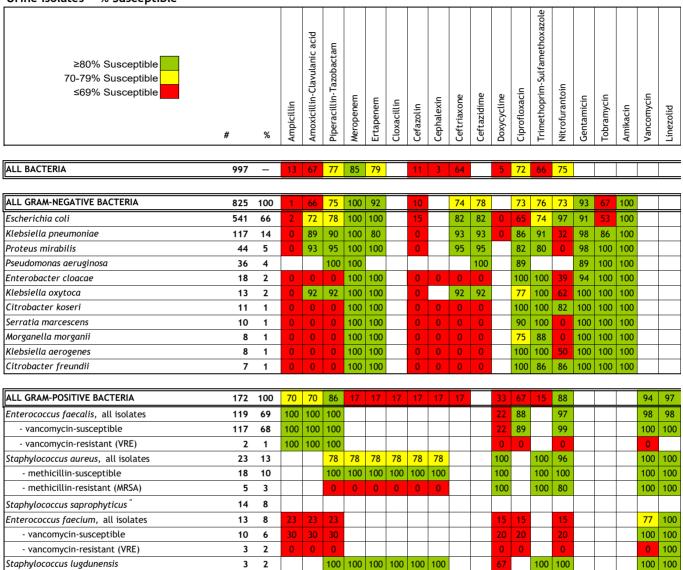
# Toronto Western Hospital ANTIBIOGRAM Emergency Department January 1, 2024 - December 31, 2024

# Urine 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.

# Organism-Specific Notes:

" S. saprophyticus: Susceptibility testing is not routinely performed. Most urinary tract infections due to this organism respond to nitrofurantoin, trimethoprim/sulfamethoxazole or fluoroquinolones.

# Toronto Western Hospital ANTIBIOGRAM Emergency Department January 1, 2024 - December 31, 2024

# Blood Isolates - % Susceptible

Blood Isolates — % Susceptible																											
≥80% Susceptible 70-79% Susceptible ≤69% Susceptible	#	%	Ampicillin	Amoxicillin-Clavulanic acid	Penicillin	Penicillin IV (meningitis)	Penicillin IV (non-meningitis)	Piperacillin-Tazobactam	Meropenem	Ertapenem	Cloxacillin	Cefazolin	Ceftriaxone	Ceftriaxone (meningitis)	Ceftriaxone (non-meningitis)	Ceftazidime	Clindamycin	Erythromycin	Doxycycline	Ciprofloxacin	Moxifloxacin	Trimethoprim-Sulfamethoxazole	Gentamicin	Tobramycin	Amikacin	Vancomycin	Linezolid
				1		1					1					1								1		1	
ALL BACTERIA	840	_	18	28				63	70	68		56	63									83					
																											_
ALL GRAM-NEGATIVE BACTERIA	222		27	65				73	100	_		49	72			76				66		79	94	90	99		
Escherichia coli	131	59	42	67				72		100		55	76			76				53		79	92	86	99		_
Klebsiella pneumoniae	44	20	0	77				80	100			70	82			82				80		84	98	95	100		_
Proteus mirabilis	17	8	31	100				100	100	100		33	100			100				88		81	94	94	100		<u> </u>
Pseudomonas aeruginosa	8	4						100	100							100				100			100	100	100		<u> </u>
Enterobacter cloacae	3	1	0	0				0		100		0	0			0				100		100	100	100	100		
Citrobacter koseri	3	1	0	0				0	100	100		0	0			0				100		100	100	100	100		
Haemophilus influenzae^^	3	1	0																								l
Klebsiella aerogenes	3	1	0	0				0	100	100		0	0			0				100		100	100	100	100		l
Moraxella catarrhalis^	3	1																									
Serratia marcescens	3	1	0	0				0	100	100		0	0			0				100		100	100	100	100		1
																											_
ALL GRAM-POSITIVE BACTERIA	618	100	14	14	8			59	59	59	48		60				72	47				84					
Coagulase-negative staphylococci	456	74						54	54	54	54	54					72	42	88			87				100	100
Staphylococcus aureus, all isolates	62	10						82	82	82	82	82					85	74	97			97				100	100
- methicillin-susceptible	51	8						100	100	100	100	100					84		98			98				100	100
- methicillin-resistant (MRSA)	11	2						0	0	0	0	0					91		91			91				100	100
Group A streptococci**	23	4			100												78	79								100	
Streptococcus pneumoniae	21	3				0	0							95	100		100	79			100					100	
Enterococcus faecalis	18	3	100	100				100																		100	
Viridans group streptococci°	18	3			67								94													100	
Group B streptococci**	8	1			100												62	62								100	
Streptococcus anginosus group°°	7	1			100								100													100	
Group G streptococci**	5	1			100												80	80								100	
Staphylococcus lugdunensis	5	1						80	80	80	80	80					80	80	80			100			1	100	100

## 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.

## Year-Specific Notes:

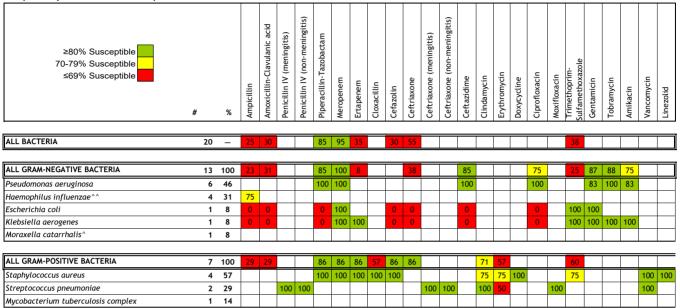
> Only a limited number of coagulase negative staphylococci isolates were tested for susceptibilities. The vast majority of coagulase-negative staphylococci are susceptible to vancomycin. If you have any questions, please contact the UHN/MSH Department of Microbiology.

## Organism-Specific Notes:

- ^ M. catarrhalis: Susceptibility testing is not routinely performed. Most isolates are resistant to ampicillin and amoxicillin but are generally susceptible to other antibiotics commonly used for respiratory infections.
- ^^ 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.
- \*\* Beta-hemolytic streptococci: Susceptibilty testing to penicillin is not routinely performed since resistant strains have not been recognized. All isolates are considered susceptible to penicillin.
- \* 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.
- \*\* S. anginosus group: Please note that only a small proportion of these isolates were tested for susceptibilities. Please take this into consideration when interpreting the reported results.

# Toronto Western Hospital ANTIBIOGRAM Emergency Department January 1, 2024 - December 31, 2024

# 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.

# Organism-Specific Notes:

- ^ M. catarrhalis: Susceptibility testing is not routinely performed. Most isolates are resistant to ampicillin and amoxicillin but are generally susceptible to other antibiotics commonly used for respiratory infections.
- ^^ 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.

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

September 16, 2025

# Toronto Western Hospital ANTIBIOGRAM Intensive Care Units January 1, 2024 - December 31, 2024

# All Specimens - % Susceptible

All Specimens — % Susceptible																													
≥80% Susceptible 70-79% Susceptible ≤69% Susceptible	#	%	Ampicillin	Amoxici llin-Clavulanic acid	Penicillin	Penicillin IV (meningitis)	Penicillin IV (non-meningitis)	Piperacillin-Tazobactam	Meropenem	Ertapenem	Cloxacillin	Cefazolin	Cephalexin	Ceftriaxone	Ceftriaxone (meningitis)	Ceftriaxone (non-meningitis)	Ceftazidime	Clindamycin	Erythromycin	Doxycycline	Cipfrofloxacin	Moxifloxacin	Trimethoprim-Sulfamethoxazole	Nitrofurantoin	Gentamicin	Tobramycin	Amikacin	Vancomycin	Linezolid
									_					1							\			_		_			
ALL BACTERIA	1637	_	23	53				76	84	77		41	19	66						44	75		71	75	<u></u>	Щ		Щ	L
ALL CRAW MEGATIME RACTERIA			17		_								_			T								_		-		_	_
ALL GRAM-NEGATIVE BACTERIA	1038	100	-17	64				76	_	90		32		71			79			30	73		74		93	86	99	_	▙
Escherichia coli	624	60	24	72				78		100		36		82			82			50	64		75	96	91	79	99	-	$\vdash$
Klebsiella pneumoniae	144	14	0	88		_	_	89	100	95		63		92			92			0	86		91	29	99	98	100	<u>—</u>	₽
Pseudomonas aeruginosa	83	8	30	07				98 98	99	400		28		00			98 98			0	85 83		79		93 95	100 89	99	-	1
Proteus mirabilis	64	6	30	97						_		_	_	98						0	96		96	2	_	100	100		-
Enterobacter cloacae	24 17	2	0	94				88	100	100		0	0	94			94				82		100	38 65	96 100	100	100	<del> </del>	-
Klebsiella oxytoca Serratia marcescens	16	2	0	0				0	100	100		0	0	0			0				94		100	0	100	100	100	-	-
Citrobacter koseri	16	2	0	0				0	100	100		0	0	0			0				100		100	75	100		100	<u> </u>	-
Klebsiella aerogenes	12	1	0	0				0	100	100		0	0	0			0				92		100	33	100	-	100	<u> </u>	-
Morganella morganii	11	1	0	0				0	100	100		0	0	0			0				82		91	0	100	100	100	<del></del>	-
Citrobacter freundii	9	1	0	0				0	100	100		0	0	0			0				100		89	89	100		100	<b>-</b>	
Haemophilus influenzae^^	8	1	50	Ť					100	100											100		0,	0,	100	100	100		
Providencia rettgeri	6	1	0	0				0	100	100		0	0	0			0				100		100	0	100	100	100		
. Torracina receger.			Ŭ										Ŭ	_			Ŭ				100					1.00	.00		
ALL GRAM-POSITIVE BACTERIA	599	100	34	34	12			76	57	57	43	57	51	58				57	46	71	79		66	90				94	$\overline{}$
Coagulase-negative staphylococci	527	88						56	56	56	56	56						66	40	87	100		86	100		$\overline{}$		100	100
Staphylococcus aureus, all isolates	283	47						79	79	79	79	79	79					82	68	97	79		100	98		1		100	100
- methicillin-susceptible	223	37						100	100	100	100	100	100					83	73	97	100		100	99				100	100
- methicillin-resistant (MRSA)	60	10						0	0	0	0	0	0					77	48	95			100	92				100	100
Enterococcus faecalis	126	21	100	100				100												22	91			100				100	100
Group A streptococci**	28	5			100													82	76									100	
Staphylococcus lugdunensis	25	4						80	80	80	80	80	80					88	88	84			100	100				100	100
Streptococcus pneumoniae	23	4				50	50								95	100		100	76	100		100						100	Г
Viridans group streptococci°	19	3			68									95														100	
Enterococcus faecium, all isolates	15	3	26	26				26												15	20			20				73	10
- vancomycin-susceptible	11	2	36	36				36												20	27			27				100	100
- vancomycin-resistant (VRE)	4	1	0	0				0												0	0			0				0	10
Staphylococcus saprophyticus "	15	3																											
Streptococcus anginosus group°°	13	2			92									100														100	
Group B streptococci**	10	2			100													67	67									100	
Group G streptococci**	7	1			100													83	83									100	

## General Notes:

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- ${\color{red}\succ} \ {\color{blue} Susceptibility} \ to \ doxycycline \ was \ predicted \ based \ on \ tetracycline \ susceptibility \ testing \ results.$
- > ICUs include MSICU, NICU.

## 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
- $\succ$  All specimens exclude surveillance samples.

# 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.
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