

**Edinburg Regional 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 <sup>2</sup>	Other/Misc.						
		Ampicillin	Oxacillin	Levofloxacin	Gentamicin	Tetracycline	Clindamycin	Trimeth/Sulfa	Nitrofurantoin <sup>3</sup>	Rifampin <sup>4</sup>	Vancomycin <sup>5</sup>	Linezolid
<i>Enterococcus faecalis</i>	5	100		100	60	40			100		100	100
<i>Staphylococcus aureus</i> <sup>1</sup>	12	±	25	100	92	83	83	75	100	100	100	100

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

<sup>1</sup> Oxacillin or Cefazolin 1<sup>st</sup> line therapy for MSSA

<sup>2</sup> Not for monotherapy in gram positive infections. For gram positive synergy with Beta-Lactams or Vancomycin

<sup>3</sup> For uncomplicated urinary tract infections only

<sup>4</sup> Not to be used alone for antimicrobial therapy due to quick emergence of resistance

<sup>5</sup> 1<sup>st</sup> line therapy for severe MRSA infections

<sup>6</sup> % susceptibility results based on small numbers (<30 isolates). Interpret results with caution.

<sup>7</sup> 100% susceptible to Cefotaxime/Ceftriaxone

**Edinburg Regional 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 <sup>st</sup> gen)	Cefoxitin (2 <sup>nd</sup> gen)	Ceftriaxone (3 <sup>rd</sup> gen)	Cefepime (4 <sup>th</sup> gen)	Levofloxacin	Amikacin	Gentamicin	Tobramycin	Trimeth/Sulfa	Nitrofurantoin <sup>2</sup>	Meropenem <sup>3</sup>
<i>Enterobacter cloacae</i> <sup>1,4</sup>	5			100	-		100	100	100	+	100	100	60	40	100
<i>Escherichia coli</i>	19	21	32	84	74		74	74	53	+	79	68	68	100	100
<i>Klebsiella pneumoniae</i>	14	-	36	64	64		79	79	86	+	86	79	43	21	93
<i>Proteus mirabilis</i> <sup>4</sup>	4	50	75	100	100		10	100	75	+	100	100	50	-	100
<i>Pseudomonas aeruginosa</i>	14			71				86	57	+	79	85			86
<i>Stenotrophomonas maltophilia</i> <sup>4</sup>	2			100					50				100		

Lack of data indicates that the organism is intrinsically resistant to the antibiotic or that insufficient hospital susceptibility data exists

AGs=Aminoglycosides, FQs=Fluoroquinolones, ESBL= Extended Spectrum Beta-Lactamase, + = usually susceptible, ± = variably susceptible/resistant, - = usually resistant

<sup>1</sup> May develop resistance during prolonged therapy with 3<sup>rd</sup> 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.

<sup>2</sup> For uncomplicated urinary tract infections only

<sup>3</sup> Restricted to Infectious Disease consult

<sup>4</sup> % susceptibility results based on small numbers (<30 isolates). Interpret results with caution.

<sup>5</sup> Do not use if MIC>16.