

Kadlec Regional Medical Center - 2025 Antibigram

Numbers = % susceptible, R = intrinsic resistance, S = inferred susceptibility, Blank = not tested/reported
Calculated from 1st isolate per patient per year using KRMCC inpatient/ED 2024 culture data, reporting a minimum n = 30

Gram-Positive Organisms	n	Ampicillin	Cefazolin	Ceftriaxone	Ceftriaxone (meningitis)	Clindamycin	Daptomycin	Doxycycline	Erythromycin	Gentamicin (synergy)	Levofloxacin	Linezolid	Nitrofurantoin (urine)	Oxacillin	Penicillin G	Penicillin (non-meningitis)	Penicillin (meningitis)	Penicillin (oral)	Tetracycline	Trimethoprim + Sulfamethoxazole	Vancomycin
<i>Enterococcus faecium</i> **	46	46	—	—	—	—	—	—	—	—	44	100	34	—	—	—	—	—	—	R	76
<i>Enterococcus faecalis</i>	183	100	—	—	—	100	35	11	100	93	100	98	—	—	—	—	—	—	32	R	100
<i>Staphylococcus aureus</i> (MSSA - 64%)	432	—	S	—	—	81	100	99	75	99	—	100	100	100	—	—	—	—	95	99	100
<i>Staphylococcus aureus</i> (MRSA - 36%)	240	—	R	—	—	63	100	93	11	97	—	100	100	R	—	—	—	—	83	97	100
<i>Staphylococcus</i> (coagulase-negative)	142	—	61	—	—	60	100	92	47	94	—	100	100	61	—	—	—	—	83	81	100
<i>Staphylococcus lugdunensis</i>	44	—	95	—	—	75	100	100	75	100	—	100	100	95	—	—	—	—	97	97	100
<i>Streptococcus pneumoniae</i> ‡	33	—	—	100	100	93	—	—	90	—	100	100	—	—	100	100	87	87	93	84	100
<i>Streptococcus viridans</i> group	76	91	—	97	—	73	—	—	69	—	91	100	—	—	—	88	—	—	—	—	100

** Susceptibility rates for reported organisms calculated using culture data from KRMCC over the past 2 years due to low annual sample size.

‡ *S. pneumoniae*: lower MICs are used to determine susceptibilities for CNS isolates and when using oral penicillins.

- Erythromycin predicts S for azithromycin and clarithromycin for *S. pneumoniae*. Avoid macrolide monotherapy for CAP due to national resistance concerns.
- Tetracycline predicts S for doxycycline and minocycline for *S. pneumoniae*.

Gram Positive Resistance Trends: MRSA Rate = 36%. VRE (faecium only) = 24%.

Gram-Negative Organisms	n	Amikacin	Ampicillin	Ampicillin + Sulbactam	Amoxicillin + Clavulanate	Cefazolin (urine)*	Cefepime	Ceftazidime	Ceftriaxone	Ertapenem	Ciprofloxacin	Gentamicin	Levofloxacin	Meropenem	Minocycline	Nitrofurantoin (urine)	Piperacillin + Tazobactam	Tetracycline	Tobramycin	Trimethoprim + Sulfamethoxazole
<i>Acinetobacter</i> (all species)**	34	100	—	100	—	—	100	97	30	—	100	100	100	100	—	—	85	—	100	97
<i>Citrobacter freundii</i>	41	100	R	R	R	R	100	73	73	97	97	97	97	100	—	92	77	—	97	90
<i>Enterobacter cloacae</i> complex	99	100	R	R	R	R	100	83	79	98	96	100	97	100	—	48	84	—	98	96
<i>Escherichia coli</i>	1107	99	56	69	86	87	97	95	90	99	81	91	82	99	—	97	95	—	91	77
<i>Klebsiella</i> (Enterobacter) aerogenes	39	100	R	R	R	R	100	74	74	94	94	100	97	100	—	20	69	—	100	100
<i>Klebsiella oxytoca</i>	84	100	R	71	90	77	98	96	90	100	96	95	98	100	—	90	89	—	94	90
<i>Klebsiella pneumoniae</i>	243	100	R	92	97	98	100	100	100	100	97	99	98	100	—	30	96	—	99	96
<i>Morganella morganii</i>	30	100	R	R	R	R	100	90	96	100	68	76	76	100	—	R	100	—	93	70
<i>Proteus mirabilis</i>	154	100	79	87	93	98	96	99	96	100	77	92	79	100	—	R	99	—	93	80
<i>Pseudomonas aeruginosa</i>	237	99	R	R	R	R	97	95	R	R	91	—	85	87	—	R	90	—	98	R
<i>Serratia species</i>	42	100	R	R	R	R	100	100	97	100	95	95	95	100	—	R	87	—	92	100
<i>Stenotrophomonas maltophilia</i> **	49	—	—	—	—	—	—	25	—	—	—	—	97	—	100	—	—	—	—	97

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* Cefazolin susceptibility rates may be used to predict results for oral cephalosporins (cefalexin, cefuroxime, cefpodoxime) for uncomplicated UTIs caused by *E. coli*, *K. pneumoniae*, and *P. mirabilis*. Applicable only for urinary isolates.

Gram Negative Resistance. ESBL Rate (*E. coli*, *K. pneumoniae*, *K. oxytoca*, *P. mirabilis*) = 8% (124/1588). CRE Rate = 0.06%

- Major ESBL risk factor: Over 90% of isolated ESBLs had known history of ESBL positive culture.

Legend

≥ 80% (Appropriate for empiric use)
70 - 79%
< 70% (Avoid empiric use)