

Antibiogram - 2022

Woodstock General Hospital

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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 Woodstock General Hospital 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%.

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Organism	Number of Isolates	Ampicillin	Amoxicillin-Clavulanate	Piperacillin-Tazobactam	Cloxacillin	Cephalexin (urinary tract)	Cefazolin	Ceftriaxone	Ceftazidime	Imipenem	Meropenem	Ciprofloxacin	Clindamycin	Doxycycline	Gentamicin	Tobramycin	TMP-SMX	Vancomycin
<i>Escherichia coli</i>	795	64	90			92	81	93		99		85			94	94	84	
<i>Klebsiella pneumoniae</i> complex	126		96			94	89	94		99		90			97	98	91	
<i>Proteus mirabilis</i>	73	86	99					99			100	86			92	92	82	
<i>Enterobacter cloacae</i> complex	38							92		95		95			100	100	92	
<i>Klebsiella oxytoca</i>	34		91					91		100		94			94	94	94	
<i>Pseudomonas aeruginosa</i>	103			94					92	76	90	91			98	100		
<i>Staphylococcus aureus</i> (incl. MRSA)	167				67								80	100			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.

<https://www.lhsc.on.ca/palm/labs/microbiology.html#main-content>