Supplementary File 1: Perinatal Risk Factor Assessment Tool

(Developed for: Development and Validation Study of RRTI Prediction Model in Preterm Infants)

Section A: Neonatal Demographics

1. **Gender:**
   □ Male
   □ Female
2. **Gestational Age:**
   ☐ 32 weeks 0 days - 33 weeks 6 days ($33^{0}/_{7}$ - $33^{6}/_{7}$)
   ☐ 34 weeks 0 days - 36 weeks 6 days ($34^{0}/_{7}$ - $36^{6}/_{7}$)
3. **Birth Weight:**
   □ <1500 g
   □ 1500-1999 g
   □ 2000-2499 g
   □ ≥2500 g
4. **Small for Gestational Age (SGA):**
   □ Yes
   □ No

Section B: Perinatal Factors

5. **Intrauterine Infection:**
   □ Confirmed (maternal CRP>10mg/L + fetal tachycardia)
   □ Not confirmed
6. **Delivery Mode:**
   □ Vaginal Delivery
   □ Cesarean Section
7. **Postnatal Mechanical Ventilation:**
   □ Invasive (endotracheal intubation)
   □ Non-invasive (CPAP/HFNC)
   □ Not required
8. **Neonatal Anemia Diagnosis:**
   □ Hb ≤140 g/L (1st week) / ≤100 g/L (>1mo)
   □ No anemia

Section C: Immunological & Environmental Factors

9. **Family Allergy History:**
   □ Yes (parents/siblings with asthma, allergic rhinitis or eczema)
   □ No
10. **Infant Allergic Predisposition:**
    □ Clinical manifestations (≥2 wheezing episodes OR food/drug reaction)
    □ No evidence
11. **Maternal Passive Smoking Exposure:**
    □ Exposure ≥1/week during pregnancy
    □ No exposure

12. **Prolonged Antibiotic Therapy:**
    □ >30 cumulative days in first 6 months
    □ ≤30 days

Section D: Infectious Exposure

13. **Household Pet Contact:**
    □ Yes (cohabiting dogs/cats/birds)
    □ No
14. **Chronic Respiratory Disease Contact:**
    □ Regular contact with TB/COPD/bronchiectasis patients
    □ No contact
15. **Laboratory-Confirmed RSV Infection:**
    □ Positive PCR/NASBA test during index hospitalization
    □ Negative

Data Collection Protocol

Variable Verification	**Source Document**
Electronic Medical Record No.	_____
Data Collector Signature	_____
Date Collected (YYYY-MM-DD)	_____