### Selected Gram Positive Organisms
(% Susceptible)

| Organism (% susceptible) | Maximum # of isolates tested | Amoxicillin | Cephalothin | Chloramphenicol | Erythromycin | Gentamicin | Levofloxacin | Linezolid | Metronidazole | Nafcillin | Oxacillin | Penicillin | Tobramycin | Trimethoprim | Vancomycin |
|--------------------------|-------------------------------|-------------|-------------|-----------------|--------------|-------------|--------------|-------------|---------------|-----------|------------|------------|------------|-------------|-------------|-------------|-------------|
| *Staphylococcus aureus*   | 269                           | 95          | 83          | 77              | 37           | 22          | 37           | 41          | 70            | 86        | 59         | 52         | 46         | 33          | 20          | 30          | 26          | 15          |

Blank cells - insufficient data or drug was not tested. H - HNC, U - UWMCC MSSA, methicillin-susceptible *S. aureus*; MSSA, methicillin-resistant *S. aureus*.

- *Pseudomonas* or *Escherichia coli* may be effective in patients with pneumonia (and no meningitis) caused by *S. pneumoniae* with intermediate susceptibility.
- *S. pneumoniae* vs. *Escherichia coli*: 1% resistant and 13% intermediate at HNC; 8% resistant and 6% intermediate at UWMC.
- *S. pneumoniae* vs. penicillin: 3% resistant and 20% intermediate at HNC; 13% resistant and 10% intermediate at UWMC.
- *E. coli* is indicated in urinary tract infection only.
- Methicillin resistance for all *S. aureus* isolates at HNC was 64%, at UWMC was 50%. Indole-positive *B. subtilis* resistance for all *S. aureus* isolates at HNC was 4%, and at UWMC was 12%.
- Phenotypic beta-lactam susceptibility testing is unreliable for ceftriaxone-negative *Staphylococcus aureus*. Molecular testing for mecA (methicillin-resistance) is required before isolates can be reported as susceptible.
- All UWMC molecular testing for mecA (methicillin-resistance) was performed on all *Staphylococcus aureus*, coag seg isolates.
- Current susceptibility methods may fail to detect single-step mutations conferring low-level levofloxacin resistance.

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### University of Washington School of Medicine

**2007 Antibiogram**

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