On-line Table: Clinical characteristics of infants with HPeV meningoencephalitis

Case	Age/Sex/Gestational Age	Hospital/Intensive Care Unit Stay (Nights)	Presenting Symptoms	CSF Studies	Timing of MRI with Respect to Symptom Onset	Electroencephalography	Follow-Up
1	20 Days/M/35 wk	9/5	Irritable, poor feeding, abdominal distension, abnormal eye movements, hypothermia	WBC: 1 Protein: 91 Glucose: 109	Day 4	Multifocal epileptogenicity	
2	10 Days/M/39 wk	5/0	Irritable, poor feeding, fever	WBC: 2 Protein: 70 Glucose: 39	Day 4	Multifocal epileptogenicity	Clinically well (6 wk)
3	9 Days/F/39 wk	4/3	Poor feeding, vomiting, apnea, fever 4-extremity rhythmic jerking Hypoglycemia (serum glucose, 44)	WBC: 3 Protein: 77 Glucose: 38	Day 0	Multifocal epileptogenicity	Clinically well (2 mo)
4	35 Days/M/33 5/7 wk	11/11	Irritable, poor feeding, hypothermia	WBC: 2 Protein: not reported; glucose: 80 Stool, serum HPeV+ (not CSF)	Day 5	No seizures	
5	6 Days/F/39 wk	8/7	Irritable, fever Rhythmic jerking of left extremities	WBC: 3 Protein: 53 Glucose: 45	Day 1	Excess multifocal sharp waves for gestational age	
6	10 Days/M/38 4/7 wk	9/5	Poor feeding, lethargy, fever 4-extremity rhythmic jerking	WBC: 0 Protein: 46 Glucose: 57	Day 1	Status epilepticus	

Note:—WBC indicates white blood cell.