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## **2023 OUTREACH Antibiogram**

**Data Are Percent Susceptible**

**January 2022 – December 2022**

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## Choice of Antimicrobial Therapy

### A. Empiric Therapy:

Prior to receiving specific susceptibility results, drugs to which organisms are greater than 80% susceptible are generally considered good choices, although patient history, site of infection, and specific pharmacologic properties as they apply to the particular patient must be taken into account.

### B. Therapeutic Therapy:

The drug of choice for treatment of an infection is usually the most active drug against the pathogenic organism or the organism most likely to cause infection. Choice of drugs should be modified by site of infection and patient's clinical status regarding allergy, renal function, immune status or pregnancy.

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OrganismDisplay	Number of Isolates*	Ampicillin	Amoxicillin/clavulanate	Ampicillin/sulbactam	Piperacillin/tazobactam !!	Cefazolin**	Cefoxitin	Cefepime	Ceftazidime	Ceftriaxone	Enterobactam	Meropenem	Ciprofloxacin	Levofloxacin	Gentamicin++	Tobramycin	Amikacin	Tetracycline (Doxycycline)	Mincycline	Trimethoprim/sulfamethoxazole (Bactrim)	Nitrofurantoin	Clindamycin	Erythromycin	Azithromycin	Oxacillin+	Penicillin	Vancomycin	Rifampin++	Linezolid	Gentamicin-Synergy
ESCHERICHIA COLI	9319	58	86	##	97/98	90	92	94	93	93	100	100	75	71	93	93	100	80	##	81	97									
KLEBSIELLA PNEUMONIAE	2015	0	95	##	89/95	92	95	94	93	93	100	100	88	84	96	95	100	81	##	89	37									
PROTEUS MIRABILIS	888	83	100	##	100/100	96	95	100	99	99	78	100	76	76	97	98	100	0	##	81	0									
ENTEROBACTER CLOACAE COMPLEX	455	0	0	##	72/78	0	0	98	78	73	93	98	89	85	96	96	100	88	##	86	47									
KLEBSIELLA OXYTOCA	357	0	91	##	89/93	71	97	96	96	95	100	100	95	95	97	97	100	92	##	95	88									
SERRATIA MARCESCENS	178	0	0	##	83/100	0	13	100	100	99	96	100	92	88	100	77	100	32	##	100	0									
CITROBACTER KOSERI	164	0	13	##	96/99	99	93	100	100	99	100	100	100	99	98	100	100	97	##	95	92									
MORGANELLA MORGANII	155	0	2	##	95/95	0	33	99	85	90	100	100	71	70	95	97	99	43	##	76	0									
CITROBACTER FREUNDII	143	0	0	##	85/88	1	1	100	83	83	99	100	90	86	99	98	100	89	##	91	95									
SALMONELLA SPECIES	53	92			##					96				87						100										
PROTEUS VULGARIS	33	0	100	##	100/100	0	97	100	97	91	94	100	100	100	94	94	100	0	##	88	0									
PSEUDOMONAS AERUGINOSA	1056	NI	NI	NI	94	NI	NI	92	92	67	NI	90	80	71	96	99	99	NI	NI	NI	NI									
ENTEROCOCCUS SP., VSE	1089	97											81	83				0		95	24					100	100	90		
ENTEROCOCCUS SP., VRE	104	35											4	4				0		36	0					0	100	33		
STAPH. AUREUS, MSSA	1123												87	90	100			91		97	100	76	66	100	100	100	100	100		
STAPH. SPECIES, COAG.NEG	720												68	68	96			80		74	99	63	39	55	99	99	100			
STAPH. AUREUS, MRSA	541												26	27	100			86		90	100	77	18	0	100	99	100			
STAPHYLOCOCCUS SAPRO-	191												99	100				96		96	100			37	100	100	100			
STAPHYLOCOCCUS EPIDE-	40												70	70	82			68		63	100	61	32	48	100	98	100			
STENOTROPH MALTOPHILIA COMM WIDE	257								27					85						100	96									
ACINETOBACT BAUMANII COMM WIDE	162			78	33			40	30	5		47	36	36	45	97	100	30		45										
HAEM INFLUENZAE COMM WIDE	131	72								98								99		76	56									
STREP PNEUMONIAE COMM WIDE	104									96				99						84	83	88	62	62	99#	100		100		

\*\* For uncomplicated UIT's, Cefazolin MIC results less than or equal to 16 mcg/ml predict susceptibility of the following oral cephalosporins: cefactor, cefdinir, cefpodoxime, cefprozil, cefuroxime and  
+ Oxacillin susceptible Staph are also susceptible to other penicillinase resistant penicillins, betalactam/betalactamase inhibitor combinations, cepheps, and carbapenems FDA approved to treat Staph  
++ Gentamicin and Rifampin may be used in combination with other drugs against Staph isolates.  
!! Pip/Taz data for ENTERICS: 1st % is Susceptible (<=8/4) and 2nd % is Susceptible plus Susceptible Dose Dependent (<=16/4)  
# 99% were in the intermediate or susceptible range indicating many could be treated for pneumonia with appropriate dosing of an IV penicillin.  
## No data