

COMMUNITY MEMORIAL HOSPITAL ANTIBIOTIC SUSCEPTIBILITY TABLES
JANUARY – DECEMBER 2023
 Department of Pathology - Microbiology/Immunology

Table 1. Activity of selected antibiotics against gram-positive cocci

Organism	Percentage (%) of Organisms Susceptible									
	Number Tested	Ampicillin	Oxacillin ^a	Vancomycin	Tetracycline	Clindamycin	TMP/SMX	Ceftaroline ^c	Daptomycin ^{b,c}	Linezolid
<i>Staphylococcus aureus</i>	155		62	100	92	69	97	100	100	100
Coagulase negative <i>Staphylococcus</i> species	52		60	100		70	69		94	100
<i>Enterococcus faecalis</i>	121	99		100					96	100

^a Staphylococci resistant to oxacillin (methicillin) are also resistant to penicillin, ampicillin, ceftazidime, ceftiofur, ceftiofur, ceftiofur, meropenem and all other beta-lactam antibiotics. Staphylococci species breakpoints are in use.

^b Respiratory tract isolates included in Daptomycin results though excluded from reporting per CLSI M100 guidelines.

^c Ceftaroline and Daptomycin results include Susceptible Dose Dependent (SDD) isolates.

Table 2. Activity of selected antibiotics against gram-negative bacilli

Organism	Percentage (%) of Organisms Susceptible												
	Number Tested	Ampicillin	Amp/Sulb	Pip/Tazo ^d	Cefazolin	Cefepime ^d	Ceftriaxone	Meropenem	Gentamicin	Ciprofloxacin	Levofloxacin	TMP/SMX	Nitrofurantoin
<i>Klebsiella (Enterobacter) aerogenes</i> ^a	30	IR	IR	83	IR	100	76	100	100	100	100	100	
<i>Escherichia coli</i>	619	54	86	99	88	97	91	100	92	78	81	77	98
<i>Klebsiella pneumoniae</i>	209	IR	85	97	91	96	93	98	96	91	95	88	
<i>Proteus mirabilis</i> ^b	87	93	96	100	91	98	97	100	97	82	82	90	
<i>Pseudomonas aeruginosa</i>	72	IR	IR	95		97	IR	100		91	84 ^c	IR	

IR = Intrinsic Resistance

^aUse of 3rd generation cephalosporins is not recommended for *Enterobacter cloacae* complex, *Citrobacter freundii* complex, and *Klebsiella aerogenes* infections because resistance develops rapidly. Cefepime, meropenem, a quinolone, or TMP/SMX are recommended.

^b *Proteus* species other than *Proteus mirabilis* are more resistant (similar to *Morganella* species).

^c Levofloxacin breakpoints for *Pseudomonas aeruginosa* are based on a dosage regimen of 750mg every 24 hours.

^d Piperacillin/tazobactam and Cefepime results include Susceptible Dose Dependent (SDD) isolates.

**Data collected by the Clinical Microbiology Laboratory, Department of Pathology
 CLSI M100-ed33 and M27M44-ed3 Interpretation breakpoints were applied unless otherwise stated.**