

# Marshfield Clinic Health System

## 2023 INPATIENT Antibioqram

Gram-negative Enterobacteriales % Susceptible	No. Tested	Ampicillin	Amoxicillin-clav	Piperacillin-tazo	Ceftriaxone	Cefepime	Ertapenem	Meropenem	Amikacin	Gentamicin	Tobramycin	Ciprofloxacin	Levofloxacin	Tetracycline	Trimeth-Sulfa
<i>Citrobacter freundii</i>	83	R	R	-	-	100	100	100	100	95	95	87	83	86	83
<i>Enterobacter cloacae</i>	195	R	R	-	-	93	90	99	100	98	98	96	94	92	94
<i>Escherichia coli</i>	2955	65	89	97	94	98	100	100	100	95	95	87	84	83	85
<i>Klebsiella aerogenes</i>	63	R	R	-	-	100	100	100	100	100	100	100	95	92	100
<i>Klebsiella oxytoca</i>	145	R	92	91	91	100	100	100	100	98	98	98	99	94	97
<i>Klebsiella pneumoniae</i>	500	R	97	92	97	99	100	100	100	99	98	95	93	86	96
<i>Morganella morganii</i>	53	R	R	96	91	100	98	100	100	94	96	89	87	58	89
<i>Proteus mirabilis</i>	229	90	95	100	97	97	90	100	100	91	91	84	82	R	85
<i>Serratia marcescens</i>	55	R	R	-	95	100	95	100	100	100	89	98	95	33	100

Gram-negative Non-Enterobacteriales % Susceptible	No. Tested	Piperacillin-tazo	Ceftazidime	Cefepime	Meropenem	Tobramycin	Ciprofloxacin	Levofloxacin	Minocycline	Trimeth-Sulfa
<i>P. aeruginosa</i>	378	92	93	93	93	99	89	85	R	R
<i>S. maltophilia</i> [1]	44	R	66	-	-	R	-	89	100	89

### Contact Information

- For susceptibility test questions and data analysis please contact: Dr. Thomas Novicki, Dr. Sophi Arbefeville, or Dr. Taylor Wahlig at 715-387-6300 or ext. 16300
- For antimicrobial stewardship questions please contact: Philip (Logan) Whitfield at 715-387-7578 or ext. 77578
- For urgent questions regarding specific patient cases, please consult your local infectious diseases physician.

### Susceptibility

≥ 90%
60-89%
< 60%

### Analysis Key

R	Isolate is intrinsically resistant
-	Not tested or is clinically ineffective

### Notes

[U] Breakpoints exist only for urinary isolates

[1] Inpatient and outpatient isolates combined

Gram-positive Streptococci and Enterococci % Susceptible	No. Tested	Ampicillin	Amoxicillin	Penicillin	Ceftriaxone	Meropenem	Clindamycin	Erythromycin	Levofloxacin	Ciprofloxacin	Linezolid	Nitrofurantoin	Tetracycline	Trimeth/Sulfa	Vancomycin
<b>Streptococci</b>															
<i>Grp. B Streptococcus agalactiae</i>	181	100	SP	100	-	-	38	36	99	-	100	-	13	-	100
<i>Grp. A Streptococcus pyogenes</i>	69	100	SP	100	-	-	90	90	100	-	100	-	90	-	100
<i>Grp. G Streptococci</i>	43	100	SP	100	-	-	79	84	98	-	100	-	77	-	100
<i>S. pneumoniae (Non-meningeal)[3]</i>	73	SP[1]	SP[1]	97	100	91	-	65	95	-	-	-	62	87	100
<i>S. pneumoniae (Meningeal)[3]</i>	73	-	-	75	97	91	-	-	-	-	-	-	-	-	100
<i>S. anginosus</i>	65	100		100			84	78	98		100		65		100
<i>S. constellatus</i>	37	100	-	95	-	-	75	81	100	-	100	-	86	-	100
<b>Enterococci</b>															
<i>Enterococcus faecalis</i>	505	100	-	99	R	-	R	10	85[U]	83[U]	97	100[U]	28[U]	R	100
<i>Enterococcus faecium</i>	103	25	-	25	R	-	R	R	26[U]	26[U]	97	15[U]	26[U]	R	53

Gram-positive Staphylococci % Susceptible	No. Tested	Penicillin	Oxacillin	Ceftaroline	Vancomycin	Erythromycin	Clindamycin	Gentamicin[2]	Trimeth/Sulfa	Linezolid	Daptomycin	Nitrofurantoin	Rifampicin[2]	Tetracycline
<i>Staphylococcus aureus</i>	950	19	71	100	100	58	80	99	96	100	100	100[U]	100	91
<i>Staphylococcus lugdunensis</i>	43	-	84	-	100	84	81	100	100	100	100	100[U]	100	98
<i>Staphylococcus epidermidis</i>	280	-	35	-	99	32	58	91	59	100	100	100[U]	100	79
<i>Staphylococcus hominis</i>	32	-	50	-	100	28	50	100	81	100	100	100[U]	100	56

Susceptibility	
	≥ 90%
	60-89%
	< 60%

Analysis Key	
R	Isolate is intrinsically resistant
-	Antimicrobial is not tested
SP	Susceptibility inferred from testing other agent

### Notes

[1] Based on susceptibility to standard dose IV penicillin, susceptibility to oral penicillin, and studies of clinical efficacy, nearly all non-meningeal pneumococcal infections can be effectively treated with IV ampicillin or with high dose oral amoxicillin (in children: 80-100 mg/kg/day divided TID; adult dose and maximum dose in children: 1 g TID)

[2] Should only be used in combination with other active agents

[3] Inpatient and Outpatient isolates combined

[U] Breakpoints exist only for urinary isolates. Other sources of infection are not tested