GRAM POSITIVE COCCI
% Susceptible/ # Strains Tested

BAY AREA HOSPITAL
2025 ANTIBIOGRAM

Paul Michaels MD, Pathologist
Lamont Wettstein MD, Pathologist

	PENICILLIN##	AMPICILLIN	OXACILLIN	CEFAZOLIN	CEFUROXIME	CEFTRIAXONE	CEFTAROLINE	DAPTOMYCIN	GENTAMICIN ***	GENT SYNERGY ***	VANCOMYCIN	TETRACYCLINE^	CLINDAMYCIN #	ERYTHROMYCIN	AZITHROMYCIN	RIFAMPIN	CIPROFLOXACIN	LEVOFLOXACIN	TRIMETH / SULFA	NITROFURANTOIN^X	LINEZOLID
S. aureus			**100%**	**100%**			**100%**	**99%**	**99%**	-	**100%**	**94%**	**87%**	**74%**	**74%**	**99%**	**81%**	**83%**	**99%**	**100%**	**100%**
MSSA			450	411			452	452	452		452	452	415	415	415	452	452	452	452	37	452
S. aureus			**R**	**R**			99%	99%	**97%**	-	**100%**	**77%**	**81%**	**10%**	**11%**	**100%**	**24%**	**25%**	**98%**	**100%**	**100%**
MRSA			228	228			228	228	228		228	228	209	228	209	228	228	228	227	19	228
Staphylococcus			**60%**	**60%**				99%	**89%**	-	**100%**	**86%**	**70%**	**56%**	**56%**	**97%**	**78%**	**79%**	**77%**	**100%**	**99%**
coagulase neg			174	174				175	175		175	175	140	140	140	175	175	175	173	35	175
Enterococcus	**38%**	**38%**								**92%**	**62%**			**0%**		**15%**	**8%**				**100%**
faecium*	13	13								13	13			8		13	13				13
Enterococcus	**99%**	**99%**								**90%**	**100%**			**8%**		**44%**	**77%**				**99%**
faecalis	144	144								144	144			36		144	144				144
VRE*										**100%**				**0%**		**0%**	**0%**				**100%**
										4				3		4	4				144
Streptococcus pneumoniae (non-meningitis) *	**94%**					**100%**					**97%**		**97%**	**84%**	**84%**			**100%**	**97%**		-
	32					25					32		32	32	32			32	32		
COST / DAY	$	$	$	$	$	$	$$$$	$	$	$	$ - $$ Dose Dependent	$	$	$$	$	$ - $$$ Dose Dependent	$	$	$ - $$ Dose Dependent	$	$

(*) There is less statistical validity for organisms with ≤30 isolates.
(R) If MRSA report Oxacillin, Penicillin's and Cefazolin as Resistant.
(X) In uncomplicated cystitis, Nitrofurantoin is preferred agent, when box appears green
(^) Organisms that are susceptible to Tetracycline are considered susceptible to Doxycycline and Minocycline. Tetracycline not available as IV.
(#) Clindamycin reported after testing for inducible Clindamycin resistance.
(##) For non-meningitis *Streptococcus pneumoniae* outpatient therapy, Amoxicillin is a recommended agent of choice for oral therapy as a stepdown therapy. Sensitivity is based on Penicillin data.
(***) Use only in combination with other agents that test susceptible.

GREY box not tested, or not indicated for use.

KEY TO APPROXIMATE COST:
All costs are for IV except: Cefuroxime, Doxycycline, Nitrofurantoin, and Trimeth/Sulfa
$=$1-25
$$=$26-100
$$$=$101-200
$$$$=>$200

COLOR KEY:
Antibiotics highlighted in YELLOW and RED should be avoided when treating empirically.
RED: ≤74% susceptible. Not recommended for empiric therapy based on typical susceptibility patterns.
YELLOW: 75-89% susceptible
GREEN: Primary choice , Tier 1 usage

Developed in partnership with the Antimicrobial Stewardship Program.

GRAM NEGATIVE BACILLI
% Susceptible/ # Strains Tested

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2025 ANTIBIOGRAM

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	AMPICILLIN	AMP / SULBACTAM	PIP / TAZOBACTAM**	CEFAZOLIN *(or Cephalexin)*	CEFTRIAXONE	CEFTAZIDIME	CEFTAZADIME/AVIBA	CEFEPIME	AZTREONAM	GENTAMICIN	TOBRAMYCIN	ERTAPENEM ##	MEROPENEM ##	CIPROFLOXACIN	LEVOFLOXACIN	MINOCYCLINE	TRIMETH/SULFA	NITROFURANTOIN[X]
Citrobacter freundii*			79%		67%	71%	100%	88%	62%	92%	92%	100%	100%	88%	92%	75%	88%	90%
			24		24	24	**24**	24	24	24	24	24	24	24	24	**24**	24	20
Enterobacter cloacae			91%		89%	91%	100%	100%	81%	98%	98%	98%	100%	88%	95%	95%	84%	52%
			57		57	57	**55**	57	57	57	57	57	57	57	57	**57**	57	29
Escherichia coli (Non-ESBL)	72%	75%	99%	84%	98%	98%	100%	99%	99%	95%	93%	99%	100%	90%	92%	94%	87%	99%
	846	846	846	846	846	846	846	846	846	846	846	846	846	846	846	**846**	846	739
Escherichia coli (ESBL)	R	33%	95%	R	R	R	100%	R	R	67%	62%	100%	100%	23%	36%	92%	44%	86%
	39	39	**39**	39	39	39	39	39	39	39	39	39	39	39	39	**39**	39	36
Klebsiella aerogenes*			90%		80%	83%	100%	97%	90%	100%	97%	100%	100%	97%	100%	90%	97%	45%
			30		30	30	**30**	30	30	30	30	30	30	30	30	**30**	30	22
Klebsiella oxytoca		72%	90%	14%	88%	90%	100%	90%	88%	94%	94%	100%	100%	90%	100%	92%	90%	100%
		50	50	50	50	50	**50**	50	50	50	50	50	50	50	50	**50**	50	34
Klebsiella pneumoniae		90%	99%	92%	96%	96%	100%	96%	96%	96%	96%	99%	100%	88%	97%	90%	92%	65%
		156	156	156	156	156	**156**	156	156	156	156	156	156	156	156	**156**	156	120
Morganella morganii		3%	97%		74%		100%	95%	61%	95%	92%	100%	100%	92%	92%	61%	92%	
		38	38		38		**38**	38	38	38	38	38	38	38	38	**38**	38	
Proteus mirabilis	84%	89%	100%	78%	94%	94%	100%	98%	94%	86%	85%	100%	100%	83%	85%	5%	86%	
	157	157	157	157	157	157	**157**	157	157	157	157	157	157	157	157	**157**	157	
Pseudomonas aeruginosa			96%			94%	99%	96%	89%		98%		98%	87%	86%			
			162			162	**162**	162	162		162		162	162	162			
Serratia marcescens			79%		71%	59%	100%	97%	65%	100%	65%	100%	100%	88%	97%	97%	100%	
			34		34	34	**34**	34	34	34	34	34	34	34	34	34	34	
Acinetobacter baumannii*		100%			100%	92%		100%		92%			100%			100%	92%	
		12			12	12		12		12			12			**12**	12	
COST / DAY	$	$	$	$	$	$$		$	$$$$	$	$	$$	$	$	$		$/$$	$

(*) There is less statistical validity for organisms with ≤30 isolates.
(R) If ESBL E. coli, report Penicillin's, Cephalosporin's, and Aztreonam as Resistant.
(X) In uncomplicated cystitis, Nitrofurantoin is preferred agent, when box appears green
(#) Resistance to Carbapenems may be due to mechanisms other than carbapenemase production.
(**) Studies show questionable efficacy in serious infections and increased mortality w/treatment using Pip/Tazo vs. Cabapenem.

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