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Choice of Antimicrobial Therapy

A. Empiric Therapy:

Prior to receiving specific susceptibility results, drugs to which organisms are greater than 80% susceptible are generally considered good choices, although patient history, site of infection, and specific pharmacologic properties as they apply to the particular patient must be taken into account.

B. Therapeutic Therapy:

The drug of choice for treatment of an infection is usually the most active drug against the pathogenic organism or the organism most likely to cause infection. Choice of drugs should be modified by site of infection and patient's clinical status regarding allergy, renal function, immune status or pregnancy.

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Organism	Number of isolates **	Ampicillin	Amoxicillin/clavulanate*	Piperacillin/tazobactam	Cephalothin	Cefazolin	Cefoxitin	Ceftioxime	Cefepime	Cefuroxime	Ceftriaxone	Ceftazidime	Cefepime	Ertapenem	Imipenem	Gentamicin ##	Tobramycin	Amikacin	Aztreonam	Meropenem	Netilmicin	Clarithromycin	Clindamycin	Erythromycin	Azithromycin	Oxacillin	Penicillin	Rifampin ##	Vancomycin	Gentamicin-Synergy				
ESCHERICHIA COLI	5304	61	83	97	60	92	92	89	97	98	98	98	99	100	100	93	95	100	91	81	81	82	95	81	83									
KLEBSIELLA PNEUMONIAE	1047	0	97	93	93	97	95	93	98	98	98	99	98	96	97	94	99	95	94	97	96	97	28	87	93									
PROTEUS MIRABILIS	613	87	97	100	90	94	97	96	98	98	98	98	98	100	100	97	99	100	98	83	80	84	0	0	84									
ENTEROBACTER CLOACAE	240	0	0	91	0	0	2	31	2	92	90	100	100	100	100	98	98	100	88	96	95	97	21	86	85									
KLEBSIELLA OXYTOCA	169	0	94	97	83	64	98	92	98	98	98	98	100	100	100	94	99	100	97	100	99	99	65	96	99									
CITROBACTER FREUNDII	145	0	0	99	0	0	6	83	8	91	91	100	100	100	100	96	99	100	93	96	94	94	95	85	90									
ENTEROBACTER AEROGENES	99	0	0	95	0	0	1	82	3	90	89	100	100	100	100	100	99	100	95	99	99	99	14	96	98									
SERRATIA MARCESCENS	98	0	0	98	0	0	28	0	0	97	98	100	100	100	100	99	99	100	98	97	95	98	0	21	98									
MORGANELLA MORGANII	92	0	1	100	0	0	40	1	0	95	89	100	100	100	100	99	100	100	100	62	62	64	0	42	66									
CITROBACTER KOSERI	75	0	8	100	86	95	92	81	98	100	100	100	100	100	100	100	100	100	100	100	99	100	73	92	100									
ACINETOBACTER SP.	43		84						0	63	71				91	93	100	100			74	77			58	81								
PSEUDOMONAS AERUGINOSA	676		97									2	93	90		96	91	97	98	70					76	78								
ENTEROCOCCUS SP., VSE	1029																				71	72		97	27				97					
ENTEROCOCCUS SP., VRE	42																				2	2		19	57			10		0	78			
STAPH. AUREUS, MSSA	1768				100											100					93	93	96	98	96	99	88	68		100	0	100	100	
STAPH. AUREUS, MRSA	1044															100					46	47	68	100	97	99	79	13		0	0	99	100	
STAPH. SPECIES, COAG.NEG	629															94					45	46	62	98	83	88	72	42		41	0	99	100	
HAEM INFLUENZAE COMM WIDE	134	67						99		100											99	95	95		99	83					98			
STREP PNEUMONIAE COMM WIDE	310							95		96												98	99		85	77	96	67	67	66/91#		100		
BETA HEMOLYTIC STREP, GRP A ***	50																												84	82	82		100	100
BETA HEMOLYTIC STREP, GRP B ****	50																													64	50		100	100

* Isolates susceptible to Amoxicillin/clavulanate are also susceptible to Ampicillin/sulbactam.

91 % were in the intermediate or susceptible range indicating most could be treated for pneumonia with appropriate dosing of an IV penicillin.

Gentamicin and Rifampin may be used in conjunction with another antibiotic (not as a single agent) to treat staph infections.

**Note: isolates are from all sources; urine blood, respiratory, wound, etc.

***Note: Feb/Mar 2009 surveillance of isolates from throat cultures; 50% adults, 50% pediatrics and the same resistance rate was found in both groups.

****Note: Feb/Mar 2009 surveillance of vaginal isolates from OB patients

The percentage in red are greater than or equal to 80% susceptibility, potentially useful for empiric therapy.

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2009 OUTPATIENT ANTIBIOGRAM

DATA ARE PERCENT SUSCEPTIBLE
Jan. 2008 – Dec. 2008

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