Blood Isolates — % Susceptible

Blood Isolates — % Susceptible																							
≥80% Susceptible 70-79% Susceptible ≤69% Susceptible	#	%	Ampicillin	Amoxicillin-Clavulanic acid	Penicillin	Piperacillin-Tazobactam	Meropenem	Ertapenem	Cloxacillin	Cefazolin	Ceftriaxone	Ceftazidime	Clindamycin	Erythromycin	Doxycycline	Ciprofloxacin	Moxifloxacin	Trimethoprim-Sulfamethoxazole	Gentamicin	Tobramycin	Amikacin	Vancomycin	Linezolid
ALL BACTERIA	127	_	12	20		38	49	39		28	33							55					
																						=	<u>—</u>
ALL GRAM-NEGATIVE BACTERIA	48	100	17	40		57	100	65		35	50	54				71		72	85	87	100		
Escherichia coli	13	27	38	77		75	100	100		69	85	85				77		75	85	85	100		
Klebsiella pneumoniae	8	17	0	62		62	100	100		62	62	62				75		62	62	62	100		
Stenotrophomonas maltophilia '	8	17															88	100				<u> </u>	
Pseudomonas aeruginosa	7	15				57	100					86				86			86	100	100		
Serratia marcescens	4	8	0	0		0	100	100		0	0	0				100		100	100	100	100		
ALL GRAM-POSITIVE BACTERIA	79	100	9	9	4	28	23	23	20	23	25		41	31				44				99	
Coagulase-negative staphylococci	53	67				14	14	14	14	14			43	29	86			43				100	100
Staphyloccocus aureus, all isolates	10	13				80	80	80	80	80			80	80	90			100				100	100
- methicillin-susceptible	8	10				100	100	100	100	100			88	88	88			100				100	100
- methicillin-resistant (MRSA)	2	3				0	0	0	0	0			50	50	100			100				100	100
Enterococcus faecium, all isolates	8	10	0	0		0																88	
- vancomycin-susceptible	7	9	0	0		0																100	
- vancomycin-resistant (VRE)	1	1	0	0		0																0	100
- vancomycin-susceptible (vanA+)	0	0																					
Viridans group streptococci°	4	5			75						100											100	
Enterococcus faecalis, all isolates	4	5	100	100		100																100	
- vancomycin-susceptible	4	5	100	100		100																100	
- vancomycin-resistant (VRE)	0	0																					

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.
- > ICUs include MSICU.

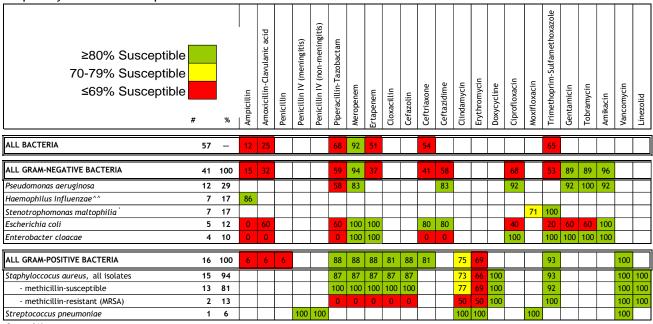
Year-Specific Notes:

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 any questions, please contact the UHN/MSH Department of Microbiology.

Organism-Specific Notes:

- * 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.
- $\hbox{` S. } \textit{maltophilia}: \ \ \text{Susceptibility to moxiflox} \textit{acin was predicted based on levoflox} \textit{acin susceptibility testing results}.$

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 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
- > Susceptibility to doxycycline was predicted based on tetracycline susceptibility testing results.
- > ICUs include MSICU.

Year-Specific Notes:

> Susceptibility for cefazolin are not available for Gram-negative isolates from non-sterile site specimens for the current year.

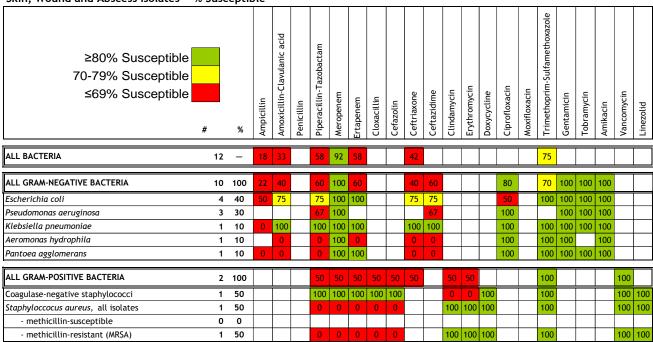
Organism-Specific Notes:

- ^^ H. influenzae and H. parainfluenzae: Susceptibility to ampicillin was determined using beta-lactamase testing. Beta-lactamase-positive isolates are resistant to ampicillin but are generally susceptible to amoxicillin-clavulanic acid and cefuroxime.
- ' S. maltophilia: Susceptibility to moxifloxacin was predicted based on levofloxacin susceptibility testing results.

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

August 08, 2017

Skin, Wound and Abscess Isolates - % Susceptible



General Notes:

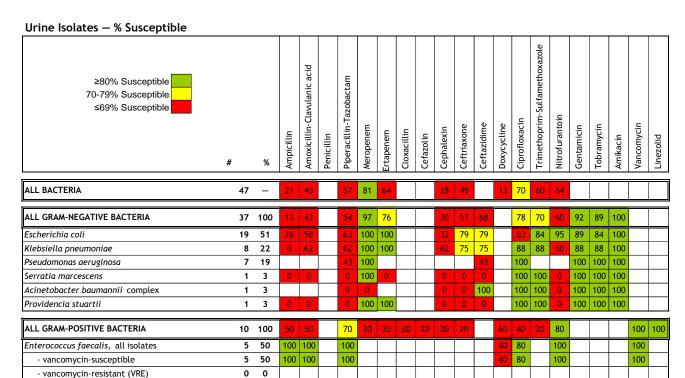
- > Statistical validity of estimates of percent susceptibility for organisms for which there are fewer than 30 isolates reported is limited. Please take this into consideration when interpreting the reported results.
- > Some organisms for which there were only very small numbers have been excluded 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.
- > ICUs include MSICU.

Year-Specific Notes:

> Susceptibility for cefazolin are not available for Gram-negative isolates from non-sterile site specimens for the current year.

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

August 08, 2017



General Notes:

Staphyloccocus aureus, all isolates

- methicillin-resistant (MRSA)

Enterococcus faecium, all isolates

- vancomycin-resistant (VRE)

- vancomycin-susceptible (vanA+)

- vancomycin-susceptible

- methicillin-susceptible

- > 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.

100 100 100 100 100

100 | 100 | 100 | 100 | 100 | 100

- > 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.
- > Susceptibility to doxycycline was predicted based on tetracycline susceptibility testing results.
- > ICUs include MSICU.

Year-Specific Notes:

> Susceptibility for cefazolin are not available for Gram-negative isolates from non-sterile site specimens for the current year.

20

20

2

0 0

3 30

3 30

0 0

0 0

100 100

100

100

100 100