### Blood Isolates - % Susceptible

≥80% Susceptible  70-79% Susceptible ≤69% Susceptible			c	Amoxicillin-Clavulanic acid		Penicillin IV (meningitis)	Penicillin IV (non-meningitis)	Piperacillin-Tazobactam	em	W.	ni		ne	Ceftriaxone (meningitis)	Ceftriaxone (non-meningitis)	ıme	rcin	ıycin	ine	acin	acin	Trimethoprim-Sulfamethoxazole	cin	cin		cin	
	#	%	Ampicillin	Amoxicil	Penicillin	Penicillir	Penicillir	Piperacil	Meropenem	Ertapenem	Cloxacillin	Cefazolin	Ceftriaxone	Ceftriaxo	Ceftriaxo	Ceftazidime	Clindamycin	Erythromycin	Doxycycline	Ciprofloxacin	Moxifloxacin	Trimetho	Gentamicin	Tobramycin	Amikacin	Vancomycin	Linezolid
ALL BACTERIA	1360	-	27	46				73	74	64		33	50									58					
ALL GRAM-NEGATIVE BACTERIA	793	100	15	47				67	97	79		26	53			68				72		65	91	84	97		
Escherichia coli	368	46	28	63				71	100	98		36	72			72				57		70	88	72	96		
Pseudomonas aeruginosa	134	17						83	85							83				87			92	98	97		
Klebsiella pneumoniae	100	13	0	82				81	99	95		58	84			84				82		80	96	90	97		
Enterobacter cloacae	48	6	0	0				4	98	93		0	0			0				91		93	98	98	98		
Klebsiella oxytoca	23	3	0	82				83	100	100		9	86			86				100		95	96	100	100		
Proteus mirabilis	41	5	40	97				98	100	100		38	97			97				90		89	92	100	100	'	
Serratia marcescens	21	3	0	0				0	100	100		0	0			0				100		100	100	95	100		
Stenotrophomonas maltophilia '	16	2																			75	94					
Morganella morganii	15	2	0	0				0	100	100		0	0			0				67		60	80	87	100		
Citrobacter koseri	13	2	0	0				8	100	100		0	0			0				100		100	100	100	92		
Citrobacter freundii	9	1	0	0				0	100	89		0	0			0				89		89	100	89	100		
Citrobacter braakii	5	1	0	0				20	100	75		0	0			0				100		100	100	100	100		
ALL GRAM-POSITIVE BACTERIA	567	100	44	44	7			81	43	43	36	43	47				41	36				49				99	
Coagulase-negative staphylococci	373	66						36	36	36	36						58	32	85			77				100	100
Staphylococcus aureus, all isolates	244	43						84	84	84	84	84					79	68	93			99				100	100
- methicillin-susceptible	208	37						99	99	99	99	99					80	74	95			99				100	100
- methicillin-resistant (MRSA)	36	6						0	0	0	0	0					72	31	81			100				100	100
Enterococcus faecalis, all isolates	202	36	99	99				100																		100	
Enterococcus faecium, all isolates	51	9	24	24				24																		86	
- vancomycin-susceptible	44	8	26	26				26																		100	
- vancomycin-resistant (VRE)	7	1	14	14				14																		0	100
Viridans group streptococci°	29	5											86													100	
Group B streptococci**	24	4			100												75	75								100	
Group A streptococci**	11	2			100												60	60								100	
Streptococcus pneumoniae	5	1				67	67							50	50		67	60			100					100	

## General Notes:

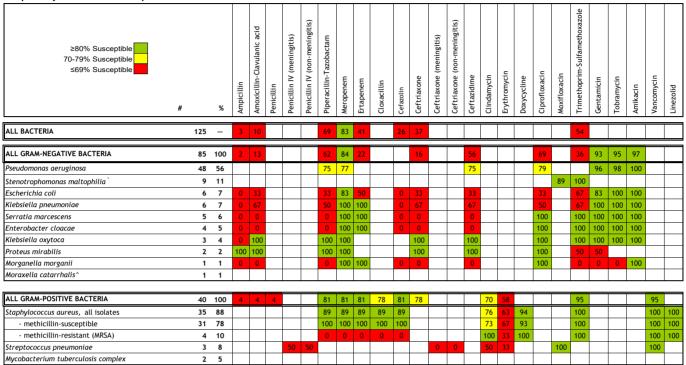
- > Statistical validity of estimates of percent susceptibility for organisms for which there are fewer than 30 isolates reported is limited. Please take this into consideration when interpreting the reported
- > Some organisms for which there were only very small numbers have been excluded from this report; however the total number of "ALL BACTERIA", "ALL GRAM-NEGATIVE BACTERIA", and "ALL GRAM-NEGATIVE BACTERIA".
- > Reported susceptibilities for "ALL BACTERIA", "ALL GRAM-NEGATIVE BACTERIA", and "ALL GRAM-POSITIVE BACTERIA" reflect estimates only based on the weighted average of susceptibilities for all
- ightharpoonup Susceptibility to doxycycline was predicted based on tetracycline susceptibility testing results.

### Year-Specific Notes:

> Only a limited number of coagulase negative staphylococci isolates were tested for susceptibilities. The vast majority of coagulase-negative staphylococci are susceptible to vancomycin. If you have Organism-Specific Notes:

- \*\* Beta-hemolytic streptococci: Susceptibilty testing to penicillin is not routinely performed since resistant strains have not been recognized. All isolates are considered susceptible to penicillin.
- \* Viridans group streptococci: Please note that only a small proportion of these isolates were tested for susceptibilities. Please take this into consideration when interpreting the reported results.
- $\hbox{` S. maltophilia: Susceptibility to moxifloxacin was predicted based on levofloxacin susceptibility testing results.}\\$

### Respiratory Isolates - % Susceptible



#### General Notes:

- > Statistical validity of estimates of percent susceptibility for organisms for which there are fewer than 30 isolates reported is limited. Please take this into consideration when interpreting the reported
- > Some organisms for which there were only very small numbers have been excluded from this report; however the total number of "ALL BACTERIA", "ALL GRAM-NEGATIVE BACTERIA", and "ALL GRAM-NEGATIVE BACTERIA", and
- > Reported susceptibilities for "ALL BACTERIA", "ALL GRAM-NEGATIVE BACTERIA", and "ALL GRAM-POSITIVE BACTERIA" reflect estimates only based on the weighted average of susceptibilities for all
- > Susceptibility to doxycycline was predicted based on tetracycline susceptibility testing results.

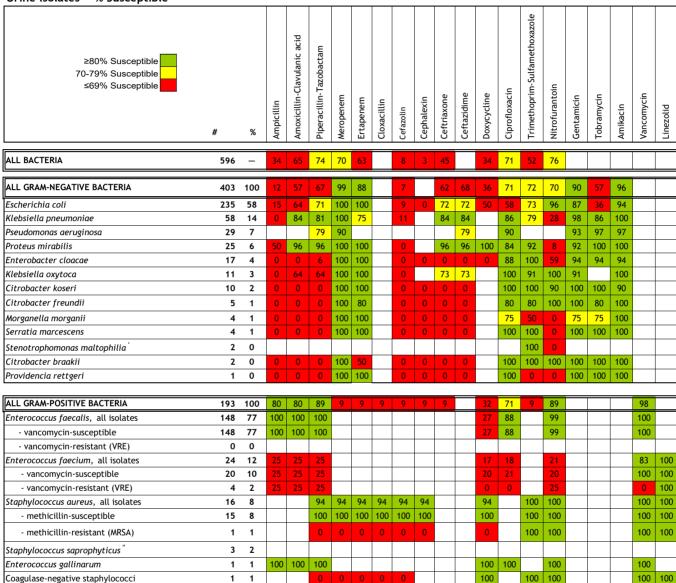
### Organism-Specific Notes:

- ^ M. catarrhalis: Susceptibility testing is not routinely performed. Most isolates are resistant to ampicillin and amoxicillin but are generally susceptible to other antibiotics commonly used for respiratory
- $\hbox{` S. maltophilia: Susceptibility to moxifloxacin was predicted based on levofloxacin susceptibility testing results.}\\$

Prepared by University Health Network/Mount Sinai Hospital Department of Microbiology

December 24, 2024

## Urine Isolates - % Susceptible

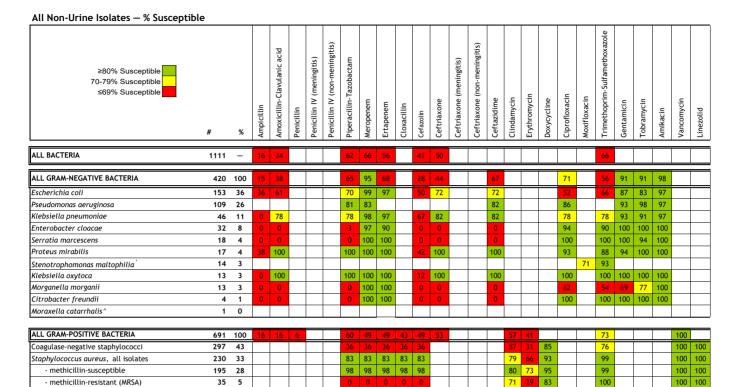


# General Notes:

- > Statistical validity of estimates of percent susceptibility for organisms for which there are fewer than 30 isolates reported is limited. Please take this into consideration when interpreting the reported results.
- > Some organisms for which there were only very small numbers have been excluded from this report; however the total number of "ALL BACTERIA", "ALL GRAM-NEGATIVE BACTERIA", and "ALL GRAM-POSITIVE BACTERIA" listed includes these organisms.
- > Reported susceptibilities for "ALL BACTERIA", "ALL GRAM-NEGATIVE BACTERIA", and "ALL GRAM-POSITIVE BACTERIA" reflect estimates only based on the weighted average of susceptibilities for all organisms included on this report as well as those that have been excluded, with assumptions made for those drugs for which susceptibilities were not tested
- $\succ$  Susceptibility to doxycycline was predicted based on tetracycline susceptibility testing results.

# Organism-Specific Notes:

- " S. saprophyticus: Susceptibility testing is not routinely perfomed. Most urinary tract infections due to this organism respond to nitrofurantoin, trimethoprim/sulfamethoxazole or fluoroquinolones.
- 'S. maltophilia: Susceptibility to moxifloxacin was predicted based on levofloxacin susceptibility testing results.



### General Notes:

> Statistical validity of estimates of percent susceptibility for organisms for which there are fewer than 30 isolates reported is limited. Please take this into consideration when interpreting the

100

- > Some organisms for which there were only very small numbers have been excluded from this report; however the total number of "ALL BACTERIA", "ALL GRAM-NEGATIVE BACTERIA", and "ALL GRAM-
- > Reported susceptibilities for "ALL BACTERIA", "ALL GRAM-NEGATIVE BACTERIA", and "ALL GRAM-POSITIVE BACTERIA" reflect estimates only based on the weighted average of susceptibilities for all
- $\succ$  Susceptibility to doxycycline was predicted based on tetracycline susceptibility testing results.

### Organism-Specific Notes:

Enterococcus faecalis, all isolates

Enterococcus faecium, all isolates

Viridans group streptococci°

Group B streptococci\*

Group A streptococci\*\*

Group C streptococci\*\*

Streptococcus pneumoniae

- ^ M. catarrhalis: Susceptibility testing is not routinely performed. Most isolates are resistant to ampicillin and amoxicillin but are generally susceptible to other antibiotics commonly used for
- \*\* Beta-hemolytic streptococci: Susceptibilty testing to penicillin is not routinely performed since resistant strains have not been recognized. All isolates are considered susceptible to penicillin.
- \* Viridans group streptococci: Please note that only a small proportion of these isolates were tested for susceptibilities. Please take this into consideration when interpreting the reported results.
- ' S. maltophilia: Susceptibility to moxifloxacin was predicted based on levofloxacin susceptibility testing results.

10

4 1

100

66

29 4

25 4

24 3

11 2

5 1

Prepared by University Health Network/Mount Sinai Hospital Department of Microbiology

December 24, 2024

100

100

100

100

100

100

100

75 75