

VUMC
Antimicrobial
Susceptibility Summary:
Adult Patients
2024

Table 5. Adults – *Staphylococcus aureus*, % Susceptible

Data represent first isolate per patient.

Organism		N	Oxacillin	Ceftaroline	Clindamycin	Daptomycin	Doxycycline	Linezolid	Nitrofurantoin	Penicillin	Rifampin	Trimethoprim-sulfamethoxazole	Vancomycin
<i>Staphylococcus aureus</i>	All	2600	62	98	86	100	95	100	100	20	99	92	100
MRSA	OP	353	0	96	72	100	92	100	100	0	99	85	100
	IN	527	0	95	69	100	88	99	100	0	99	85	100
	ICU	122	0	94	71	99	93	100	100	0	100	86	99
MSSA	OP	695	100	100	96	100	99	100	100	32	99	97	100
	IN	738	100	100	94	100	98	100	100	33	99	97	100
	ICU	165	100	100	96	100	99	100	100	35	99	98	100

ICU, intensive care unit; IN, inpatient; OP, outpatient (includes emergency department)



Isolation of *S. aureus* in the urine should be followed by a blood culture to confirm the patient is not bacteremic. *S. aureus* bacteremia or suspected invasive infection should be treated with initial IV antibiotics in conjunction with ID consultation.

Table 6. Adults – *Staphylococcus* spp., % Susceptible

Data represent first isolate per patient. Only normally sterile site isolates included.

Organism*	N	Oxacillin	Clindamycin	Daptomycin	Doxycycline	Nitrofurantoin	Penicillin	Vancomycin
<i>Staphylococcus capitis</i>	152	91	84	97	100	100	31	100
<i>Staphylococcus caprae</i>	46	100	100	100	100	100	57	100
<i>Staphylococcus epidermidis</i>	1410	38	64	100	87	99	32	100
<i>Staphylococcus haemolyticus</i>	202	26	52	100	78	100	15	98
<i>Staphylococcus hominis</i>	214	73	73	100	91	100	41	100
<i>Staphylococcus lugdunensis</i>	262	85	90	100	99	100	53	100
<i>Staphylococcus pseudintermedius</i>	45	86	83	100	89	100	47	100
<i>Staphylococcus saprophyticus</i>	222	0	100	100	100	100	0	100
<i>Staphylococcus simulans</i>	66	62	92	100	100	100	31	100

*Trimethoprim-sulfamethoxazole susceptibility available on request