ij abnormal stools
- ij apnea
- ij vomiting
- ij seizures
- ij no turning head towards sound
- ij no bringing hands to the midline
- ij other (behavior, activity, injuries, daily routine, who is a caregiver *etc.*)
- 13. Abnormalities in additional tests:
- 14. Recommendations:
- 15. Nutritional counseling, diet, vitamins:
- 16. Recommended consultations:
- 17. Recommended diagnostic tests:

#### Well-child visit in age of 6 months

1. Postnatal age:

Postconceptional age (for children born before 37 + 0 week of gestation):

- 2. Weight\*: [g]
- 3. Length\*: [cm]
- 4. Head circumference\*: [cm]
- 5. Chest circumference\*: [cm]

\*Assessment according to the sex-adjusted growth chart for polish population

- 6. Anterior fontanel: size
- Cranial sutures: width
- 7. Medications:
- 8. Screening tests assessing:
  - ij visual disorders:
    - strabismus
    - hirschberg test
    - cover test
  - ij hearing disorders (assessment of hearing reactions and presence of hearing impairment risk factors):
  - ij congenital dysplasia of the hip:
  - ij cryptorchidism: testicles in scrotum/testicles in inquinal canal/impalpable
- Physical examination (pay special attention to teething, abnormalities in oral cavity, eating habits, feeding and drinking during night)
  - ij skin
  - ij head
  - ij neck
  - ij eyes
  - ij ears
  - ij oral cavity/pharynx
  - ij lymph nodes
  - ij lungs
  - ij heart
  - ij abdomen
  - ij urogenital system
  - ij musculoskeletal system

- ij nutrition status
- Feeding (efficacy of breast feeding, frequency and volume of meals in case of formula feeding, expanding the diet)
- Neurodevelopmental assessment assessment of developmental milestones
- 12. Important data from parent history
  - ij feeding difficulties
  - ij abnormal stools
  - ij apnea
  - ij vomiting
  - ij seizures
  - ij no reaction to bell ringing/phone/caregiver's voice
  - ij no interest in toys
  - ij no rolling-over
  - ij other (behavior, activity, injuries, daily routine, who is a caregiver *etc.*)
- 13. Abnormalities in additional tests:
- 14. Recommendations:
- 15. Nutritional counseling, diet, vitamins:
- 16. Recommended consultations:
- 17. Recommended diagnostic tests:

#### Well-child visit in age of 9 months

1. Postnatal age:

Postconceptional age (for children born before 37+0 week of gestation):

- 2. Weight\*: [g]
- 3. Length\*: [cm]
- 4. Head circumference\*: [cm]
- 5. Chest circumference\*: [cm]
- \*Assessment according to the sex-adjusted growth chart for polish population
- 6. Anterior fontanel: size Cranial sutures: width
- 7. Medications:
- 8. Screening tests assessing:
  - ij visual disorders:
    - strabismus
    - hirschberg test
    - cover test
  - ij hearing disorders (assessment of hearing reactions and presence of hearing impairment risk factors):
  - ij congenital dysplasia of the hip:
  - ij cryptorchidism: testicles in scrotum/testicles in inguinal canal/impalpable
- Physical examination (pay special attention to teething, abnormalities in oral cavity, eating habits, feeding and drinking during night, hygienic habits, teeth brushing with fluoride paste)
  - ij skin
  - ij head
  - ij neck

- ij eyes
- ij ears
- ij oral cavity/pharynx
- ij lymph nodes
- ij lungs
- ij heart
- ij abdomen
- ij urogenital system
- ij musculoskeletal system
- ij nutrition status
- Feeding (efficacy of breast feeding, frequency and volume of meals in case of formula feeding, expanding the diet)
- Neurodevelopmental assessment assessment of developmental milestones
- 12. Important data from parent history
  - ij feeding difficulties
  - ij abnormal stools
  - ij micturition difficulties, wet diaper all the time
  - ij lack of urine stream
  - ij frequent infections
  - ij apnea
  - ij vomiting
  - ij seizures
  - ij no reaction to quiet sounds
  - ij no reduplicated babbling repeating the same syllable (e.g. da-da-da).
  - ij stereotypic behavior (e.g. rhytmical nodding)
  - ij no rolling-over
  - ij other (behavior, activity, injuries, daily routine, who is a caregiver etc.)
- 13. Abnormalities in additional tests:
- 14. Recommendations:
- 15. Nutritional counseling, diet, vitamins:
- 16. Recommended consultations:
- 17. Recommended diagnostic tests:
- 18. Vaccinations according to immunization schedule:

## Well-child visit in age of 12 months

- 1. Postnatal age:
- Postconceptional age (for children born before 37+0 week of gestation):
- 2. Weight\*: [g]
- 3. Length\*: [cm]
- 4. Head circumference\*: [cm]
- 5. Chest circumference\*: [cm]
- 6. Blood pressure\*: [mmHg]
- \*Assessment according to the sex-adjusted growth chart for polish population
- 7. Anterior fontanel: size Cranial sutures: width
- 8. Medications:
- 9. Screening tests assessing:

- ij visual disorders:
  - strabismus
  - hirschberg test
  - cover test
- ij hearing disorders (assessment of hearing reactions and presence of hearing impairment risk factors):
- ij congenital dysplasia of the hip:
- ij cryptorchidism: testicles in scrotum/testicles in inguinal canal/impalpable
- Physical examination (pay special attention to teething, abnormalities in oral cavity, eating habits, feeding and drinking during night, hygienic habits, teeth brushing with fluoride paste)
  - ij skin
  - ij head
  - ij neck
  - ij eyes
  - ij ears
  - ij oral cavity/pharynx
  - ij lymph nodes
  - ij lungs
  - ij heart
  - ii abdomen
  - ij urogenital system
  - ij musculoskeletal system
  - ij nutrition status
- Feeding (efficacy of breast feeding, frequency and volume of meals in case of formula feeding, expanding the diet, introduction of elimination diets)
- 12. Neurodevelopmental assessment assessment of developmental milestones
- 13. Important data from parent history
  - ij feeding difficulties
  - ij abnormal stools
  - ij micturition difficulties, wet diaper all the time
  - ij lack of urine stream
  - ij frequent infections
  - ij apnea
  - ij vomiting
  - ij seizures
  - ij no reaction to quiet sounds
  - ij no reduplicated babbling repeating the same syllable (e.g. da-da-da).
  - ij stereotypic behavior (e.g. rhytmical nodding)
  - ij no rolling-over
  - ij other (behavior, activity, injuries, daily routine, who is a caregiver etc.)
- 14. Abnormalities in additional tests:
- 15. Recommendations:
- 16. Nutritional counseling, diet, vitamins:
- 17. Recommended consultations:
- 18. Recommended diagnostic tests:

- 19. Ophthalmic examination:
- 20. Vaccinations according to the immunization schedule:

### Well-child visit in age of 24 months

- Postnatal age:
   Postconceptional age (for children born before 37+0 week of gestation):
- 2. Weight\*: [q]
- 3. Length\*: [cm]
- 4. Head circumference\*: [cm]
- 5. Blood pressure\*: [mmHg]
- 6. Body mass index\*: [kg/m<sup>2</sup>]
- \*Assessment according to the sex-adjusted growth chart for polish population
- 7. Anterior fontanel: *size* Cranial sutures: *width*
- 8. Medications:
- 9. Screening tests assessing:
  - ij visual disorders:
    - strabismus
    - hirschberg test
    - cover test
  - ij hearing disorders (assessment of hearing reactions and presence of hearing impairment risk factors):
  - ij congenital dysplasia of the hip:
  - ij cryptorchidism: testicles in scrotum/testicles in inguinal canal/impalpable
- Physical examination (pay special attention to teething, abnormalities in oral cavity, eating habits, feeding and drinking during night, hygienic habits, teeth brushing with fluoride paste)
  - ij skin
  - ij head
  - ij neck
  - ij eyes
  - ij ears

- ij oral cavity/pharynx
- ij lymph nodes
- ij lungs
- ij heart
- ij abdomen
- ij urogenital system
- ij musculoskeletal system
- ij nutrition status
- Feeding (frequency and volume of meals and drinks, introduction of elimination diets)

Important data from parent history

- ij feeding difficulties
- ij abnormal stools
- ij micturition difficulties, using diapers
- ij lack of urine stream
- ij frequent infections
- ij apnea
- ij vomiting
- ij seizures
- ij no age-appropriate speech development: two-word sentences/speaking in third person
- ij no age-appropriate understanding of speech: showing parts of body/understanding simple instructions
- ij behavior disorders
- ij sleep disorders
- ij no first steps after the age of 15 months/no going up the stairs holding a rail
- ij other (behavior, activity, injuries, daily routine, who is a caregiver etc.)
- 12. Abnormalities in additional tests:
- 13. Recommendations:
- 14. Nutritional counseling, diet, vitamins:
- 15. Recommended consultations:
- 16. Recommended diagnostic tests:
- 17. Vaccinations according to the immunization schedule: