Antimicrobial Susceptibility Report January 1, 2023 to December 31, 2023 Toronto Central Out Patient (Excluding Hospitals)

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

Organism	Number of Isolates	Amox clavulanic	Ampicillin	Cefazolin (1)	Ceftriaxone	Ciprofloxacin	Fosfomycin	Gentamicin	Meropenem	Nitrofurantoin	Trimethoprim- Sulfamethoxazole
E. coli ^	14048	82	59	86	90	70	98	93	100	98	78
Enterococcus species ^^^^	3985										
Group B Streptococcus ^^	2497										
Klebsiella pneumoniae *	2351	92		92	95	87		98	100	28	91
Proteus mirabilis +	812	98 n:811	83 n:811	94 n:811	99 n:811	92 n:811		95 n:811	100 n:811	n:811	86 n:811
Staphylococcus saprophyticus ^^^	403										

Organism Notes:

* Includes ESBL and AMP-C isolates (5.1% of total Klebsiella pneumoniae isolates identified as ESBL and AMP-C).

^ Includes ESBL and AMP-C isolates (9.9% of total E.coli isolates identified as ESBL and AMP-C).

M This isolate is predictably susceptible to Penicillin.

Acute and uncomplicated urinary tract infections due to Staphylococcus saprophyticus will respond to commonly used antibiotics including Nitrofurantoin, Trimethoprim-Sulfamethaxazole and Fluoroquinolones.

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 97.0% and to Nitrofurantoin is 95.2%

+ Includes ESBL and AMP-C isolates (1.0% 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	Tetracycline (2)	Trimethoprim- Sulfamethoxazole
Group A Streptococcus ^^	5779								
Staphylococcus aureus ^^^	1695	86			78	86	66	94	99
Pseudomonas aeruginosa	432		95 n:428	87 n:428					
Group B Streptococcus ^^	210								

Organism Notes:

[^] This isolate is predictably susceptible to Penicillin.

^ Includes Methicillin Resistant S.aureus (MRSA). MRSA is resistant to all B-Lactams (penicillins, cephalosporins, B-lactam/B-lactamase inhibitor combinations, and carbapenems). MRSA constitutes 13.5% of total Staphylococcus aureus isolates identified.

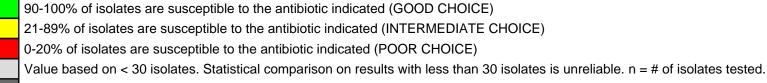
Antibiotic Notes:

(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.



Antibiotic susceptibility testing is not typically performed on the organism.