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Addendum of Changes based on Internal Examiner's

This document addresses the changes requested by Internal Examiner 1. The changes cannot be made directly to the paper, as it has already been accepted for publication.

- The case definition is mentioned in the protocol. It cannot be included in the final paper as it has been accepted for publication already.
- How often are patients seen in the clinic in one year:
 - Patients colonised with *Pseudomonas aeruginosa* are seen on a monthly basis.
 - Patients colonised with Staphylococcus aureus are seen every 2 months
- Mixed organism identification- If a patient cultured any organism multiple times, then only the first culture was included in the prevalence analysis.
- *H.influenzae* type b replacement: this data is not available for the sample type tested in this study. Currently, surveillance is only being performed for isolates from sterile sites.
- Protocols used for management of Cystic Fibrosis Patients: Discussion on the diagnosis and management of Cystic Fibrosis is complex and not within the scope of this paper. The paper makes reference to the Cystic Fibrosis Consensus Document which explains these in detail. Also, the Cystic Fibrosis Consensus Documents used before 2007 could not be accessed and thus no specific change in antimicrobial susceptibility patterns can be attributed to a change in management. The subsequent document was published in 2012 and therefore management did not change significantly from 2007- 2010.
- Ethics Number: The Ethics clearance certificate was submitted with the original submission. The Ethics certificate number is M120908.