

Supporting information for:

**Facemask Analyses for the Non-Invasive Detection of Chronic and Acute
P. aeruginosa Lung Infections Using Nanoparticle-based Immunoassays**

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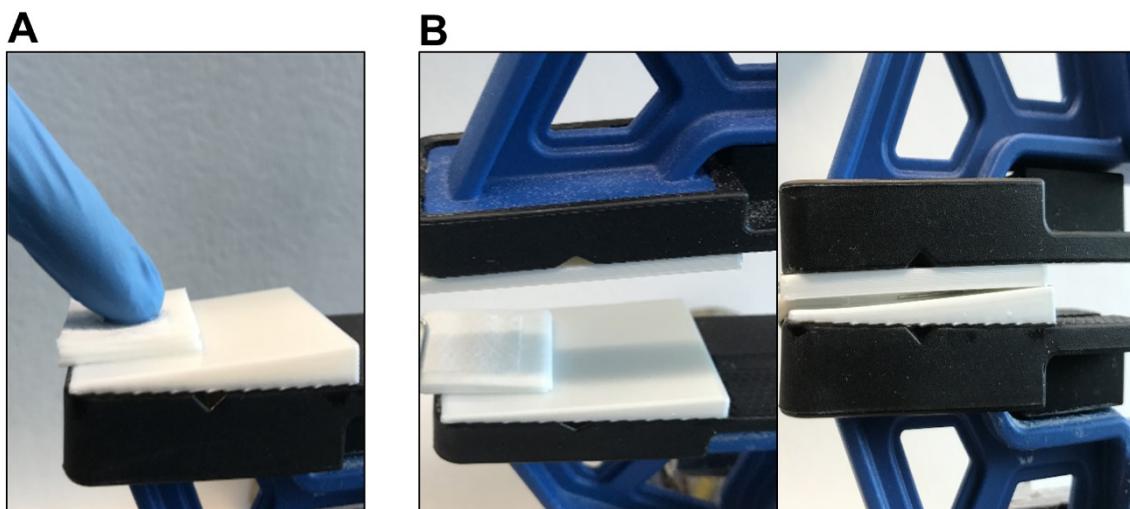


Figure S1. Procedures for wetting and blocking polypropylene by low and high pressure. Polypropylene pieces with different degree of hydrophilicity are obtained by placing them onto blotting papers soaked with PBS or PBS-BSA and applying (A) lightly pressing with the finger or (B) high pressure using a clamp tool for 10 s.

Table S1: Bacterial etiology of the respiratory infections in the patients included in the study.

Patient	Bacterial infection	Infection status	Chronic lung condition
1	<i>Streptococcus pneumoniae</i>	Acute	COPD
2	<i>Klebsiella pneumoniae</i>	Acute	COPD
3	<i>Streptococcus pneumoniae</i>	Acute	COPD
4	<i>Moraxella catarrhalis</i>	Acute	COPD
5	<i>Bordetella bronchiseptica</i>	Acute	COPD
6	<i>Pseudomonas aeruginosa/Staphylococcus aureus*</i>	Chronic/Acute*	COPD
7	<i>Pseudomonas aeruginosa</i>	Chronic	COPD
8	<i>Pseudomonas aeruginosa</i>	Chronic	COPD
9	<i>Pseudomonas aeruginosa</i>	Chronic	Diaphragmatic hernia
10	<i>Pseudomonas aeruginosa</i>	Chronic	Bronchiectasis
11	<i>Pseudomonas aeruginosa</i>	Acute	COPD

*In this patient with a *P. aeruginosa* chronic infection, a sputum culture test conducted at the time of facemask sampling revealed an active respiratory infection caused by *Staphylococcus aureus*. COPD: chronic obstructive pulmonary disease.