

VCMC ED / INPATIENT

VCMC ED/IP ANTIBIOGRAM 2024 GRAM NEGATIVE % SUSCEPTIBLE (Of Isolates tested)	# of isolates tested	Amp/Sulbactam	Cefazolin*	Cefepime	Ceftazidime	Ceftriaxone	Ciprofloxacin	Ertapenem	Gentamicin	Meropenem	Nitrofurantoin*	Pip/Tazobactam	Tobramycin	Trimethoprim/Sulfa
<i>E. coli</i>	573	60	84	90	87	87	75	100	88	(100)	97	95	88	88
<i>Enterobacter cloacae</i>	33	0	0	91	N	N	97	91	100	(100)	33	84	100	100
<i>Klebsiella aerogenes</i>	17	0	0	100	N	N	100	100	100	(100)	6	76	100	100
<i>Klebsiella pneumoniae</i>	117	77	85	90	85	76	100	97	91	(100)	21	95	88	81
<i>Proteus mirabilis</i>	51	82	90	96	90	90	82	100	90	(100)	0	100	92	80
<i>Pseudomonas aeruginosa</i>	75	0	0	100	100	0	83	0	99	96	0	88	97	0
<i>Serratia marcescens</i>	12	N	N	100	100	83	83	92	100	N	0	(100)	92	83

* Nitrofurantoin and Cefazolin: use only for the treatment of uncomplicated cystitis.

Cefazolin results predict results for oral cephalexin and cefuroxime when used to treat uncomplicated cystitis.

X: not tested

N: not recommended

(): presumed susceptibility

15 % of *E. coli* are Extended Spectrum Beta Lactamase (ESBL) Producing.

15 % of *Klebsiella pneumoniae* are ESBL producing.

VCMC ED/IP ANTIBIOGRAM 2024 GRAM POSITIVE % SUSCEPTIBLE (of Isolates tested)	# of isolates tested	Amp/Sulbactam	Ampicillin	Cefazolin	Cefepime	Ceftriaxone	Ciprofloxacin	Clindamycin	Daptomycin	Levofloxacin	Oxacillin	Penicillin	Doxycycline	Trimethoprim/Sulfa	Vancomycin
<i>Staphylococcus aureus</i> (MSSA)	294	N	0	(100)	X	X	N	94	100	N	100	0	100	94	100
<i>Staphylococcus aureus</i> (MRSA)	122	0	0	0	0	0	N	95	100	N	0	0	94	86	100
<i>Staphylococcus epidermidis</i>	29	N	0	X	X	X	N	54	100	N	29	0	86	N	100
<i>Enterococcus faecalis</i>	182	X	98	0	0	0	N	0	100	N	X	X	20	0	98
<i>Enterococcus faecium</i>	37	X	31	0	0	0	N	0	X	N	X	X	40	0	51

X: not tested

N: not recommended

(): presumed susceptibility

(m): susceptibility results for Ceftriaxone and Penicillin if treating meningitis. If not treating meningitis, % susceptibility for Ceftriaxone and Penicillin is 100%.

29% of *Staphylococcus aureus* are Methicillin Resistant (MRSA).

71% of *Staphylococcus aureus* are Methicillin Susceptible (MSSA).

Data from isolate totals < 30 may be statistically unreliable.

VCMC/SPH Antimicrobial Stewardship Committee 02/20/2025

Santa Paula Hospital ED / Inpatient

SPH ED/IP ANTIBIOGRAM 2024 GRAM NEGATIVE % SUSCEPTIBLE (of Isolates tested)	# of isolates tested	Amp/Sulbactam	Cefazolin*	Cefepime	Ceftazidime	Ceftriaxone	Ciprofloxacin	Ertapenem	Gentamicin	Meropenem	Nitrofurantoin*	Pip/Tazobactam	Tobramycin	Trimethoprim/Sulfa
<i>E. coli</i>	204	61	82	88	83	83	72	100	82	(100)	98	96	83	66
<i>Klebsiella pneumoniae</i>	29	79	79	86	79	79	81	96	93	(100)	14	93	83	82
<i>Proteus mirabilis</i>	27	85	85	100	85	93	81	96	96	(100)	0	100	100	81
<i>Pseudomonas aeruginosa</i>	22	0	0	81	86	0	77	0	95	86	0	74	100	0

*Nitrofurantoin and cefazolin: use only for the treatment of uncomplicated cystitis.

Cefazolin results predict results for oral cephalexin and cefuroxime when used to treat uncomplicated cystitis.

X: not tested

N: not recommended

(): presumed susceptibility

19% of *E. coli* are Extended Spectrum Beta Lactamase (ESBL) Producing.

17% of *Klebsiella pneumoniae* are ESBL Producing.

SPH ED/IP ANTIBIOGRAM 2024 GRAM POSITIVE % SUSCEPTIBLE (of Isolates tested)	# of isolates tested	Amp/Sulbactam	Ampicillin	Cefazolin	Cefepime	Ceftriaxone	Ciprofloxacin	Clindamycin	Daptomycin	Erythromycin	Levofloxacin	Oxacillin	Penicillin	Doxycycline	Trimethoprim/Sulfa	Vancomycin
<i>Staphylococcus aureus</i> (MSSA)	39	N	X	(100)	X	X	N	85	100	N	N	100	0	95	85	100
<i>Staphylococcus aureus</i> (MRSA)	23	0	X	0	0	0	N	86	100	N	N	0	0	100	91	100
<i>Enterococcus faecalis</i>	34	X	94	0	0	0	N	0	96	0	N	X	X	15	0	98

X: not tested

N: not recommended

(): presumed susceptibility

37% of *Staphylococcus aureus* are Methicillin Resistant (MRSA).

63% of *Staphylococcus aureus* are Methicillin Susceptible (MSSA).

Streptococcus pneumoniae: too few isolates to report.

Data from isolate totals < 30 may be statistically unreliable.

VCMC/SPH Antimicrobial Stewardship Committee 2/20/2025.