

ANTIBIOTICS

ANTIMICROBIAL SUSCEPTIBILITY PROFILE for 2025 Organisms Isolated in 2024

	Number tested	Penicillin	Ampicillin	Amoxicillin/Clav	Ampicillin/Sulbac	Oxacillin	Cefazolin (1 st generation) ⁶	Cefoxitin (2 nd generation)	Cefuroxime (2 nd generation)	Ceftazidime (3 rd generation)	Ceftriaxone (3 rd generation)	Cefepime	Clindamycin	Tetracycline	Doxycycline	Tobramycin	Gentamicin	Ertapenem	Meropenem	Piperacillin/Tazo	Vancomycin	Daptomycin	Linezolid	Levofloxacin	Ciprofloxacin	Trimeth/Sulfa	Nitrofurantoin(UTI only)	Rifampin*
Escherichia coli (non-ESBL)	1758		63	88	70		96	95	94	99	98	100				94	94	99	99	96				82	86	82	97	
Escherichia coli ESBL (Rate 7%)	142			59	31			79		65		83				63	66	100	100	91				16	20	51	91	
Klebsiella pneumoniae (non-ESBL)	384			96	90		98	96	95	100	99	100				98	98	100	100	98				91	93	95	34	
Klebsiella pneumoniae ESBL (Rate 9.6%)	41			65	26			92		48		90				70	73	100	97	80				9	19	19	11	
Klebsiella oxytoca	132			92	73		85	97	96	98	94	100				97	98	100	100	94				95	95	95	86	
Klebsiella aerogenes ⁷	46									76	76	100				100	100	100		76				91	95	100	18	
Citrobacter freundii ⁷	48									75	75	100				100	100	100	100	81				93	93	95	97	
Enterobacter cloacae complex ⁷	187									80	77	99				99	99	100	100	79				95	95	94	31	
Proteus mirabilis	179		77	100	88		92	92	93	98	93	97				90	90	100	100	100				67	67	73		
Pseudomonas aeruginosa ³	251									94		94				99	95		90	94				80	88			
Staphylococcus aureus MSSA ^{4,5,8}	475				100								84	94	97		98				100	100	100	89	89	99	100	99
Staphylococcus aureus MRSA ^{4,8} (Rate 34%)	246												70	76	80		98				100	100	100	24	23	93	100	98
Staphylococcus epidermidis ^{4,8}	240				36								62	80	81		92				99	100	100	78	78	64	98	98
Enterococcus faecalis	441		99																		100	94	100	93	91		100	
Enterococcus faecium	49		34																		97		100	45	39		30	
Enterococcus faecium VRE (20%)	12																						100				20	
Streptococcus pneumoniae ^{1,2,8}	41	100								100			90	92							100			100		95		

EXPRESSED IN % SUSCEPTIBLE

Blank indicates insufficient data, inappropriate organism/drug combination, or susceptibility less than 10%.

*Rifampin should not be used as a single agent.

1. Penicillin for *S. pneumoniae* percent sensitive using meningitis breakpoint is 82% , using non-meningitis breakpoint is 100%

2. Ceftriaxone for *S. pneumoniae* percent sensitive using meningitis breakpoint is 95% , using non-meningitis breakpoint is 100%.

3. Pseudomonas may test as sensitive to Ceftazidime in vitro but may produce an inducible beta-lactamase in vivo.

4. All Staphylococci are tested for inducible Clindamycin resistance. If inducible resistance is detected, the isolate is reported as resistant.

5. Methicillin (oxacillin)-susceptible Staphylococcus aureus are considered susceptible to: Beta-lactam combination agents, Cefdinir, Cephalixin, Cefazolin and Ceftriaxone.

6. Cefazolin is a surrogate test for oral cephalosporins in uncomplicated UTIs. Oral cephalosporins predicted by Cefazolin include: Cefaclor, Cefdinir, Cefpodoxime, Cefprozil, Cefuroxime, and Cephalexin.

7. Enterobacter, Klebsiella aerogenes, Citrobacter and Serratia may develop resistance within 3-4 days of therapy with 3rd generation cephalosporins. Repeat testing may be warranted.

8. Organisms that are susceptible to tetracycline are also considered susceptible to doxycycline and minocycline. However, some organisms that are intermediate or resistant to tetracycline may be susceptible to doxycycline or minocycline, or both.

This Chart is for the use of PMC physicians in choosing empiric therapy prior to definitive test results.