

Table S1. EUCAST and CLSI breakpoints used to interpret *Achromobacter* MICs in the study.

Antimicrobial agent	Breakpoints	
	EUCAST ^a	CLSI ^b
Piperacillin	≤8 / >16	≤16/≥128
Piperacillin -tazobactam	≤4 / >4	≤16/≥128
Aztreonam	≤4/ >8	≤8/32
Cefepime	≤4/ >8	8/32
Ceftazidime	≤4/ >8	8/32
Ceftazidime - avibactam	≤8/ >8	≤8/≥16
Ceftolozane - tazobactam	≤4/ >4	≤4/≥16
Cefiderocol	≤2/ >2	≤4/≥16
Imipenem	≤2/ >2	≤4/16
Imipenem - relebactam	≤2/ >2	≤2/≥8
Meropenem	≤1 / > 4	≤4/16
Meropenem - vaborbactam	≤8/ >8	NA
Ciprofloxacin	≤0.25/ >0.5	≤1/≥4
Levofloxacin	≤0.5/ >1	≤2/≥8
Colistin	≤2/ >2	≤2/≥4
Fosfomicin	≤8/ >8	NA
Gentamicin	≤0.5/ >0.5	4/16
Amikacin	≤1/ >1	16/64
Tobramycin	≤0.5/ >0.5	4/16
SXT ^c	≤ 0.125 / > 0.125	2/4
Tigecycline	≤0.5/ >0.5	NA
Eravacycline	0.5	NA

^aMIC were interpreted according to EUCAST breakpoints defined for *A. xylosoxidans* for piperacillin-tazobactam, meropenem and trimethoprim-sulfamethoxazole (SXT), for *Pseudomonas* for colistin, for Enterobacterales for eravacycline and according to pharmacokinetic/pharmacodynamic (non-species-related) EUCAST breakpoints for the other antibiotics. ^b Results were interpreted according to CLSI breakpoint defined for other non-Enterobacterales and for *P. aeruginosa* in the absence of breakpoints (for ceftazidime-avibactam, ceftolozane-tazobactam, imipenem-relebactam, cefiderocol and colistin). ^cSXT interpretation was based on disk diffusion method and MIC values. Different CLSI vs EUCAST breakpoints for sensitivity have been highlighted in grey. NA: not applicable.