# IC – 825.1 APPENDIX A

# Antibiotic Resistant Organisms

| **Organism** | | | | | |
| --- | --- | --- | --- | --- | --- |
|  | **Definition of Organism Resistance (R)** | **Patients With Respiratory Symptoms** (i.e.: pneumonia)**, Cystic Fibrosis, Artificial Airway** (i.e.: trach, ET tube)**, Pneumonia or Severe Burns** | **Positive (+) Cultures From Other Body Sites and All Other Non-respiratory Patients** | **Duration of Isolation** | **Infection Control will flag record for future inpatient encounters** |
| ***Acinetobacter baumannii:*** | | | | | |
|  | Any + culture isolated until susceptibilities reviewed by Infection Prevention and Control | Droplet Precautions. | Contact Precautions. | Off antibiotics for 1 week and then culture negative from same site. | Yes |
| ***Alkaligenes xylosoxidans:*** | | | | | |
|  | Any + culture isolated until susceptibilities reviewed by Infection Prevention and Control | Droplet Precautions. | Contact Precautions. | Off antibiotics for 1 week and then culture negative from same site. | Yes |
| ***Burkholderia cepacia:*** | | | | | |
|  | Any + culture isolated until susceptibilities reviewed by Infection Prevention and Control | Droplet Precautions | Contact Precautions | Indefinite for CF patients  For infections in non-CF patients, off antibiotics for 1 week and then culture negative from original site | Yes. |
| Enterococcus: | | | | | |
|  | a. Resistance to vancomycin | Droplet Precautions. | Contact Precautions. | Off antibiotics for 1 week and until 3 negative cultures | Yes |
| **Gram negative bacteria** | | | | | |
|  | 1. a. Resistance to 3 or more classes of antibiotics ( broad spectrum PCN, cephalosporins, aminoglycosides, fluoroquinolones, carbepenems) 2. Suspicious for extended spectrum -lactamase production (e.g., MIC >1ug/ml to ceftazidime, cefpodoxine, and others). | Droplet Precautions. | Contact Precautions. | Off antibiotics for 1 week and then culture negative from the same site. | Yes |
| **MRSA (Methicillin Resistant *Staphylococcus Aureus*) - see *Staphylococcus aureus*** | | | | | |
|  | | | | | |
| ***Staphylococcus aureus:*** | | | | | |
|  | If resistant to methicillin/oxacillin.  If intermediate resistance to vancomycin, also notify Infection Prevention and Control ASAP. | Droplet Precautions. | Contact Precautions. | Off antibiotics for at least 1 week and then until 3 negative cultures from nares and site(s) | Yes. |
| ***Stenotrophomonas maltophilia:*** | | | | | |
|  | Any + culture isolated until susceptibilities reviewed by Infection Prevention and Control | Droplet Precautions. | Contact Precautions. | Off antibiotics for 2 week and culture negative from the same site. | Yes. |
| Tuberculosis: | | | | | |
|  | Isolate is resistant to any TB drug and/or TB source has known drug resistant TB and/or clinical suspicion for resistance (per ID or Epidemiology consult). | Airborne Precautions. | Airborne Precautions. | Duration of hospital stay. | Yes, until deemed not contagious (2 weeks Antbx, sputum AFB negative and improved |
| **VRE (Vancomycin Resistant Enterococci) – see Enterococcus** | | | | | |
|  | | | | | |
|  |  |  |  |  |  |
| **Epidemiologically significant organisms:** | | | | | |
|  | Any organisms involved in a cluster of nosocomial infections |  |  |  |  |

***Note: This list should not be considered all inclusive. Other microorganisms with antibiotic-resistance profiles considered by Epidemiology or the Infection Control Committee to be epidemiologically significant may be added. Isolation measures may be implemented or discontinued at the discretion of the infection prevention team or hospital epidemiologist.***