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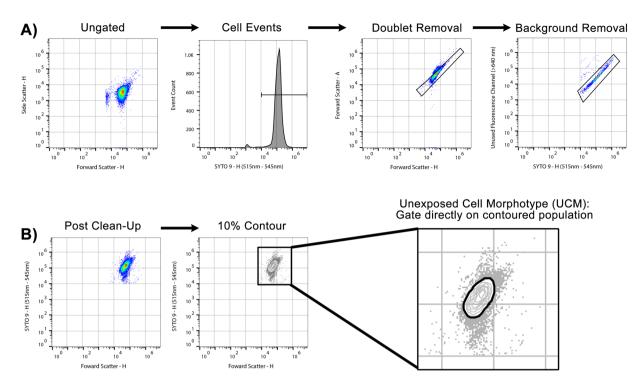
## **OPEN Author Correction: Rapid** susceptibility profiling of carbapenem-resistant Klebsiella pneumoniae

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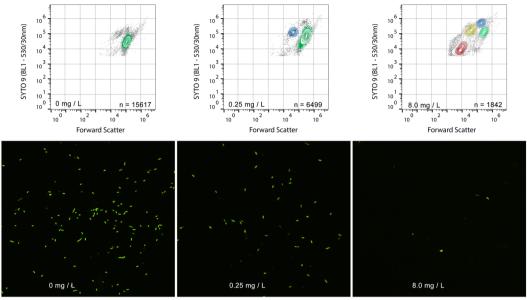
In this Article, the images for Figures 2 and 3 were inadvertently switched. The correct Figures 2 and 3 appear below with their accompanying figure legends as Figures 1 and 2, respectively. The Figure legends are correct.

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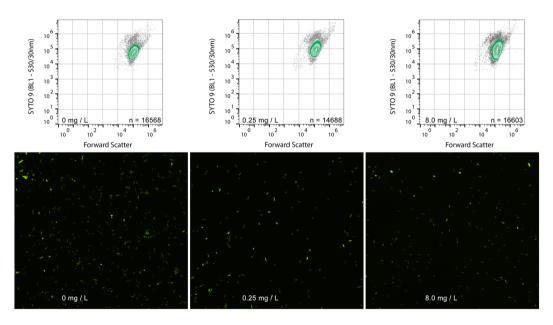


**Figure 1.** Standardised gating applied to raw data. (**A**) Collected events were gated to include only those with a SYTO<sup>®</sup>9 (BL1 - 530/30 nm) fluorescence of 10<sup>4</sup> arbitrary fluorescence units or higher. Doublets were removed via a FSC-A vs FSC-H plot. Background was removed by plotting specific SYTO<sup>®</sup>9 fluorescence (BL1 - 530/30) against an unused channel (BL3 - 640 LP). (**B**) In the antibiotic unexposed sample, 10% nearest-neighbour contouring was applied, and a gate (referred to as Unexposed Cell Morphotype) was set to include all clustered events. This gate was then applied to all samples across the antibiotic dilution series.

## A) ATCC 700603 - Control Sensitive Isolate



## B) K8 - Highly Resistant Clinical Isolate



**Figure 2.** Susceptibility to meropenem can be identified by AFC by observing a susceptibility-associated signature. (**A**) Exposure of the *K. pneumoniae* susceptible type strain (ATCC 700603) increased forward scatter, SYTO®9 fluorescence, reduced overall event numbers, and formed a new contouring focus at the isolate's MIC (0.25 mg/L). At 32 × MIC, a total of four contouring foci were observed, with an overall shift towards low forward scatter, low fluorescent debris. The progression of these features, when observed in combination, constitutes the susceptibility-associated signature. Colouring on biaxial plots indicates separate contouring foci. Fluorescence micrographs (acquired at 60x magnification) show reduced overall cell numbers and increase aberrant cell morphotypes as meropenem concentration increases. (**B**) Exposure of highly resistant clinical *K. pneumoniae* strain K8 to meropenem shows an absence of susceptibility-associated signature across clinically relevant meropenem concentrations by flow cytometer bi-axial plot, and an absence of aberrant cell morphotypes by fluorescence microscopy.

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