

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 ^	498	73 n:497	52 n:497	81 n:497		87 n:497	63 n:497	97 n:497	91 n:497	100 n:497	98 n:497	73 n:497
Enterococcus species ^^^	157											
Klebsiella pneumoniae *	156	87		87		89	85		100	100	38	86
Proteus mirabilis +	116	97 n:115	79 n:115	86 n:115		99 n:115	87 n:115		93 n:115	100 n:115		87 n:115
Group B Streptococcus ^^	47											
Pseudomonas aeruginosa	43				98		91					

Organism Notes:

- * Includes ESBL and AMP-C isolates (11.5% of total Klebsiella pneumoniae isolates identified as ESBL and AMP-C).
- ^ Includes ESBL and AMP-C isolates (13.3% of total E.coli isolates identified as ESBL and AMP-C).

^^^ 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 97.9% and to Nitrofurantoin is 96.5%

+ Includes ESBL and AMP-C isolates (0.0% 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
Staphylococcus aureus ^^^	246	73 n:227			66 n:227	73 n:227	54 n:226	92 n:226	100 n:227
Pseudomonas aeruginosa	87		93	84					
Group B Streptococcus ^^	<30								

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 27.6% 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.

90-100% of isolates are susceptible to the antibiotic indicated (GOOD CHOICE)

21-89% of isolates are susceptible to the antibiotic indicated (INTERMEDIATE CHOICE)

0-20% of isolates are susceptible to the antibiotic indicated (POOR CHOICE)

Value based on < 30 isolates. Statistical comparison on results with less than 30 isolates is unreliable. n = # of isolates tested.

Antibiotic susceptibility testing is not typically performed on the organism.

M This isolate is predictably susceptible to Penicillin.