

Regional Pediatric Antibiograms 2021

Updated April 21, 2022

Gram Positive Bacteria

Percent of Strains Susceptible

Regional Antibiogram - 2021 Patients <18 years of age Alton Memorial Hospital, Barnes-Jewish Hospital, Christian Hospital, Memorial Hospital, Parkland Health Center, St. Louis Children's Hospital	# Strains Tested	Percent of Strains Susceptible to Antimicrobial Indicated														
		Ampicillin	Cefazolin	Ceftriaxone	Ceftriaxone (non-meningitis)	Ceftriaxone (meningitis)	Clindamycin	Doxycycline	Erythromycin	Levofloxacin	Linezolid	Oxacillin	Penicillin	Penicillin (non-meningitis)	Trimethoprim-Sulfamethoxazole	Vancomycin
Gram Positive																
<i>Staphylococcus aureus</i>	1019	70	70				79	98	50	100	70				99	99
MRSA*	303	0	0				79	97	19	100	0				99	98
MSSA**	716	100	100				79	99	64	100	100				100	99
<i>Staphylococcus epidermidis</i>	71	28	28				47	88	26	100	28				62	99
<i>Staphylococcus lugdunensis</i> &	49	98	98				81	100	79	100	88				98	100
<i>Enterococcus faecalis</i>	147	100						43		99						100
<i>Streptococcus anginosus</i> group	37		100				86		70			100				100
<i>Streptococcus pneumoniae</i> [#]	66			100	85	89	76	48	100				98	55		100

* Methicillin-Resistant *Staphylococcus aureus*.

** Methicillin-Susceptible *Staphylococcus aureus*.

[#] Susceptibility and resistance of *S. pneumoniae* to azithromycin is predicted by erythromycin.

[&] indicates values are based upon two years of data (2020-2021).

Shaded boxes indicate organism/antimicrobial combinations not tested routinely.

Data based on first isolate per patient.

Regional antibiogram includes first isolate per patient for inpatients, outpatients, and Emergency Department.

Regional Pediatric Antibiograms 2021

Updated April 21, 2022

Gram Negative Bacteria

Percent of Strains Susceptible

Regional Antibiogram - 2021 Patients <18 years of age Alton Memorial Hospital, Barnes-Jewish Hospital, Christian Hospital, Memorial Hospital, Parkland Health Center, St. Louis Children's Hospital	# Strains Tested	Percent of Strains Susceptible to Antimicrobial Indicated																	
		Amikacin	Ampicillin	Ampicillin-Sulbactam	Aztreonam	Cefazolin	Cefepime	Cefiderocol	Ceftolozane-Tazobactam	Ceftriaxone	Ceftazidime	Ciprofloxacin	Gentamicin	Imipenem	Levofloxacin	Meropenem	Minoxycline	Nitrofurantoin [†]	Piperacillin-Tazobactam
Gram Negative Bacilli																			
<i>Enterobacter cloacae</i> complex	84	•	•	•	•	•	95		•	•	95	99			100			•	92
<i>Escherichia coli</i>	808	55	68		93	99			96	97	88	94			100		100	100	79
<i>Escherichia coli</i> - URINE ONLY	751	56	0		95	99			97	98	88	94			100	99	100	79	
<i>Klebsiella oxytoca</i>	55	0			51	100			95	96	96	96			100		96	91	
<i>Klebsiella pneumoniae</i>	95	0	91		94	99			96	96	89	98			99	73	97	92	
<i>Proteus mirabilis</i>	52	83			71	100			98	100	92	92	£		100	‡	100	83	
<i>Pseudomonas aeruginosa</i> (including mucoid phenotype)	213	94			91		97	100	99		98	92	86	92		95	98	92	
<i>Serratia marcescens</i>	57	•	•	•	•	100			•	•	95	88			100		•	96	
<i>Stenotrophomonas maltophilia</i>	63														94	100		95	

[†] Only indicated for uncomplicated cystitis.

• Because of the presence of inducible beta-lactamase, these organisms should be considered resistant to the antimicrobial indicated.

‡ Intrinsically resistant to nitrofurantoin, tetracyclines, and colistin.

£ Low-level resistance to imipenem is common in Proteaceae; imipenem cannot be inferred from meropenem.

Shaded boxes indicate organism/antimicrobial combinations not tested routinely.

Data based on first isolate per patient.

Regional antibiogram includes first isolate per patient for inpatients, outpatients, and Emergency Department.