

Supplementary Table 1: RIME, related entities, and their relationship to SJS/TEN

Diagnosis	Mucosal involvement	Cutaneous features	Implication of <i>Mycoplasma pneumoniae</i>	Part of SJS/TEN Spectrum?
Fuchs syndrome (Mucosal Respiratory syndrome)	Oral > ocular, sometimes genital mucosa involved	None	Yes, <i>Herpes simplex</i> also implicated	Variant of EM Majus and SJS
EMM	Multiple mucosae involved	Typical and atypical targets often affecting extremities > trunk	Yes, <i>Herpes simplex</i> is the most common	Yes
MPAM	Prominent mucosal involvement: oral (94%) > ocular(82%) > genital (63%)	Absent to sparse, respiratory symptoms	Yes	Considered separate entity
MIRM	Prominent mucositis (especially oral)	One-half have sparse skin involvement with targetoid lesions, vesiculobullous lesions, and scattered atypical targets.	Yes	No
RIME	Prominent mucosal	Vesiculobullous/targetoid lesions, morbilliform eruptions to transient macular or serpiginous annular eruptions	Yes plus many other pathogens*	No

EM: erythema multiforme; EMM: erythema multiforme major; MP: *Mycoplasma pneumoniae*; MIRM: *Mycoplasma pneumoniae*-induced rash and mucositis; MPAM: *Mycoplasma pneumoniae*-associated mucositis, NOS: not otherwise specified; RIME: reactive infectious mucocutaneous eruption; SJS: Stevens–Johnson syndrome; TEN: toxic epidermal necrolysis.

*Pathogens commonly implicated in RIME apart from *Mycoplasma pneumoniae* include *Chlamydomphila pneumoniae*, human metapneumovirus, human parainfluenzavirus 2, rhinovirus, enterovirus, and influenza B virus.