Antimicrobial Susceptibility Report

January 1, 2018 to December 31, 2018

Waterloo Wellington LTC (Excluding Hospitals)

Urinary Tract Pathogens (in Order of Frequency) - % Susceptible

Organism	Number of Isolates	Amox clavulanic	Ampicillin	Cefazolin (1)	Ceftazidime	Ceftriaxone	Ciprofloxacin	Gentamicin	Meropenem	Nitrofurantoin	Trimethoprim-Sulfamethoxazole
E. coli ^	465	84	50	82		85	62	91	100	95	73
Klebsiella pneumoniae *	117	99		93		93	92	97	100	51	91
Enterococcus species ^^^^	109										
Proteus mirabilis +	86	100	83	91		93	80	90	100		86
Pseudomonas aeruginosa	44				91		93	95			
Group B Streptococcus ^^	<30										

Organism Notes:

* Includes ESBL and AMP-C isolates (6.8% of total Klebsiella pneumoniae isolates identified as ESBL and AMP-C).

^ Includes ESBL and AMP-C isolates (14.0% of total E.coli isolates identified as ESBL and AMP-C). In Ontario, E.coli is found to be 97.5% susceptible to Fosfomycin.

^^ This isolate is predictably susceptible to Penicillin.

^^^^ Clindamycin, Trimethoprim/Sulfamethoxazole and all Cephalosporins are ineffective against Enterococcus species. Enterococcus isolates recovered from urine are generally susceptible to amoxicillin and nitrofurantoin. Susceptibility to Amoxicillin is 97.5% and to Nitrofurantoin is 96.6%

+ Includes ESBL and AMP-C isolates (4.7% of total Proteus mirabilis isolates identified as ESBL and AMP-C).

Antibiotic Notes:

(1) Cefazolin interpretation predicts results for Cephalexin (Keflex) in accordance with CLSI standards for urinary sites only (not systemic).

All Other Specimen Types excluding (Urines and Surveillance) - Organisms in Order of Frequency - % Susceptible

Organism	Number of Isolates	Cefazolin	Ceftazidime	Ciprofloxacin	Clindamycin	Cloxacillin	Erythromycin	Gentamicin	Tetracycline (2)	Trimethoprim-Sulfamethoxazole
Staphylococcus aureus ^^^	190	61			44	61	40		98	99
Pseudomonas aeruginosa	93		95	86				90		
Group B Streptococcus ^^	<30									

Organism Notes:

^^ This isolate is predictably susceptible to Penicillin.

^^^ Includes Methicillin Resistant S.aureus (MRSA). MRSA is resistant to all B-Lactams (penicillins, cephalosporins, B-lactam/B-lactamase inhibitor combinations, and carbapenems). MRSA constitutes 38.9% of total Staphylococcus aureus isolates identified.

Antibiotic Notes:

(2) Organisms that are susceptible to Tetracycline are also considered susceptible to Doxycycline.

General Notes:

Antibiogram results, patient risk factors for resistant organisms, and resistance epidemiology should be considered together to help guide empiric treatment of initial infections. Treatment should be re-evaluated as additional information from culture and sensitivity become available.

Calculation of results based on first isolate per patient.

- 90-100% of isolates are susceptible to the antibiotic indicated (GOOD CHOICE)
- 21-89% of isolates are susceptible to the antibiotic indicated (INTERMEDIATE CHOICE)
- 0-20% of isolates are susceptible to the antibiotic indicated (POOR CHOICE)
- Value based on < 30 isolates. Statistical comparison on results with less than 30 isolates is unreliable. n = # of isolates tested.
- Antibiotic susceptibility testing is not typically performed on the organism.