



Antimicrobial Stewardship Collaborative
of South Carolina

2020 Midlands Regional Antibiogram All Systemic Isolates

	# isolates	Ampicillin	Ampicillin/sulbactam	Amoxicillin/clavulanate	Piperacillin/ Tazobactam	Cefazolin	Cefuroxime	Ceftriaxone	Ceftazidime	Cefepime	Aztreonam	Meropenem	Ertapenem	Gentamicin	Tobramycin	Amikacin	Ciprofloxacin	Levofloxacin	Trimeth/sulfa	Nitrofurantoin
Gram Negative Organisms																				
<i>Acinetobacter baumannii complex</i>	92	R	100	R	79	R	R	73	NR	93	R	80	R	100	100	NR	75	100	91	R
<i>Klebsiella (formerly Enterobacter) aerogenes</i>	176	R	R	R	80	R	NR	79	NR	99	96	100	98	100	100	NR	95	98	97	36
<i>Enterobacter cloacae complex</i>	311	R	R	R	75	R	NR	82	NR	93	69	97	87	97	95	NR	94	90	89	44
<i>Escherichia coli</i>	4889	48	59	79	96	88	93	92	85	95	95	100	100	91	92	100	77	67	76	96
<i>Klebsiella oxytoca</i>	134	R	63	91	95	74	NR	94	93	93	91	99	99	99	96	95	100	96	98	91
<i>Klebsiella pneumoniae</i>	1654	R	75	84	93	83	100	89	85	93	96	99	99	99	99	92	99	89	82	69
<i>Proteus mirabilis</i>	971	76	96	96	99	87	100	90	97	77	88	99	100	96	96	100	83	83	88	R
<i>Pseudomonas aeruginosa</i>	1385	R	R	R	86	R	R	R	84	87	60	87	R	90	98	96	84	73	R	R

	# isolates	Oxacillin/nafcillin	Penicillin G	Ampicillin	Ceftriaxone	Gentamicin (synergy)	Rifampin (synergy)	Levofloxacin	Clindamycin	Erythromycin	Tetracycline	Trimeth/sulfa	Nitrofurantoin	Linezolid	Vancomycin	Daptomycin
Gram Positive Organisms																
MSSA	889	100	18	NR	NR	99	NR	85	82	62	93	99	100	100	100	100
MRSA	1315	R	R	R	R	99	98	41	78	15	97	90	100	100	98	99
<i>Streptococcus pneumoniae</i>	78	NR	94	NR	93	NR	NR	100	91	59	83	80	R	100	100	NR
<i>Streptococcus pneumoniae</i> (meningitis)	30	NR	100	NR	100	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR	NR
<i>Enterococcus faecalis</i>	1175	R	100	99	R	NR	NR	79	R	R	42	R	99	100	99	100
<i>Enterococcus faecium</i>	138	R	6	38	R	NR	NR	18	R	R	47	R	34	99	48	NR

NR= not reported, R= intrinsic resistance

Not all antimicrobials were tested against each isolate

Data reported as % susceptible

Individual institutions may have differing resistance patterns, facilities should reference facility-level antibiograms if able