Gram-positive Streptococci and Enterococci % Susceptible	No. Tested	Ampicillin	Amoxicillin	Penicillin IV	Ceftriaxone	Meropenem	Clindamycin	Erythromycin[4]	Levofloxacin	Ciprofloxacin	Linezolid	Nitrofurantoin	Tetracycline	Trimeth-Sulfa	Vancomycin
Streptococci															
Grp. B Streptococcus agalactiae	98	100	SP	100	100	-	38	31	99	-	100	-	23	-	100
Grp. A Streptococcus pyogenes	35	100	SP	100	100	-	94	94	97	-	100	-	89	-	100
Grp. G Streptococci	32	100	SP	100	100	-	94	94	100	-	100	-	75	-	100
S. pneumoniae (Non-meningeal)[4]	58	SP[1]	SP[1]	98	97	86	-	66	96	-	-	-	59	91	SP
S. pneumoniae (Meningeal)[4]	58	-	-	74	88	86	-	-	-	-	-	-	-	-	SP
S. anginosus	64	100	SP[2]	98	98	-	84	69	98	-	100	-	41	-	100
S. constellatus	34	97	SP[2]	94	94	-	71	71	100	-	100	-	65	-	100
Enterococci															
Enterococcus faecalis	479	100	SP[2]	100	R	-	R	13	88[U]	87[U]	98	100[U]	30[U]	R	100
Enterococcus faecium	72	21	-	18	R	-	R	R	18[U]	14[U]	94	21[U]	24[U]	R	50

Gram-positive Staphylococci % Susceptible	No. Tested	Penicillin	Oxacillin[5]	Ceftaroline	Vancomycin	Erythromycin	Clindamycin	Gentamicin[3]	Trimeth-Sulfa	Linezolid	Daptomycin	Nitrofurantoin	Rifampin[3]	Tetracycline
Staphylococcus aureus	983	0	71	100	100	84	82	100	100	100	100	100[U]	100	92
Staphylococcus lugdunensis	79	1	91	-	100	86	85	100	100	100	100	100[U]	100	96
Staphylococcus epidermidis	163	-	32	-	100	32	64	93	61	100	100	100[U]	99	78

Notes

[1] Based on susceptibility to standard dose IV penicillin, susceptibility to oral penicillin, and studies of clinical efficacy, nearly all non-meningeal pneumococcal infections can be effectively treated with IV ampicillin or with high dose oral amoxicillin (in children: 80-100 mg/kg/day divided TID; adult dose and maximum dose in children: 1 g TID)

[2] Susceptibility approximately equivalent to ampicillin

[3] Should only be used in combination with other active agents

[4] Erythromycin susceptibility predicts susceptibility to azithromycin and clarithromycin

Susceptibility
≥ 90%
60-89%
< 60%

Analysis Key	
R	Isolate is resistant
-	Antimicrobial not routinely tested
SP	Susceptibility predicted

Marshfield Labs™

2025 Inpatient Antibiogram

Contact Information

- For susceptibility test questions and data analysis please contact: **Dr. Taylor Wahlig or Dr. Sophie Arbefeville at 715-387-6300 or ext. 16300**
- For antimicrobial stewardship questions please contact: **Philip (Logan) Whitfield at 715-387-7578 or ext. 77578**
- For urgent questions regarding a specific patient case, please consult your local infectious diseases physician

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Gram-negative Enterobacterales % Susceptible	No. Tested	Ampicillin	Amox-clav[2]	Ampicillin-sulb	Piperacillin-tazo	Cefazolin[1]	Cefuroxime	Cefpodoxime	Cefoxitin	Ceftriaxone	Cefepime	Aztreonam	Ertapenem	Meropenem	Amikacin	Gentamicin	Tobramycin	Ciprofloxacin	Levofloxacin	Doxycycline	Nitrofurantoin[U]	Trimeth-Sulfa
Citrobacter freundii complex	94	R	R	R	R	R	R	R	R	R	100	R	100	100	100	95	96	86	86	83	94†	87
Citrobacter koseri	40	R	100	-	100	100	85	100	100	100	100	100	100	100	100	100	100	98	100	100	92†	100
Enterobacter cloacae complex	163	R	R	R	R	R	R	R	R	R	98	R	93	100	100	99	99	95	95	87	31†	93
Escherichia coli	3152	64	85	70	92	68	86	92	92	94	95	95	100	100	99	94	94	83	85	84	98	83
Klebsiella aerogenes	78	R	R	R	R	R	R	R	R	R	100	R	99	100	100	100	100	95	95	96	7†	100
Klebsiella oxytoca	169	R	95	75	93	-	93	96	96	96	98	96	100	100	99	98	98	96	97	95	73†	95
Klebsiella pneumoniae	559	R	92	84	89	80	90	94	97	94	95	94	99	100	100	96	96	89	90	83	24†	93
Morganella morganii	43	R	R	28	100	R	R	-	R	-	-	100	100	100	100	93	95	93	93	67	R	93
Proteus mirabilis	263	83	84	91	100	9	96	97	97	97	97	100	100	100	100	93	95	87	87	R	R	86
Serratia marcescens	61	R	R	R	-	R	R	-	R	97	98	98	100	100	100	100	84	90	90	90	R	100

Analysis Key	
R	Isolate is resistant
-	Antimicrobial not routinely tested

Susceptibility
≥ 90%
60-89%
< 60%

Notes

[U] Use nitrofurantoin for uncomplicated cystitis ONLY

[1] Non-urine isolates only

[2] In the treatment of infections due to *Enterobacterales*, use amoxicillin-clavulanate only for uncomplicated cystitis or step-down therapy for systemic infection

* For urine isolates, check urine culture and susceptibility result history. In the absence of previous resistance, first-line agents for uncomplicated cystitis are TMP/SMX, nitrofurantoin, and cephalexin.

†Based on 2024 data

Gram-negative Non-Enterobacterales % Susceptible	No. Tested	Piperacillin-tazo	Ceftazidime	Cefepime	Meropenem	Tobramycin	Ciprofloxacin	Levofloxacin
P. aeruginosa	372	92	96	95	94	99	88	83