Atrium Health - POLK 2024 Antibiotic Susceptibility Surveillance Report

		Penicillins		Miscellaneous											
Gram Positive Organisms ¹	# of Isolates Tested	Ampicillin	Oxacillin ²	Clindamycin	Daptomycin	Erythromycin ³	Linezolid	Nitrofurantoin ⁴	Rifampin ⁵	Tetracycline ⁶	Trimethoprim- Sulfamethoxazole	Vancomycin			
Staphylococcus aureus - Total	44		36	79	100	20	100	100	100	95	81	100			
Staphylococcus aureus - MRSA*	30			82	100	3	100	100	100	92	82	100			
Enterococcus faecalis	40	97			100		97	97				97			

		Penicillins			Cephems				Miscellaneous							
Gram Negative Organisms ¹	# of Isolates Tested	Ampicillin	Ampicillin-Sulbactam	Pipercillin-Tazobactam	Cefazolin ⁷	Ceftriaxone	Cefepime	Aztreonam	Ertapenem	Meropenem	Gentamicin	Tobramycin	Amikacin ⁸	Ciprofloxacin	Nitrofurantoin ⁴	Trimethoprim- Sulfamethoxazole
Escherichia coli	270	49	60	91	88	92	92	95	100	100	91	91	99	78	95	71
Klebsiella pneumonia	60		83	91	93	93	93	93	100	100	96	96	100	95	25	88
Proteus mirabilis	20**	85	100	100	100	100	100	100	95	100	100	100	100	93		95
Pseudomonas aeruginosa	20**			89			94			100		100	100	78		

Grey boxes are for antimicrobials showing ≤ 60% susceptibility

Black boxes are for antimicrobials that are not recommended due to: 1) no in vivo activity; 2) sub-optomal clinical activity; or 3) susceptibility testing not performed

¹ Data are presented as percent susceptible. Duplicate isolates from the same patient are excluded. A minimum of 30 isolates is required to achieve statistical significance.

² For Staphylococcus species, susceptibility to oxacillin predicts susceptibility to cephalosporins, carbapenems and ß-lactam combination agents.

³ Susceptibility to erythromycin predicts susceptibility to azithromycin and clarithromycin.

⁴ Use for lower UTI only.

⁵ Rifampin should NOT be used as monotherapy due to rapid development of resistance.

⁶ Susceptibility to tetracycline predicts susceptibillity to doxycycline, minocyclinem and tigecycline.

⁷ In cases of uncomplicated UTI caused by *E. coli, Klebsiella* or *Proteus mirabilis*, susceptibility to cefazolin predicts susceptibility to oral cephalosporins.

⁸ Amikacin should only be considered for P. aeruginosa from UTIs, and should not be considered in the use of treating systemic infections caused by P.aeruginosa

^{*} Data also included in the corresponding organism total above.

^{**} Statistical validity of % susceptible is decreased if fewer than 30 isolates are tested.