

Organism (% susceptible)	Maximum # of isolates tested		Ampic/sulbactam		Cefazolin		Ceftriaxone <sup>b</sup>		Clindamycin <sup>e</sup>		Erythromycin		Gentamicin		Levofloxacin		Linezolid		Moxifloxacin		Nitrofurantoin <sup>d</sup>		Oxacillin		Penicillin <sup>c</sup>		Tetracycline		Trimeth/sulfa		Vancomycin	
	H	U	H	U	H	U	H	U	H	U	H	U	H	U	H	U	H	U	H	U	H	U	H	U	H	U	H	U	H	U	H	U
<i>Staphylococcus</i> , coag neg	241	262 <sup>g</sup>	f	28	f	28			57	49	31	31	72	71	46	37	100	100			100	f	28	f	9	87	87	46	46	100	100	
MSSA <sup>e</sup>	1551	1639	100	100	100	100			96	81	72	67	100	98	90	94	100	100			99		100	100	21	22	95	95	97	98	100	100
MRSA <sup>e</sup>	1558	1059	0	0	0	0			71	60	8	8	99	96	21	27	100	100			100		0	0	0	0	95	94	91	95	100	100
<i>Streptococcus pneumoniae</i> <sup>a</sup>	129	77					84	91	90	74	75	68			95 <sup>h</sup>				100	99				71	62	83	77		70	100	100	

Blank cells = insufficient data or drug is not tested. H = HMC; U = UWMC; MSSA, methicillin-susceptible *S. aureus*; MRSA, methicillin-resistant *S. aureus*

<sup>a</sup> Penicillin or ceftriaxone may be effective in patients with pneumonia (and no meningitis) caused by *S. pneumoniae* with intermediate susceptibility

<sup>b</sup> *S. pneumoniae* vs ceftriaxone: 8% resistant and 8% intermediate at HMC; 7% resistant and 3% intermediate at UWMC

<sup>c</sup> *S. pneumoniae* vs penicillin: 9% resistant and 20% intermediate at HMC; 9% resistant and 29% intermediate at UWMC

<sup>d</sup> Indicated in urinary tract infection only

<sup>e</sup> Methicillin resistance for all *S. aureus* isolates at HMC was 50%, at UWMC was 39%. Inducible clindamycin resistance for all *S. aureus* isolates at HMC was 9%, and at UWMC was 13%.

<sup>f</sup> Phenotypic beta-lactam susceptibility testing is unreliable for coagulase-negative staphylococci. Molecular testing for *mecA* (methicillin-resistance) is required before isolates can be reported as susceptible.

<sup>g</sup> At UWMC, molecular testing for *mecA* (methicillin-resistance) was performed on all *Staphylococcus*, coag neg isolates.

<sup>h</sup> Current susceptibility methods may fail to detect single-step mutations conferring low-level levofloxacin resistance.

Organism (% susceptible)	Maximum # of isolates tested		Ampicillin		Levofloxacin <sup>h</sup>		Nitrofurantoin <sup>d</sup>		Tetracycline		Vancomycin		High level gentamicin		High level streptomycin		Chloramphenicol <sup>j</sup>		Doxycycline <sup>j</sup>		Linezolid <sup>j</sup>		Synercid <sup>j</sup>		Tigecycline <sup>j</sup>					
	H	U	H	U	H	U	H	U	H	U	H	U	H	U	H	U	H	U	H	U	H	U	H	U	H	U	H	U		
<i>Enterococcus faecalis</i> <sup>k</sup>	65	82	98	99		39			37	97	95	68	73	77	71			87	94	67	69	100	98	100	100	81				
<i>Enterococcus faecium</i> <sup>k</sup>	26	260	17	3		0		25		50	38	11	61	62	52	57			87	94	67	69	100	98	100	100	81			
<i>Enterococcus spp.</i> <sup>m</sup>	818	665	87	89	53	49	92	91	21	25	88	98	77	78	73	78	77		87	94	67	69	100	98	100	100	81			

Blank cells = insufficient data or drug was not tested. H = HMC; U = UWMC.

<sup>d</sup> Indicated in urinary tract infection only

<sup>h</sup> Levofloxacin is tested against urinary tract isolates only at HMC and against all isolates at UWMC

<sup>j</sup> Chloramphenicol, doxycycline, linezolid, synercid and tigecycline are tested against VRE only.

<sup>k</sup> Includes all isolates from sterile sites and VRE from non-sterile sites at UWMC.

<sup>m</sup> *Enterococcus spp.* comprises isolates from non-sterile sites at both hospitals and includes VRE from HMC.