

Summary compiled by the Bridgeport Hospital Antibiotic Surveillance Team
 Susceptibility testing carried out by the Clinical Microbiology Laboratory
 January 1st, 2023 – December 31st, 2023
 PERCENT FULLY SUSCEPTIBLE*

GRAM-NEGATIVE ORGANISMS	# of isolates	Antibiotic									
		Ampicillin	Ampicillin / Sulbactam	Piperacillin / Tazobactam	Ceftriaxone	Cefazolin	Ceftazidime	Cefepime	Ciprofloxacin	Tobramycin	TMP / SMX
<i>Acinetobacter baumannii</i> †	79	--	98	--	--	--	--	--	--	--	--
<i>Citrobacter freundii</i>	65	--	--	--	--	--	--	80	94	--	
<i>Enterobacter cloacae</i>	128	--	--	--	--	--	--	97	98	88	
<i>Escherichia coli</i>	4058	56	65	97	92	84 ^o	--	82	90	77	
<i>Haemophilus influenzae</i> †	386	72	--	--	100 ^o	--	--	--	--	77	
<i>Klebsiella aerogenes</i>	118	--	--	--	--	--	--	98	99	99	
<i>Klebsiella oxytoca</i>	101	--	77	94	91	--	--	92	92	90	
<i>Klebsiella pneumoniae</i>	900	--	80	92	88	84 ^o	--	88	92	85	
<i>Proteus mirabilis</i>	419	86	91	99	96	88 ^o	--	88	94	90	
<i>Pseudomonas aeruginosa</i>	584	--	--	89	--	--	90	90	88	97	
<i>Serratia marcescens</i>	68	--	--	--	97	--	--	97	81	100	
<i>Stenotrophomonas maltophilia</i>	37	--	--	--	--	--	--	--	--	89 [†]	

GRAM-POSITIVE ORGANISMS	# of isolates	Antibiotic							
		Penicillin	Ampicillin	Oxacillin / Cefazolin	Vancomycin	Clindamycin	Gentamicin	TMP / SMX	Doxycycline
<i>Staphylococcus aureus</i>	1247	--	--	67	100	75	--	95	96
Coagulase neg. <i>Staph.</i>	589	--	--	53	100	68	--	--	89
<i>Enterococcus faecalis</i>	623	--	99	--	97	--	87 [✓]	--	--
<i>Enterococcus faecium</i>	143	--	16	--	33	--	93 [✓]	--	--
<i>Pneumococcus</i>	57	95 [♥]	--	--	--	--	--	--	--

- * Consecutive clinical isolates, duplicate isolates excluded.
- † Isolate count and susceptibilities reflect YNHH data as the number of isolates from BH is below the reportable limit.
- ◇ Urine isolates only.
- ◆ Beta-lactamase positive strains are resistant to ampicillin. To date, no ceftriaxone resistance have been reported.
- ‡ Minocycline has 100% susceptibility to *Stenotrophomonas maltophilia*.
- ✓ High-level gentamicin sensitivity predicts synergy with cell wall active antibiotics (vancomycin or ampicillin) if susceptible. Gentamicin should not be used alone to treat gram-positive infections. Use traditional gentamicin dosing when using gentamicin as part of combination therapy for a gram-positive organism.
- ♥ 0% ceftriaxone resistant, 63% macrolide (e.g., azithromycin) resistant, 0% moxifloxacin resistant. Reported susceptibilities are for non-meningitis pneumococcal infection.

Antibiotic Selection or Dosing:
 Antibiotic Surveillance Team

MHB 475-248-0655