Table S5. Key result statements from data-to-paper created "Treatment Policy" papers, together with the used statistical tests (in parenthesis).

Paper	Policy effect on treatment	Policy effect on clinical outcome
Original	"Nearly two thirds of infants in the pre-guideline cohort received endotracheal suctioning with recovery of meconium compared to less than a third of infants in the post-guideline cohort (p<0.01)." (Chi-square)	"Though a higher proportion of the pre-guideline cohort were admitted to the NICU for respiratory issues compared to the post-guideline cohort, the two groups did not differ significantl y with regard to morbidity and therapies." (<i>t-test</i>)
C1	"[] significant changes in interventions [] including a decrease in the use of endotracheal suction." (Chi-square)	"[] no significant differences in neonatal outcomes were observed between the pre and post guideline groups." (ANOVA)
C2	"Following the policy change, [] decrease in the application of positive pressure ventilation (PPV) []" (Linear regression)	"[] the policy change was associated with potential increases in the length of stay in the neonatal intensive care unit" (<i>Linear regression</i>)
C3	"[] resulted in significant changes in therapies , with a decrease in endotracheal suctioning and an increase in the recovery of meconium." (<i>Chi-square</i>)	"[] did not lead to measurable improvements in neonatal outcomes , as assessed by APGAR scores, length of Neonatal Intensive Care Unit stay, and SNAPPE-II scores." (<i>Linear regression</i>)
C4	"[] we observed a significant reduction in the use of endotracheal suctioning in adherence to the new guidelines." (<i>Chi-square</i>)	"[] no significant differences were found in the length of stay or Apgar scores between the pre-and post-guideline periods." (<i>t-test</i>)
C5	"[] revealed a significant shift in the use of endotracheal suction following the revised guidelines, []" (<i>Chi-square</i>)	"[] no significant difference in APGAR5 scores was observed." (<i>t-test</i>)
C6	"[] revealed significant changes in treatment approaches following policy revisions." (<i>Chi-square</i>)	"[] no statistically significant differences in neonatal outcomes were observed between the pre-and post-guideline implementation groups." (Mann-Whitney U test)
C7	"[] were associated with a significant decrease in the use of endotracheal suction, without a notable impact on the usage of positive pressure ventilation." (Chi-square)	"[] no significant differences in neonatal outcomes, including Neonatal Intensive Care Unit (NICU) length of stay and Apgar scores at 1 and 5 minutes." (Mann-Whitney U test)
C8	"[] revealed significant changes in NICU therapies following the policy change, specifically a marked decrease in endotracheal suction." (Chi-square)	"[] neonatal outcomes did not exhibit statistically a significant differences." (t-test)
C9	"[] led to a significant decrease in the use of endotracheal suction [] use of positive pressure ventilation (PPV) did not show a significant change." (Logistic regression)	"[] no statistically significant differences in the length of stay in the NICU or the Apgar score at 1 minute between the pre- and post-guideline cohorts." (<i>Linear regression</i>)
C10	"[] a significant decrease in the use of endotracheal suction, with a trend towards decreased usage of positive pressure ventilation." (Chi-square)	"[] no significant differences in length of stay or APGAR scores between the two groups." (<i>Linear regression</i>)