

## 2016 Antibiogram Outpatient Community Providers (January-December)

Relative Total Cost Per Day PO <sup>1</sup>		\$	\$\$\$	\$	\$\$\$	\$	\$
Gram Negative Organisms Legend: • Susceptible Reported as % • (Maximum # strains tested) ↑> 5% increase in Susceptibility from Previous  ✓> 5% decrease in Susceptibility from Previous		Cefazolin³	Ceftriaxone	Ciprofloxacin	Levofloxacin	Trimethoprim/sulfa	Nitrofurantoin Urinary Tract Infections only
Escherichia coli	(1764)	70 <sup>3</sup>	94	78	78	81	96
Enterobacter species <sup>2</sup>	(89)	0	85	98	99	90	41
Klebsiella species	(424)	63 <sup>3</sup> ♠	85	84 <b>↑</b>	85♠	81	43 <b>↑</b>
Proteus species	(147)	82 <sup>3</sup>	99	71 <b>↑</b>	76 <b>↑</b>	77 <b>↑</b>	0
Pseudomonas aeruginosa	(180)	-	-	79	74	-	-

Relative Total Cost Per Day PO <sup>1</sup>		\$	\$	\$	\$	\$	\$\$\$	\$	\$	\$	\$	\$	\$
Gram Positive Organisms Legend: • Susceptible Reported as % • (Maximum # strains tested) ↑ > 5% increase in Susceptibility from Prev  ✓> 5% decrease in Susceptibility from Prev		Ceftriaxone Non-meningitis	Ceftriaxone Meningitis	Clindamycin	Erythromycin	Levofloxacin	Linezolid	Penicillin	Penicillin Non-meningitis	Penicillin Meningitis	Tetracycline	Trimethoprim/sulfa	Nitrofurantoin Urinary Tract Infections only
Staphylococcus aureus	(552)	-	-	73	35♥	72	100	0	-	-	97	97	100
Staphylococcus coagulase negative	(172)	-	-	65	46	65♥	100	0	-	-	85 <b>↓</b>	77 <b>介</b>	99
Enterococcus faecalis	(194)	-	-	-	-	71	100	98	-	-	-	-	100
Enterococcus faecium <sup>2,5</sup>	(15)	-	-	-	-	3/15	100	2/15	-	-	-	-	2/15
Streptococcus pneumoniae <sup>2</sup>	(44)	98	82	77	55	100	100	-	98	57	75	-	-
Streptococcus agalactiae (Group B) <sup>2</sup>	(35)	-	-	46	46	100	100	100	-	-	-	_	-

- 1. Relative Total Cost per Day PO/IV for Treatment: Green = Least expense, Red = Most expense
- 2. Trend assessment not provided due to low number of isolates.
- 3. Cannot differentiate Cefazolin Susceptible from Intermediate categories by testing method on non urinary tract specimens. Results valid only when used as therapy for uncomplicated UTI.
- 4. For serious enterococcal infections, combination therapy with a beta lactam and an aminoglycoside should be used. *E. faecium* data are based on first isolate per patient within calendar year.
- 5. Due to low number of isolates, reported as actual number of isolates susceptible.