

McAllen Medical Center Antibioqram 2019 – ICU

Gram Positive Pathogens % Sensitive (Sensitivities based on blood drug concentrations. Results may not be applicable to urine infections where antimicrobial concentrations are higher)	# Isolates	Penicillins		FQs	AGs ²	Other/Misc.						
		Ampicillin	Oxacillin	Levofloxacin	Gentamicin	Tetracycline	Clindamycin	Trimeth/Sulfa	Nitrofurantoin ³	Rifampin ⁴	Vancomycin ⁵	Linezolid
<i>Enterococcus faecalis</i>	33	100	-	73	33	21	-	-	97	-	100	91
<i>Staphylococcus aureus</i> ¹	58	±	59	66	93	93	79	81	100	100	100	100
Lack of data indicates that the organism is intrinsically resistant to the antibiotic or that insufficient hospital susceptibility data exists												
<p>AGs=Aminoglycosides, FQs=Fluoroquinolones, MSSA= Methicillin Susceptible Staphylococcus Aureus, MRSA= Methicillin Resistant Staphylococcus Aureus, VRE= Vancomycin Resistant Enterococcus, + = usually susceptible, ± = variably susceptible/resistant, - = usually resistant</p> <p>¹ Oxacillin or Cefazolin 1st line therapy for MSSA</p> <p>² Not for monotherapy in gram positive infections. For gram positive synergy with Beta-Lactams or Vancomycin</p> <p>³ For uncomplicated urinary tract infections only</p> <p>⁴ Not to be used alone for antimicrobial therapy due to quick emergence of resistance</p> <p>⁵ 1st line therapy for severe MRSA infections</p> <p>⁶ % susceptibility results based on small numbers (<30 isolates). Interpret results with caution.</p> <p>⁷ 100% susceptible to Cefotaxime/Ceftriaxone</p>												

McAllen Medical Center Antibioqram 2019 – ICU

Gram Negative Pathogens % Sensitive (Sensitivities based on blood drug concentrations. Results may not be applicable to urine infections where antimicrobial concentrations are higher)	# Isolates	Penicillins			Cephalosporins				FQs	AGs			Other/Misc.		
		Ampicillin	Ampicillin/Sulb	Piperacillin/Taz	Cefazolin (1 st gen)	Cefoxitin (2 nd gen)	Ceftriaxone (3 rd gen)	Cefepime (4 th gen)	Levofloxacin	Amikacin	Gentamicin	Tobramycin	Trimeth/Sulfa	Nitrofurantoin ²	Meropenem ³
<i>Acinetobacter baumannii</i> ⁴	10	-	50	50	-	-	-	50	50	±	60	70	90	-	50
<i>Enterobacter aerogenes</i> ^{1,4}	14	-	-	86	-	-	86	93	86	+	86	86	86	-	93
<i>Enterobacter cloacae</i> ^{1,4}	11	-	-	73	-	-	64	82	91	+	100	100	100	-	100
<i>Escherichia coli</i>	78	-	35	92	63	-	65	67	38	+	74	72	58	97	100
<i>Klebsiella pneumoniae</i>	56	-	57	87	73	-	77	77	80	+	82	79	70	21	98
<i>Proteus mirabilis</i> ⁴	16	81	88	100	94	-	100	100	81	+	94	94	81	-	100
<i>Pseudomonas aeruginosa</i>	32	-	-	78	-	-	-	81	50	+	72	81	-	-	72
Lack of data indicates that the organism is intrinsically resistant to the antibiotic or that insufficient hospital susceptibility data exists															
<p>AGs=Aminoglycosides, FQs=Fluoroquinolones, ESB= Extended Spectrum Beta-Lactamase, + = usually susceptible, ± = variably susceptible/resistant, - = usually resistant</p> <p>¹ May develop resistance during prolonged therapy with 3rd generation cephalosporins. Isolates that are initially susceptible may become resistant within three to four days after initiation of therapy. Testing of repeat isolates may be warranted.</p> <p>² For uncomplicated urinary tract infections only</p> <p>³ Restricted to Infectious Disease consult</p> <p>⁴ % susceptibility results based on small numbers (<30 isolates). Interpret results with caution.</p> <p>⁵ Do not use if MIC>16.</p>															