

## Community Hospital AntibioGram (Data Compiled 1/1/2022 through 12/31/2022)

	Ampicillin	Amox/Clav	Amp/Sulbactam	Oxacillin	Pip/Tazobactam	Cefazolin (1st)	Cefotaxime (3rd)	Ceftriaxone (3rd)	Ceftazidime (3rd)	Cefepime (4th)	Erythromycin	Gentamicin	Tobramycin	Levofloxacin	Ciprofloxacin	Doxycycline	Tetracycline	Trim/Sulf	Clindamycin	Vancomycin	# of Isolates	
<b>Gram Negative</b>																						
Citrobacter freundii		0				0	86	86	82	100		93	93	100	100							28
Enterobacter cloacae complex		0				0	81	81	81	96		99	98	99	98			90				84
Escherichia coli	64	89	70		98	94	96	96	96	96		94	95	89	90			83				2039
Klebsiella (Enterobacter) aerogenes		0				0	94	93	91	100		100	100	100	100			100				47
Klebsiella oxytoca		91	68			72	91	91	91	91		91	91	100	100			86				71
Klebsiella pneumoniae		97	89		99	97	98	98	98	98		98	99	98	98			94				353
Morganella morganii	7	7	7		100	7	100	100	100	100		94	94	94	94			87				16
Proteus mirabilis	84	100	94		100	99	99	99	99	99		88	88	93	92			83				161
Pseudomonas aeruginosa					99				95	93		96	100	91	95							160
Serratia marcescens		0				0	88	88	88	88		100	88	94	100							16
<b>Gram Positive</b>																						
Enterococcus faecalis	99											88*		92	91		31			100		205
Staphylococcus aureus (MRSA)				0							15					98	88	98		100		89
Staphylococcus aureus (MSSA)				99							76			100		100	98	100	87	100		310
Staphylococcus epidermidis				34							47			68	68		79	75	85	100		118
Staphylococcus lugdunensis				96							95			96	86		100		95	100		28
Staphylococcus saprophyticus				21										100	100		100			100		33
Streptococcus pneumoniae											85**			100			92	92	100			13

Shaded cells indicate drug is inappropriate for empiric therapy.

Blank (non-shaded) cells indicate potentially appropriate for treatment, but local sensitivity data is not available.

MRSA Prevalence 22%

CLSI recommends testing a minimum of 30 isolates per organism. Use results with caution.

Ampicillin may be used to predict results for amoxicillin.

Erythromycin may be used to predict results for azithromycin.

\*Gentamicin for synergy only, should not be used as monotherapy for gram positive organisms.

\*\*For patients with CAP, a beta-lactam should be used in combination with azithromycin for adequate coverage of streptococcus pneumoniae.



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