

## ANTIBIOTIC SUSCEPTIBILITIES IN INTENSIVE CARE\*

	GRAM POSITIVE						GRAM NEGATIVE									
	Cocci					Anaero	erobes Cocci/Coccobacilli			Bacilli						
MRSA	S. epidermidis	MSSA	Enterococcus		Ctroptococcus	Clostridium <sup>1</sup> ,	Bacteroides,	Neisseria	Haemophilus	Moravella	E.coli KI	Klebsiella	Proteus	Pseudomonas	ESCHAPPM <sup>2</sup>	Logionalla
WINOA	(coagulase -ve Staphylococcus)		Faec <b>ium</b>	Faec <b>alis</b>	Streptococcus	Peptostreptococcus	Fusobacterium	meningitidis	Haemophilus influenzae	ivioraxella	E.COII	Nieusiella	mirabilis	rseudomonas	organisms	Legionella
					Penicillin			Penicillin								
	Amoxicillin <sup>3</sup>				Amoxicillin					<b>1</b>						
				Amoxicillin-clavulanate												
		ucloxacillin			Flucloxacillin											Azithromycin,
Clindamycin		Clindamycin				Clindamycin <sup>3</sup>		D:( : : /								Erythromycin
Rif	fampicin/Fusidio	c Acid		Fusidic Acid		Metronid	azole <sup>4</sup>	Rifampicin/ Fusidic Acid	Rifam	oicin						
Vancomycin/Teicoplanin⁵, Linezolid, Daptomycin			Vancomycin/ Teicoplanin													
	Co-trimoxazole						Co-trimoxazole								Co-trimoxazole	
	1			Trimethoprim							Trimet	thoprim				Trimethoprim
Gentamicin <sup>6</sup>		Gentamic	cin <sup>6</sup>	Gentamicin/ Tobramycin								Ger	ntamicin/	Tobramycin		
					Ciprofloxacin, Aztreonam								Ciprofloxacin			
	Moxifloxacin						Mo	Moxifloxacin <sup>3</sup>						Moxi	floxacin	
		Cephazolin			Cephazolin			Cepha	azolin			Cephazolir	ו			
	Cefuroxime, Ceftriaxone				Cefuroxime	e, Ceftriaxone			Cefuroxime <sup>7</sup> , Ceftriaxone							
				Ceftazidime <sup>8</sup>												
Cefepime				Cefepime												
						Ticarcillin-clavulanate										
Piperacillin- tazobactam  Meropenem, Imipenem  Imipenem					Piperacillin-tazobactam											
					Meropenem, Imipenem											
Ertapenem										Ertapenem						
	Tigecycline									Tigecy	cline				Tige	cycline

For simplicity, atypical organisms are not included above. Partial columns indicate incomplete coverage. ESBL-producing organisms are not susceptible to most antibiotics containing a beta-lactam ring; carbapenems are the usual agent of choice.

1: C. difficile should only be treated with metronidazole or vancomycin. 2: ESCHAPPM are β-lactamase producing organisms. These are Enterobacter, Serratia, Citrobacter freundii, Hafnia, Acinetobacter/Aeromonas, Proteus (not mirabilis), Providencia & Morganella morganii.

3: Not effective against Clostridium. 4: Metronidazole is not effective against Peptostreptococcus, 5: Teicoplanin is not effective against Enterococcus faecium, 6: Gentamicin is not appropriate mono therapy for Staphylococcus aureus & should only be used in conjunction with a β-lactam.

7: Due to increasing MIC, Cefuxorime is not recommended therapy for Moraxella. 8: Although it has other actions, Ceftazidime should only be used for Pseudomonas.

## **ANTIBIOTIC CLASS KEY**

PENICILLINS	LINCOSAMIDE	MACROLIDES	NITROIMIDAZOLE	RIFAMYCIN	GLYCOPEPTIDES
SULFONAMIDES	AMINOGLYCOSIDES	FLUOROQUINOLONES	CEPHALOSPORINS	CARBAPENEMS	GLYCYLCYCLINE

<sup>\*</sup>This chart is intended as a guide, pending specific identification & sensitivities - it does not replace expert ID advice. Local antibiotic sensitivities & preferences will vary.