Antibiotic Susceptibility Patterns of Commonly Isolated Bacteria for July 2023-June 2024

Numbers below represent **percent of susceptible isolates** (no. of isolates tested)

WEILER ICU

(4WIC, 4ECI, 7N)

		n	Ampicillin	Ampicillin-Sulbactam	Aztreonam	Cefazolin	Cefepime	Ceftazidime	Ceftriaxone	Ciprofloxacin	Clindamycin	Daptomycin [2]	Gentamicin	Levofloxacin	Linezolid	Meropenem	Nitrofurantoin [3]	Oxacillin	Penicillin G	Piperacillin-Tazobactam	Tetracycline	Tobramycin	Trimethoprim-Sulfamethoxazole	Vancomycin
Gram Negative	*Acinetobacter baumannii* complex [1]	12		**50%**			**42%**		25%	**42%**			**42%**			**50%**	0%			40%		75%	**33%**	
	Enterobacter cloacae [1]	5			1		1		1	1			1			1				1		1	1	
	Escherichia coli	34	44%	**52%**	70%	59%	**70%**		71%	53%			91%			94%	**100%** [1]			71%		91%	**82%**	
	Klebsiella pneumoniae	41		54%	71%	61%	68%		68%	66%			**95%**			93%	50% [1]			66%		**95%**	71%	
	Proteus mirabilis [1]	2	1	1	1	1	1		1	1			1							1		1	1	
	Pseudomonas aeruginosa	31			71%		77%			90%			100%			**90%**				**77%**		1		
	Serratia marcescens [1]	1			1		1		1	1			1			1				1		1	1	
	Stenotrophomonas maltophilia [1]	6						1						1									1	
Gram Positive	*Staphylococcus aureus*	43				53%				60%			98%					53%	0%		86%		95%	100%
	Staphylococcus epidermidis [1]	14				0%				**33%**			**73%**					0%	0%		86%			100%
	Staphylococcus lugdenesis [1]	0				1				1			1					1	1		1			1
	Enterococcus faecalis [1]	10	1												1									1
	Enterococcus faecium [1]	7	1									1			1									1
	Enterococcus faecalis (Urine) [1]	4	1												1									1
	Enterococcus faecium (Urine) [1]	3	1									1			1									1

denotes antibiotics that are not routinely tested against or known to be clinically relevant treatment options for the specific organisms

10^{+} % decrease in susceptibility from 2022-2023 antibiogram

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10^{+} % decrease in susceptibility compared to global inpatient population

10^{+} % increase in susceptibility compared to global inpatient population

1 Organisms with fewer than 30 isolates should be interpreted with caution as small numbers may bias group susceptibilities

2 For *E. faecalis*, daptomycin is not recommended due to cost and the availability of an agent with a narrower spectrum of activity

3 For treatment of uncomplicated urinary tract infection with CrCl > 30mL/min only