

McAllen Heart Hospital Antibigram 2019 – URINE

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>	28	100		86	67	25			96		100	96
<i>Enterococcus faecium</i> ⁶	4					25			25		25	100
<i>Staphylococcus aureus</i> ¹	5		40	80	100	80	40	100	100	100	100	100
<i>Staphylococcus epidermidis</i> ⁶	1		0	0	0	0	0	100	100	100	100	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, MSSA= Methicillin Susceptible Staphylococcus Aureus, MRSA= Methicillin Resistant Staphylococcus Aureus, VRE= Vancomycin Resistant Enterococcus, + = usually susceptible, ± = variably susceptible/resistant, - = usually resistant ¹ Oxacillin or Cefazolin 1 st line therapy for MSSA ² Not for monotherapy in gram positive infections. For gram positive synergy with Beta-Lactams or Vancomycin ³ For uncomplicated urinary tract infections only ⁴ Not to be used alone for antimicrobial therapy due to quick emergence of resistance ⁵ 1 st line therapy for severe MRSA infections ⁶ % susceptibility results based on small numbers (<30 isolates). Interpret results with caution. ⁷ 100% susceptible to Cefotaxime/Ceftriaxone												

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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>Citrobacter freundii</i> ^{1, 4}	5			60	-		60	100	100	+	100	100	80	100	100
<i>Enterobacter aerogenes</i> ^{1, 4}	4			50	-		25	100	75	+	75	75	75	25	100
<i>Enterobacter cloacae</i> ¹	8			88	-		75	100	88	+	100	100	88	50	100
<i>Escherichia coli</i>	275	29	39	90	69		72	72	56	+	77	74	59	93	100
<i>Klebsiella pneumoniae</i>	74		70	91	78		78	78	91	+	82	80	70	34	100
<i>Morganella morganii</i> ⁴	3			100	-		100	100	100	+	67	67	67	-	100
<i>Proteus mirabilis</i>	22	62	64	100	82		95	95	86	+	77	82	55	-	100
<i>Pseudomonas aeruginosa</i>	15			80	-	-	-	80	87	+	93	100			73
Lack of data indicates that the organism is intrinsically resistant to the antibiotic or that insufficient hospital susceptibility data exists															
AGs=Aminoglycosides, FQs=Fluoroquinolones, ESB= Extended Spectrum Beta-Lactamase, + = usually susceptible, ± = variably susceptible/resistant, - = usually resistant ¹ May develop resistance during prolonged therapy with 3 rd 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. ² For uncomplicated urinary tract infections only ³ Restricted to Infectious Disease consult ⁴ % susceptibility results based on small numbers (<30 isolates). Interpret results with caution. ⁵ Do not use if MIC >16.															