

Using this Antibioqram

- This antibiogram provides useful information for the selection of empiric antibiotic treatment when a presumptive diagnosis of infection, with a specific bacterium, is made.
- The numbers represent the percentage of isolates that are susceptible to the antimicrobial. Susceptibility percentage for each organism / antibiotic combination is generated by including the first isolate of that organism encountered on a given patient.
- A lack of data indicates that the organism is intrinsically resistant to the antibiotic, or that insufficient data (< 10 isolates) exists.
- Isolates from certain inpatient floors (ICU, etc.) may be more resistant than isolates on the general medicine floors. Use susceptibility data wisely.
- Review footnotes for valuable information useful in antibiotic selection.
- When patient specific cultures and susceptibilities become available, alteration of drug therapy may be appropriate.
- Pharmacy or microbiology consults are available.

Contact Information

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Footnotes based on CLSI Document M100-32<sup>nd</sup> Edition

a = Oxacillin-resistant staphylococci are considered resistant to all other beta-lactam class of agents, i.e., penicillins, β-lactam combination agents, cepheims (with the exception of ceftaroline) and carbapenems.

b = Isolates that are sensitive to tetracycline are also considered sensitive to doxycycline and minocycline. However, some organisms that are intermediate or resistant to tetracycline may be susceptible to doxycycline and minocycline or both.

c = The following antimicrobial agents should not be used for bacteria isolated from the CSF: agents administered by oral route only, 1st and 2nd generation cephalosporins and cephamycins, clindamycin, macrolides, tetracyclines, and fluoroquinolones.

d = Susceptibility to azithromycin and clarithromycin can be predicted by testing erythromycin.

e = Strains of Klebsiella spp. and E. coli that produce ESBLs (Extended-Spectrum Beta-lactamases) may be clinically resistant to therapy with penicillins, cephalosporins, or aztreonam, despite apparent in vitro susceptibility to some of these agents.

f = Combination therapy of ampicillin, penicillin, or vancomycin (for susceptible strains only), plus an aminoglycoside, is usually indicated for serious enterococcal infections, such as endocarditis, unless high-level resistance to both gentamicin and streptomycin is documented; such combinations are predicted to result in synergistic killing of the Enterococcus.

g = Not routinely used on organisms from the urinary tract.

h = Recommended for use only against isolates in the urinary tract.

i = Rifampin should not be used alone for antibiotic therapy.

j = *Enterobacter*, *Klebsiella* (formerly *Enterobacter*) *aerogenes*, *Citrobacter*, and *Serratia* may develop resistance during prolonged therapy with third-generation cephalosporins as a result of depression of AmpC- beta lactamase. Therefore, isolates that are initially susceptible may become resistant within three to four days after initiation of therapy. Testing of repeat isolates may be warranted.

Generic Name	Trade Name	Dosage grams / dose	Dosing schedule	Daily drug cost
Penicillins				
Amoxicillin/clavulanate *	Augmentin	0.5	3	\$
Ampicillin	Omnipen	0.5	4	\$
Ampicillin/sulbactam	Unasyn	1.5	4	\$
Nafcillin *		1	6	\$\$
Penicillin VK		0.5	4	\$
Penicillin G Potassium		5 MU	4	\$
Piperacillin/tazobactam	Zosyn	3.375	3	\$
Cephalosporins				
Cefazolin	Ancef	1	3	\$
Cefdinir *	Omnicef	0.3	2	\$
Cefoxitin *	Mefoxine	1	4	\$\$
Cefuroxime *	Zinacef	0.75	3	\$
Cefotaxime	Claforan	1	3	\$
Ceftazidime	Fortaz	1	3	\$
Ceftriaxone	Rocephin	1	1	\$
Cefepime	Maxipime	1	3	\$
Aminoglycosides				
Amikacin	Amikin	0.5	2	\$
Gentamicin	Garamycin	0.08	3	\$
Tobramycin *	Nebcin	0.08	3	\$
Macrolides				
Erythromycin	Erythrocin	1	4	\$
Fluoroquinolones				
Ciprofloxacin	Cipro	0.4	2	\$
Levofloxacin	Levaquin	0.5	1	\$
Moxifloxacin	Avelox			
Monobactams				
Aztreonam	Azactam	1	3	\$\$\$
Carbapenems				
Ertapenem	Invanz	1	1	\$\$
Meropenem	Merrem	1	3	\$
Others				
Clindamycin	Cleocin	0.6	4	\$
Daptomycin *	Cubicin	0.5	1	\$\$
Linezolid	Zyvox	0.6	2	\$\$
Nitrofurantoin	Macrobid	0.1	2	\$
Rifampin	Rifadin	0.6	1	\$\$\$\$\$
Doxycycline (Tetracycline)	Vibramycin	0.1	2	\$\$
Trimethoprim/sulfamethoxazole	Bactrim	1	2	\$
Vancomycin	Vancocin	1	2	\$\$
* Antimicrobial susceptibility not performed on these antibiotics	Cost key:  \$= \$0-25 \$\$= \$25.01-50 \$\$\$= \$50.01-75 \$\$\$\$= \$75.01-100 \$\$\$\$\$= ≥\$100			

2024 ANTIBIOGRAM

Antibiotic Cumulative Summary

2025 Antibioqram Based on 2024 Data

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