Community Hospital Antibiogram (Data Compiled 1/1/2023 through 12/31/2023)

	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
Gram Negative																					
Citrobacter freundii		0				0	80	80	80	98		98	100	93	98						40
Enterobacter cloacae complex		0				0	80	80	79	97		98	98	96	96			95			100
Escherichia coli	63	88	72		98	93	95	95	95	95		93	93	89	89			83			2020
Klebsiella (Enterobacter) aerogenes		0				0	88	88	88	98		100	100	100	100			100			45
Klebsiella oxytoca		90	70			83	91	91	91	91		95	95	100	100			90			90
Klebsiella pneumoniae		93	84		96	92	93	93	93	93		96	95	95	94			89			430
Proteus mirabilis	90	100	96		100	99	100	100	100	100		94	94	93	89			92			180
Pseudomonas aeruginosa					99				94	95		98	100	87	91						160
Serratia marcescens		0				0	88	97	100	100		100	82	100	100			100			35
Gram Positive																					
Enterococcus faecalis	99											88*		98	96		90			99	190
Staphylococcus aureus (MRSA)				0							15					99	86	100		100	85
Staphylococcus aureus (MSSA)				100							76					100	94	100	86	100	355
Staphylococcus epidermidis				45							50			78	77		83		84	99	150
Staphyloccocus lugdunensis				90							86			100	90		97		86	100	30

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 19%

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. Not enough isolates to report.

Community HOSPITAL

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Community Hospital Urinary Antibiogram (Data Compiled 1/1/2023 through 12/31/2023)

For Empiric Treatment of Uncomplicated Urinary Tract Infections (UTIs)

	Ampicillin	Amox/Clavulanate	Amp/Sulbactam	Pip/Tazobactam	Cefazolin	Cefotaxime	Ceftriaxone	Ceftazidime	Cefepime	Gentamicin	Tobramycin	Levofloxacin	Ciprofloxacin	Tetracycline	Nitrofurantoin	Trim/Sulf	Vancomycin	# of Isolates
Gram Negative																		
Enterobacter cloacae complex		0			0	76	76	74	95	97	97	95	95		46	93		60
Escherichia coli	64	89	73	98	93	95	95	95	95	93	94	89	89		96	83		1785
Klebsiella (formerly Enterobacter) aerogenes		0			0	87	87	87	97	100	100	100	100		24	100		30
Klebsiella oxytoca		91	72		82	91	91	91	91	94	100	100	100		82	88		70
Klebsiella pneumoniae		94	83	96	91	93	93	93	97	96	95	95	94		42	88		350
Proteus mirabilis	89	100	95	100	99	100	100	100	100	92	92	92	89		0	91		140
Pseudomonas aeruginosa				100				98	98	100	100	84	89					80
Gram Positive																		
Enterococcus faecalis	99											99	97	32	100		100	140
Staphyloccocus saprophyticus												100	100	97			100	30

Data derived from "**clean-catch**" and "**random**" urine sources for all inpatient and outpatient cultures.

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.

Ampicillin may be used to predict results for amoxicillin.

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

This urine culture-specific antibiogram is intended to guide antibiotic choices in the treatment of uncomplicated urinary tract infections and may be most beneficial in the outpatient setting.

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