## Antibiogram Woodstock General Hospital

## A Guide to Interpreting the Antibiogram

- The antibiogram is an annual cumulative report of the antimicrobial susceptibility rates of common pathogens recovered from patients receiving care at the Woodstock General Hospital and is to be used as a resource to inform empirical antimicrobial therapy.
- Susceptibility rates are calculated from the compilation of susceptibility results from all 'first' clinical isolates of a specific pathogen recovered from an individual patient per 30-day period. The rationale for this referral period is based on the need to represent 'wild-type' susceptibility profiles and avoid over-representing antimicrobial resistance that may develop de novo during a patient's prolonged hospital stay.
- Susceptibility rates for pathogens or clinical scenarios represented by less than 30 isolates are not calculated due to their limited statistical significance and interpretive value.
- The appropriateness of empiric therapy is highlighted using a colour range that corresponds to susceptibility rates. Green, 80-100%; Yellow, 70-79%; Red, <70%.

## 2021 Antibiogram Woodstock General Hospital

Organism	Number of Isolates	Ampicillin	Amoxacillin-Clavulanate	Piperacilin-Tazobactam	Cloxacillin	Cephalexin (urinary tract)	Cefazolin	Ceftriaxone	Ceftazidime	Imipenem	Meropenem	Ciprofloxacin	Clindamycin	Doxycycline	Gentamicin	Tobramycin	TMP-SMX	Vancomycin
Escherichia coli	726	65	91			91	79	91		99		83			93	93	81	
Klebsiella pneumoniae complex	117		92			90	86	92		98		82			98	94	88	
Proteus mirabilis	50	82	98					94			100	86			84	90	86	
Enterobacter cloacae complex	32							81		100		100			100	94	100	
Klebsiella oxytoca	42		83					86		98		90			93	93	91	
Pseudomonas aeruginosa	87			94					86	76	92	86			95	99		
Staphylococcus aureus (incl. MRSA)	150				75								83	100			99	100

Enterobacter, Citrobacter, Klebsiella aerogenes and Serratia species are intrinsically resistant to ampicillin, cefazolin, and cefuroxime and may develop resistance to broader-spectrum beta-lactams during prolonged beta-lactam therapy.