


## Antibiotic Susceptibility of Common Organisms

**2023 STHS Edinburg Children's - All Units**

Numbers indicate percent susceptible; only the first isolate per patient per period is included

		# of isolates	Beta-Lactams								FQ	AGs			Miscellaneous				Urine Isolates Only						
			Oxacillin	Ampicillin <sup>1</sup>	Ampicillin/Sulbactam	Piperacillin/Tazobactam	Cefazolin	Ceftriaxone	Cefepime	Meropenem	Ciprofloxacin	Amikacin	Gentamicin	Tobramycin	Clindamycin	Tetracycline <sup>3</sup>	TMP/SMX (Bactrim)	Vancomycin	Linezolid	# of Isolates	1st Gen. Cephs (oral) <sup>4</sup>	Nitrofurantoin <sup>5</sup>	Ciprofloxacin	Ampicillin	TMP/SMX (Bactrim)
Gram Negative	Escherichia coli	508		35	50	93	78	85	85	100	76	98	83	79			53			495	77	97	77	35	54
	Klebsiella pneumoniae	83		0	77	96	86	87	87	100	83	100	90	89			81			72	86	19	85	0	82
	Proteus mirabilis	90		72	86	100	82	99	100	100	94	100	90	90			85			83	84	0	95	75	84
	Pseudomonas aeruginosa	64				92			98	95	86			89						49			89		
Gram Positive	Staphylococcus aureus <sup>8,9</sup>	113	57									96		78	96	97	100	100	-						
	Staphylococcus epidermidis	38	53									89		64	89	81	100	100	-						
	Staphylococcus hominis	51	35									96		63	73	78	100	100	-						
	Enterococcus faecalis	62		100											24		100	100	57			100		100	

Resistance: 43% MRSA, 0% VRE, 15% ESBL, 0% CRE

<sup>1</sup> Ampicillin susceptibility indicates susceptibility to amoxicillin, amoxicillin-clavulanate, ampicillin-sulbactam, and piperacillin-tazobactam

<sup>2</sup> Aztreonam use is reserved for severe penicillin allergy (e.g. anaphylaxis); caution: may cross-react with ceftazidime allergy

<sup>3</sup> Tetracycline susceptibility indicates susceptibility to doxycycline and minocycline; some organisms resistant to tetracycline may be susceptible to doxycycline or minocycline

<sup>4</sup> When used for therapy of uncomplicated UTIs due to E. coli, K. pneumoniae, and P. mirabilis, cefazolin susceptibility indicates susceptibility to the oral agents cefaclor, cefdinir, cefpodoxime, cefprozil, cefuroxime axetil, and cephalexin

<sup>5</sup> Nitrofurantoin is indicated for use in cystitis only; it should not be used for systemic infections, including pyelonephritis

<sup>6</sup> Use of 3rd generation cephalosporins is not recommended; these organisms frequently become resistant during therapy

<sup>7</sup> Formerly known as Enterobacter aerogenes

<sup>8</sup> Oxacillin and cefazolin are considered first-line antibiotic therapies for MRSA

<sup>9</sup> For staphylococci that test susceptible, aminoglycosides must be used in combination with beta-lactams or vancomycin for synergy

<sup>¥</sup> Susceptibility rates determined on small sample size (<30) and may be statistically unreliable; interpret with caution