Antibiogram
Chatham-Kent Health Alliance

A Guide to Interpreting the Antibiogram

- The antibiogram is an annual cumulative report of the antimicrobial susceptibility rates of common pathogens recovered from patients receiving care at Chatham-Kent Healthcare Alliance facilities and is to be used as a resource to inform empirical antimicrobial therapy.
- Susceptibility rates are calculated from the compilation of susceptibility results from all 'first' clinical isolates of a specific pathogen recovered from an individual patient per 30-day period. The rationale for this referral period is based on the need to represent 'wild-type' susceptibility profiles and avoid over-representing antimicrobial resistance that may develop de novo during a patient's prolonged hospital stay.
- Susceptibility rates for pathogens or clinical scenarios represented by less than 30 isolates are not calculated due to their limited statistical significance and interpretive value.
- The appropriateness of empiric therapy is highlighted using a colour range that corresponds to susceptibility rates. Green, 80-100%; Yellow, 70-79%; Red, <70%.

2021 Antibiogram
Chatham-Kent Health Alliance

Organism	Number of Isolates	Ampicillin	Amoxacillin-Clavulanate	Piperacillin-Tazobactam	Cloxacillin	Cephalexin (urinary tract)	Cefazolin	Ceftriaxone	Ceftazidime	Imipenem	Meropenem	Ciprofloxacin	Clindamycin	Gentamicin	Tobramycin	TMP-SMX	Vancomycin
Escherichia coli	986	67	88			91	79	93		100		82		94	92	85	
Klebsiella pneumoniae complex	238		97			96	89	98		99		92		98	98	95	
Proteus mirabilis	66	91	98					98			100	95		95	97	94	
Enterobacter cloacae complex	38							82		92		97		100	100	97	
Klebsiella oxytoca	54		91					91		96		96		100	100	100	
Pseudomonas aeruginosa	93			86					84	63	85	75		88	91		
Staphylococcus aureus	321				76								79			100	100
MRSA	78				0								83			100	100

Enterobacter, Citrobacter, Klebsiella aerogenes and *Serratia* species are intrinsically resistant to ampicillin, cefazolin, and cefuroxime and may develop resistance to broader-spectrum beta-lactams during prolonged beta-lactam therapy.