Antimicrobial Susceptibility Report January 1, 2022 to December 31, 2022 North East LTC (Excluding Hospitals)

Urinary Tract Pathogens (in Order of Frequency) - % Susceptible

Organism	Number of Isolates	Amox clavulanic	Ampicillin	Cefazolin (1)	Ceftazidime	Ceftriaxone	Ciprofloxacin	Fosfomycin	Gentamicin	Meropenem	Nitrofurantoin	Trimethoprim- Sulfamethoxazole
E. coli ^	978	69	50	77		79	50	92	93	100	94	71
Enterococcus species ^^^^	292											
Klebsiella pneumoniae *	253	89		89		89	77		97	100	30	87
Proteus mirabilis +	177	93	84	94		95	69		92	100		80
Group B Streptococcus ^^	79											
Pseudomonas aeruginosa	57				96		91		98			

Organism Notes:

* Includes ESBL and AMP-C isolates (11.1% of total Klebsiella pneumoniae isolates identified as ESBL and AMP-C).

^ Includes ESBL and AMP-C isolates (20.3% of total E.coli isolates identified as ESBL and AMP-C).

M This isolate is predictably susceptible to Penicillin.

Clindamycin, Trimethoprim/Sulfamethoxazole and all Cephalosporins are ineffective against Enterococcus species. Enterococcus isolates recovered from urine are generally susceptible to amoxicillin and nitrofurantoin. Susceptibility to Amoxicillin is 95.7% and to Nitrofurantoin is 94.9%

+ Includes ESBL and AMP-C isolates (5.1% of total Proteus mirabilis isolates identified as ESBL and AMP-C).

Antibiotic Notes:

(1) Cefazolin interpretation predicts results for Cephalexin (Keflex) in accordance with CLSI standards for urinary sites only (not systemic).

All Other Specimen Types excluding (Urines and Surveillance) - Organisms in Order of **Frequency - % Susceptible**

Organism	Number of Isolates	Cefazolin	Ceftazidime	Ciprofloxacin	Clindamycin	Cloxacillin	Erythromycin	Gentamicin	Tetracycline (2)	Trimethoprim- Sulfamethoxazole
Staphylococcus aureus ^^^	331	70 n:297			61 n:297	70 n:297	53 n:297		99 n:297	100 n:294
Pseudomonas aeruginosa	73		95	84				92		
Group B Streptococcus ^^	53									

Organism Notes:

^ This isolate is predictably susceptible to Penicillin.

MRSA is resistant to all B-Lactams (penicillins, cephalosporins, B-lactam/B-lactamase inhibitor combinations, and carbapenems). MRSA constitutes 28.4% of total Staphylococcus aureus isolates identified.

Antibiotic Notes:

(2) Organisms that are susceptible to Tetracycline are also considered susceptible to Doxycycline.

General Notes:

Antibiogram results, patient risk factors for resistant organisms, and resistance epidemiology should be considered together to help guide empiric treatment of initial infections. Treatment should be re-evaluated as additional information from culture and sensitivity become available.

Calculation of results based on first isolate per patient.

