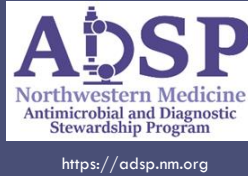


## Northwestern Medicine Kishwaukee/Valley West Hospitals 2022 Antibiograms

- I. [Facility-Wide](#)
- II. [Emergency Department](#)
- III. [Urine](#)

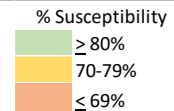
# KH/VW 2022 Facility-Wide Antibiogram



Isolates	Ampicillin <sup>a</sup>	Ampicillin/Sulbactam	Aztreonam	Cefazolin	Cefepime	Ceftazidime	Ceftioxone	Ciprofloxacin	Clindamycin	Daptomycin	Levofloxacin	Linezolid	Meropenem <sup>e</sup>	Oxacillin	Penicillin	Piperacillin/Tazobactam	Rifampin	Sulfamethoxazole/Trimethoprim	Tetracycline	Vancomycin
<b>GRAM POSITIVES</b>																				
Enterococcus species <sup>b,c</sup>	215	93						72	100	85		100								96
Staphylococcus coagulase negative	62								72	100							100	71	88	100
Staphylococcus aureus - all	249								62	100		100		66			100	97	87	100
Methicillin-resistant Staphylococcus aureus	86								37	100		100					100	91	77	100
Viridans streptococci	49														91					
<b>GRAM NEGATIVES</b>																				
Citrobacter species	69		67	89		98	89	88				98					91		92	
Citrobacter freundii complex <sup>d</sup>	42			83		97	82	80				97					85		88	
Enterobacter cloacae complex <sup>d</sup>	71			78		100	76	73				100					84		95	
Escherichia coli	1269	64	69	99	88	100	99	98				82					99		82	
Klebsiella aerogenes <sup>d</sup>	38			71		100	73	65				97					76		97	
Klebsiella pneumoniae	267		88	99	100	99	99	99				98					99		89	
Proteus mirabilis	184	85	92	98	65	100	100	99				77					100		80	
Pseudomonas aeruginosa	130			81		92	93					100					93			
ESBL Enterobacterales <sup>f,g</sup>	135											37							48	

**MRSA Rate 35%**

[See protocol for multi-drug resistant gram-negative agents for guidance](#)



<sup>a</sup> Results of ampicillin susceptibility tests should be used to predict the activity of amoxicillin

<sup>b</sup> Ampicillin may be used to predict susceptibility to amoxicillin-clavulanate, ampicillin-sulbactam, and piperacillin-tazobactam among non-β-lactamase-producing enterococci

<sup>c</sup> Enterococcus is intrinsically resistant to all cephalosporins

<sup>d</sup> High likelihood of ampC hyperproduction and eventual resistance to most beta-lactams; cefepime is empiric drug of choice for systemic infection (non-cystitis)

<sup>e</sup> Should be reserved for patients who are suspected of having a drug-resistant bacteria or who are intolerant to penicilins and cephalosporins

<sup>f</sup> Treatment with a carbapenem is recommended for systemic infection (non-cystitis)

<sup>g</sup> Enterobacterales that may harbor ESBLs include E.coli, Klebsiella sp., Enterobacter sp., Proteus sp., Citrobacter sp., Salmonella sp., and others

**Notes:**

Abbreviations: ESBL, extended-spectrum beta-lactamase

Only organisms with 30 isolates or more were included

Based on Antibiogram Guidance per CLSI M100-Ed33

[Back to Top](#)

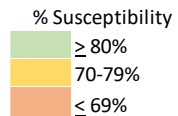


# KH/VW 2022 Emergency Department Antibiogram

Isolates	Ampicillin <sup>a</sup>	Ampicillin/Sulbactam	Aztreonam	Cefazolin	Cefepime	Ceftazidime	Ceftriaxone	Ciprofloxacin	Clindamycin	Daptomycin	Levofloxacin	Linezolid	Meropenem <sup>e</sup>	Oxacillin	Piperacillin/Tazobactam	Sulfamethoxazole/Trimethoprim	Tetracycline	Vancocmycin
<b>GRAM POSITIVES</b>																		
Enterococcus species <sup>b,c</sup>	116	88						66	100	66		100						97
Staphylococcus coagulase negative	44								77	100						76	76	100
Staphylococcus aureus - all	160								63	100		100		69		95	86	100
Methicillin-resistant Staphylococcus aureus	51								36	100		100				86	72	100
<b>GRAM NEGATIVES</b>																		
Citrobacter species	43		68	93		100	90	90				97		100		93	93	
Enterobacter cloacae complex <sup>d</sup>	35			85		100	80	74				100		100		82	91	
Escherichia coli	789	63	68	99	88	100	99	98				81		100		99	81	
Klebsiella pneumoniae	157		92	99	100	99	99	99				99		100		99	91	
Proteus mirabilis	125	84	91	97	59	100	100	99				72		100		100	75	
Pseudomonas aeruginosa	73			84		95	97					100		98		95		
ESBL Enterobacterales <sup>f,g</sup>	84											36		100			50	

**MRSA Rate 32%**

[See protocol for multi-drug resistant gram-negative agents for guidance](#)



<sup>a</sup> Results of ampicillin susceptibility tests should be used to predict the activity of amoxicillin

<sup>b</sup> Ampicillin may be used to predict susceptibility to amoxicillin-clavulanate, ampicillin-sulbactam, and piperacillin-tazobactam among non-β-lactamase-producing enterococci

<sup>c</sup> Enterococcus is intrinsically resistant to all cephalosporins

<sup>d</sup> High likelihood of ampC hyperproduction and eventual resistance to most beta-lactams; cefepime is empiric drug of choice for systemic infection (non-cystitis)

<sup>e</sup> Should be reserved for patients who are suspected of having a drug-resistant bacteria or who are intolerant to penicilins and cephalosporins

<sup>f</sup> Treatment with a carbapenem is recommended for systemic infection (non-cystitis)

<sup>g</sup> Enterobacterales that may harbor ESBLs include E.coli, Klebsiella sp., Enterobacter sp., Proteus sp., Citrobacter sp., Salmonella sp., and others

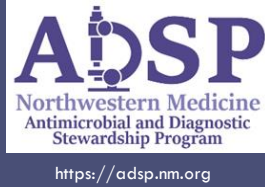
**Notes:**

Abbreviations: ESBL, extended-spectrum beta-lactamase

Only organisms with 30 isolates or more were included

Based on Antibiogram Guidance per CLSI M100-Ed33

# KH/VW 2022 Urine Antibiogram



Isolates	Ampicillin <sup>a</sup>	Ampicillin/Sulbactam	Aztreonam	Cefazolin	Cefepime	Ceftazidime	Ceftriaxone	Ciprofloxacin <sup>e</sup>	Daptomycin	Gentamicin <sup>f</sup>	Linezolid	Meropenem <sup>g</sup>	Nitrofurantoin	Piperacillin/Tazobactam	Sulfamethoxazole/Trimethoprim	Tetracycline	Tobramycin <sup>f</sup>	Vancomycin
<b>GRAM POSITIVES</b>																		
Enterococcus species <sup>b,c</sup>	165	93						69	85		100		96					95
<b>GRAM NEGATIVES</b>																		
Citrobacter species	62		62	88		98	88	86	98		96		100	79	90	91		96
Citrobacter freundii complex <sup>d</sup>	40			82		97	82	79	97		95		100	85	85	87		95
Enterobacter cloacae complex <sup>d</sup>	52			80		100	76	73	96		100		100	15	84	94		96
Escherichia coli	1193	64	69	99	95	100	99	98	81		93		100	96	99	81		94
Klebsiella aerogenes <sup>d</sup>	32			68		100	71	65	96		100		100	25	75	96		100
Klebsiella oxytoca	45		64	97	55	100	100	97	95		95		100	86	95	93		95
Klebsiella pneumoniae	247		87	99	99	99	99	99	96		97		100	36	99	90		97
Proteus mirabilis	153	84	91	98	93	100	100	99	67		91		100		100	78		92
Pseudomonas aeruginosa	77			79		94	96		84		85		98		94			96
ESBL Enterobacterales <sup>h,i</sup>	120								26		73		100	72		50		70

% Susceptibility  
 ≥ 80%  
 70-79%  
 ≤ 69%

[See protocol for multi-drug resistant gram-negative agents for guidance](#)

<sup>a</sup> Results of ampicillin susceptibility tests should be used to predict the activity of amoxicillin

<sup>b</sup> Ampicillin may be used to predict susceptibility to amoxicillin-clavulanate, ampicillin-sulbactam, and piperacillin-tazobactam among non-β-lactamase-producing enterococci

<sup>c</sup> Enterococcus is intrinsically resistant to all cephalosporins

<sup>d</sup> High likelihood of ampC hyperproduction and eventual resistance to most beta-lactams; cefepime is empiric drug of choice for systemic infection (non-cystitis)

<sup>e</sup> Susceptibility based on lab breakpoint of 1 mcg/mL

<sup>f</sup> Susceptibility based on lab breakpoint of 4 mcg/mL

<sup>g</sup> Should be reserved for patients who are suspected of having a drug-resistant bacteria or who are intolerant to penicillins and cephalosporins

<sup>h</sup> Treatment with a carbapenem is recommended for systemic infection (non-cystitis)

<sup>i</sup> Enterobacterales that may harbor ESBLs include E.coli, Klebsiella sp., Enterobacter sp., Proteus sp., Citrobacter sp., Salmonella sp., and others

**Notes:**

Abbreviations: ESBL, extended-spectrum beta-lactamase

Only organisms with 30 isolates or more were included

Based on Antibiogram Guidance per CLSI M100-Ed33

[Back to Top](#)