

2023 Kadlec Regional Medical Center - Inpatient Antibiogram

Numbers = % susceptible, R = intrinsic resistance, S = inferred susceptibility, Blank = not tested/reported

Calculated from 1st isolate per patient per year using KRMC inpatient 2022 culture data

Gram-Positive Organisms	n	Ampicillin	Cefazolin	Ceftriaxone	Ceftriaxone (meningitis)	Cindamycin	Erythromycin	Gentamicin	Levofloxacin	Linezolid	Minocycline	Nitrofurantoin	Oxacillin	Penicillin G	Penicillin (non-meningitis)	Penicillin (meningitis)	Penicillin (oral)	Tetracycline	Trimethoprim + Sulfa methoxazole	Vancomycin	Daptomycin
		R	R	R									R								
<i>Enterococcus faecium</i>	47	59	R	R	R		14	100	50	88		58	R	61				37	R	82	
<i>Enterococcus faecalis</i>	315	100	R	R	R		13		85	100	25	100		99				39		99	100
<i>Staphylococcus aureus</i>	560					73	48	99		100	100	100	62					93	95	100	100
MSSA	355		S			82	70	99		100	100	100	100					95	97	100	100
MRSA (38%)	222	R	R	R		57	10	98		100	100	100	R					89	93	100	100
<i>Staphylococcus (coagulase-negative)**</i>	357					67	48	91	75	100	100	98	53					85	74	98	
<i>Streptococcus pneumoniae</i> ‡	34			100	90	84	75		100	100				97	100	75	75	81	79	100	
<i>Streptococcus viridans group**</i>	31	84		100		72	51		83	96				84				78		100	

** Susceptibility rates for reported organisms calculated using culture data from both KRMC and WSM.

‡ *S. pneumoniae*: lower MICs are used to determine susceptibilities for CNS isolates and when using oral penicillins.

- Erythromycin susceptibilities predicts S for azithromycin and clarithromycin for *S. pneumoniae*.

- Tetracycline susceptibilities predicts S for doxycycline and minocycline for *S. pneumoniae*.

Gram-Negative Organisms	n	Amikacin	Ampicillin	Ampicillin + Sulbactam	Amoxicillin + Clavulanate	Cefazolin (urine)*	Cefepime	Ceftazidime	Ceftriaxone	Ertapenem	Ciprofloxacin	Gentamicin	Imipenem + Cilastatin	Levofloxacin	Meropenem	Minocycline	Nitrofurantoin	Piperacillin + Tazobactam	Tetracycline	Tobramycin	Trimethoprim + Sulfa methoxazole
		R	R	R	R	R	88	80	37	84	94	100	100	94	100						
<i>Acinetobacter</i> **	47	100	R	94	R	R	88	80	37	84	94	100	100	94	100			75	100	100	95
<i>Citrobacter freundii</i>	39	100	R	R	R	R	100	84	84	100	97	97		93	100		96	82	100	97	92
<i>Enterobacter cloacae complex</i>	86	100	R	R	R	R	84	80	76	100	97	95		91	98		35	86	80	96	94
<i>Escherichia coli</i>	1137	96	63	72	88	87	97	92	91	100	82	92		82	99		97	93	76	92	80
<i>Klebsiella (Enterobacter) aerogenes</i>	54	100	R	R	R	R	95	77	81	98	98	100		100	100		25	75	83	98	100
<i>Klebsiella oxytoca</i>	90	100	R	73	95	83	100	98	98	100	98	100		96	100		88	88	91	98	94
<i>Klebsiella pneumoniae</i>	191	100	R	90	94	96	100	98	99	100	97	98		95	100		38	95	92	99	96
<i>Morganella morganii</i> **	43	100	R	R	R	R	100	90	100	76	100	88	25	72	100		R	100	16	93	74
<i>Proteus mirabilis</i>	136	100	79	86	89	88	100	97	95	100	81	96	20	82	100		R	100	R	97	81
<i>Pseudomonas aeruginosa</i>	201	100	R	R	R	R	88	91	R	R	92			93	97		R	90	R	99	
<i>Serratia species</i> **	56		R	R	R	R	100	96	96	98	94	98		100	100		R	80	R	91	98
<i>Stenotrophomonas maltophilia</i> **	37	R	R	R	R	R	20	R	R		R	R	81	R	100		R		R	86	

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* Cefazolin susceptibility rates may be used to predict results for oral cephalosporins (cephalexin, cefuroxime, cefpodoxime) for uncomplicated UTIs caused by *E. coli*, *K. pneumoniae*, and *P. mirabilis*. Applicable only for urinary isolates.

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		R	R	R	R		14	100	50	88	58	R	61				37	R	82			
<i>Enterococcus faecium</i>	47	59	R	R	R																	
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<i>Klebsiella oxytoca</i>	90	100	R	73	95	83	100	98	98	100	98	100		96	100			88	88	91	98	94
<i>Klebsiella pneumoniae</i>	191	100	R	90	94	96	100	98	99	100	97	98		95	100			38	95	92	99	96
<i>Morganella morganii</i> **	43	100	R	R	R	R	100	90	100	76	100	88	25	72	100		R	100	16	93	74	
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<i>Pseudomonas aeruginosa</i>	201	100	R	R	R	R	88	91	R	R	92			93	97		R	90	R	99		
<i>Serratia species</i> **	56		R	R	R	R	100	96	96	98	94	98		100	100		R	80	R	91	98	
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