

Inpatient (All Units) & Outpatient (Including ED) Antibigram

Ascension Sacred Heart Pensacola

Date disseminated: February 2025

Data are percent susceptible; first isolates only
MRSA rate: 44%

Best for COMMUNITY- ACQUIRED infections	Antimicrobial Susceptibility Report: January 2024 - December 2024																				Criteria for Use / Restricted Agents							
	No. of Isolates	Amikacin ^a	Amoxicillin/Clavulanate	Ampicillin ^b	Ampicillin/Sulbactam	Cefazolin	Cefepime	Ceftriaxone	Ceftriaxone (meningitis) ^g	Cefuroxime / Cephalexin	Clindamycin	Doxycycline	Gentamicin ^a	Nitrofurantoin ^c	Oxacillin / Nafcillin ^d	Penicillin G	Penicillin G (meningitis) ^g	Piperacillin/Tazobactam	Sulfa/Trim (Bactrim)	Tetracycline	Tobramycin ^a	Ceftazidime	Ciprofloxacin ^f	Levofloxacin ^f	Linezolid	Meropenem	Vancomycin	
Gram-positive																												
Enterococcus faecalis	687		100	100	100							22		100		100	-	100		20				85	87	100*	-	97
Enterococcus faecium	164		27	16	27							19		27		-	-	27		11				9	13	100	-	33
Staphylococcus aureus ^f	1192	-	56		56	54	-	56	-	56	73	92	-	99	56	-	-	56	91	84	-			63	64	100	-	100
MRSA ^f	527	-									67	85	-	100					86	79	-			29	30	100		100
MSSA ^f	666	-	100		100	100	-	100	-	100	77	97	-	97	100	-	-	100	95	89	-			90	91	100*	-	100
Staphylococcus epidermidis ^f	193	-	34		34	43	-	34	-	34	60	86	-	100	34	-	-	34	56	77	-			65	66	100	-	100
Staphylococcus hemolyticus ^f	30	-	20		20	28*	-	20	-	20	29*	77	-	100	20	-	-	20	47	67	-			43	43	100*	-	100
Staphylococcus lugdunensis ^f	98	-	78		78	83*	-	78	-	78	64	100	-	100	78	-	-	78	97	92	-			97	98	100*	-	100
Streptococcus pneumoniae	60	-	-		-	-	-	98	87	-	90	-	-	-	-	100	74	-	75	90	-			-	98	100	-	100
Gram-negative																												
Achromobacter xylosoxidans	30	35*					25*						27					83	97		-	87	0*	38*			92*	
Acinetobacter baumannii	43	-			95		33*	-	-			-	93					74	90	-	-	81	0*	71			79	
Citrobacter freundii ^e	61	100					100	73	-			-	89	97				78	80	100*	75*	75	75	75			98	
Citrobacter koseri	58	100	97		-	-	97	97	-	-		-	100	89				95	98	100*	100*	97	97	97			100	
Enterobacter cloacae complex ^e	206	100					95	78*	-	-		-	99	28				75	91	100*	100*	75	95	93			98	
Enterobacter hormaechei ^e	60	100					82	-	-	-		-	93	15				75	85		100*	72	85*	90			100	
Escherichia coli	2975	100	82	53	59	86 ^c	92	88	-	- ^c		-	90	96				95	73	74	89	94	69	71			100	
Klebsiella aerogenes ^e	96	100					99	75	-	-		-	100	11				75	98	100*	100*	77	95	94			100	
Klebsiella oxytoca	112	100	95		77		96	92	-	-		-	97	80				95	96	100*	100*	97	95	97			99	
Klebsiella pneumoniae	950	100	87		72	84 ^c	87	84	-	- ^c		-	91	21				90	83	77	98	88	82	80			100	
Morganella morganii	95	98					-	-	-			-	91					94	83	33*	100*	73	78	75			98	
Proteus mirabilis	361	100	100	76*	94	97 ^c	99	96	-	- ^c			95					100	88		100*	99	86	86			100	
Providencia rettgeri	39	100*			55		95	95	-	-			100					97	85		100*	92	100	82			100*	
Pseudomonas aeruginosa	610	99					95											90				90	84	79			88	
Serratia marcescens	135	100					99	95	-				100					67*	100	17*	83*	99	96	95			99	
Stenotrophomonas maltophilia	86											-							97					92				

NOTE: Narrowest agent needed to cover pathogens suspected per evidence and individual patient history recommended; >80% susceptible is acceptable

^aaminoglycosides should not be used as monotherapy except for in urinary source

^bampicillin results predict activity of amoxicillin, amoxicillin/clavulanate, ampicillin/sulbactam, and piperacillin/tazobactam for non-beta-lactamase producing enterococci. %S have not been tested for these isolates but have been included and match the ampicillin susceptibility result as appropriate

^creflects susceptibility of urine isolates only due to limitations of current antimicrobial susceptibility tests. Cefazolin results when used for treatment of uncomplicated UTIs due to *E. coli*, *K. pneumoniae*, and *P. mirabilis*, can be used to predict results for oral agents cefdinir, cefuroxime, and cephalexin.

^doxacillin results for methicillin (oxacillin)-susceptible staphylococci can be applied to amoxicillin/clavulanate, ampicillin/sulbactam, piperacillin/tazobactam, cefdinir, cephalexin, cefuroxime, cefazolin, cefepime, ceftriaxone, and meropenem. %S have not been tested for all these bug-drug combinations but have been included and match the oxacillin susceptibility results as appropriate

^eEnterobacter cloacae, Klebsiella aerogenes, and Citrobacter freundii may develop resistance during prolonged therapy with 3rd-generation cephalosporins due to derepression of AmpC beta-lactamase. Isolates initially susceptible may become resistant within 3-4 days after initiation of therapy. If treatment is intended to be > 1 week, testing repeat isolates may be warranted if using 3rd-generation cephalosporins; otherwise use cefepime.

^fStaphylococcus spp may develop resistance during prolonged therapy with quinolones. Isolates initially susceptible may become resistant within 3-4 days after initiation of therapy. Testing repeat isolates may be warranted or use of alternative narrower agent.

^gBased on CLSI breakpoints for meningitis (S ≤ 0.5 for ceftriaxone and ≤ 0.6 mcg/mL for penicillin)

*less than 30 isolates tested

 intrinsically resistant or poor coverage
 Key: - None or very few isolates tested
 empiric drug of choice

Locations included: Inpatient=GCSP MICU, NICU2, NICU3, PICU, SICU, 1S, 2E, 2W, 3E, 4E, 4W, 5E, 5W, 6T, 7T, 8T, BSU, OR, PACU, C1 PED2, C4 PEDS, ENDO, IR, IT, LDOR, LDR, LDRecovery, MotherBaby, NURS, OBEC, PACU, PCUT, PCUW, PREADMIT, PREOP, PSU, SAA; Outpatient=GCMG, GCMG CARD, GCMG CMG, GCMG DMG, GCMG GBM, GCMG GPM, GCMG POB, GCMG BWMG, GCMG DOMG, GCMG OBMG, GCMG UOB, GCSP ABC at Optimal, GCSP AMP, GCSP ANN BAROCO, GCSP C DIAG, GCSP OBS, GCSP DIAG, GCSP DIAG PAT, GCSP ED, GCSP ED Hold, GCSP ED PEDS, GCSP ED Peds Hoi, GCSP LAB DRP, GCSP Lab EXP GB, GCSP LAB LXC, GCSP LAB LXD, GCSP LAB LXM, GCSP LAB LXR, GCSP LAB PMP, GCSP LRP Rehab, GCSP Milestone, GCSP Navarre ED, GCSP Navarre ED HOLD, GCSP Nine Mile, GCSP Nine Mile ED HOLD, GCSP OP Wound, GCSP Optimal Summit, GCSP Ped SLP, GCSP PERDIDO, GCSP PMP MAMMO, GCSP PRU, GCSP REHAB PTD, GCSP REHAB PTP, GCSP REHAB PTT, GCSP REHAB PTY, GCSP RHVI, GCSP SHMOG AIR, GCSP SHMOG BAY, GCSP SHMOG DES, GCSP SHMOG IVT A, GCSP SHMOG IVT P, GCSP SHMOG RAD, GCSP SURG CTR, GCSP TIGER PT, GCUC PUMG