

# Antimicrobial Resistance Surveillance from sentinel public hospitals, South Africa, 2013

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## Introduction

Antimicrobial resistance (AMR) is a key public health concern that threatens effective treatment of antimicrobial infections, both locally and globally. Surveillance is conducted to determine the extent and pattern of resistance amongst the most important disease causing pathogens in humans [1].

## Objectives

1. To determine the number of cases reported from selected hospitals by month for the following organisms isolated from blood cultures: *Acinetobacter baumannii* complex, *Enterobacter cloacae* complex, *Escherichia coli*, *Enterococcus faecalis*, *Enterococcus faecium*, *Klebsiella pneumoniae*, *Pseudomonas aeruginosa* and *Staphylococcus aureus*.
2. To describe the antimicrobial susceptibility to the most important agents by individual pathogen and by hospital

## Methods

The data for this report were sourced from the National Health Laboratory Service (NHLS) Corporate Data Warehouse (CDW). This is a national repository for all public health hospitals in South Africa which contains archived data from two laboratory information systems (LIS), either DISALAB or TrakCare [2].

Bloodstream infections for one year period (January – December 2013) were extracted for the following pathogens:

*Acinetobacter baumannii* complex, *Enterobacter cloacae* complex, *Escherichia coli*, *Enterococcus faecalis*, *Enterococcus faecium*, *Klebsiella pneumoniae*, *Pseudomonas aeruginosa* and *Staphylococcus aureus*. Routine data were collected from sentinel sites (mostly academic sites) (Table 1).

Antimicrobial susceptibility testing reporting was based on CLSI guidelines (3). Table 2 describes the different laboratory methods used at laboratories based at the sentinel sites.

Due to the two different LIS, each with its own coding system of organisms and antibiotics as well as a lack of standardized data capturing across NHLS laboratories, extensive cleaning and recoding of data was necessary. Data cleaning involved creating unique patient identifiers, de-duplication and generation of patient-level data. Data may be incomplete due to missing cases not captured on the LIS or non-standardized coding of pathogens and antibiotics.

**Table 1. Hospital characteristics involved in the surveillance**

<b>Hospital Site</b>	<b>Province</b>	<b>Academic Hospital</b>	<b>No of beds</b>
Charlotte Maxeke Johannesburg Academic Hospital (CMJAH)	Gauteng	Yes	1088
Chris Hani Baragwanath Hospital (CHBH)	Gauteng	Yes	3200
Dr George Mukhari Hospital (DGMH)	Gauteng	Yes	1200
Grey's Hospital (GH)	KwaZulu-Natal	Yes	530
Groote Schuur Hospital (GSH)	Western Cape	Yes	893
Helen Joseph Hospital (HJH)	Gauteng	Yes	700
Inkosi Albert Luthuli Central Hospital (IALCH)	KwaZulu-Natal	Yes	846
King Edward VIII Hospital (KEH)	KwaZulu-Natal	Yes	922
Mahatma Gandhi Hospital (MGH)*	KwaZulu-Natal	No	350
Nelson Mandela Academic Hospital/Mthatha Tertiary (NMAH)	Eastern Cape	Yes	520
RK Khan Hospital (RKKH)*	KwaZulu-Natal	No	543
Steve Biko Academic Hospital (SBAH)	Gauteng	Yes	832
Tygerberg Hospital (TH)	Western Cape	Yes	1310

- \* Non academic sites

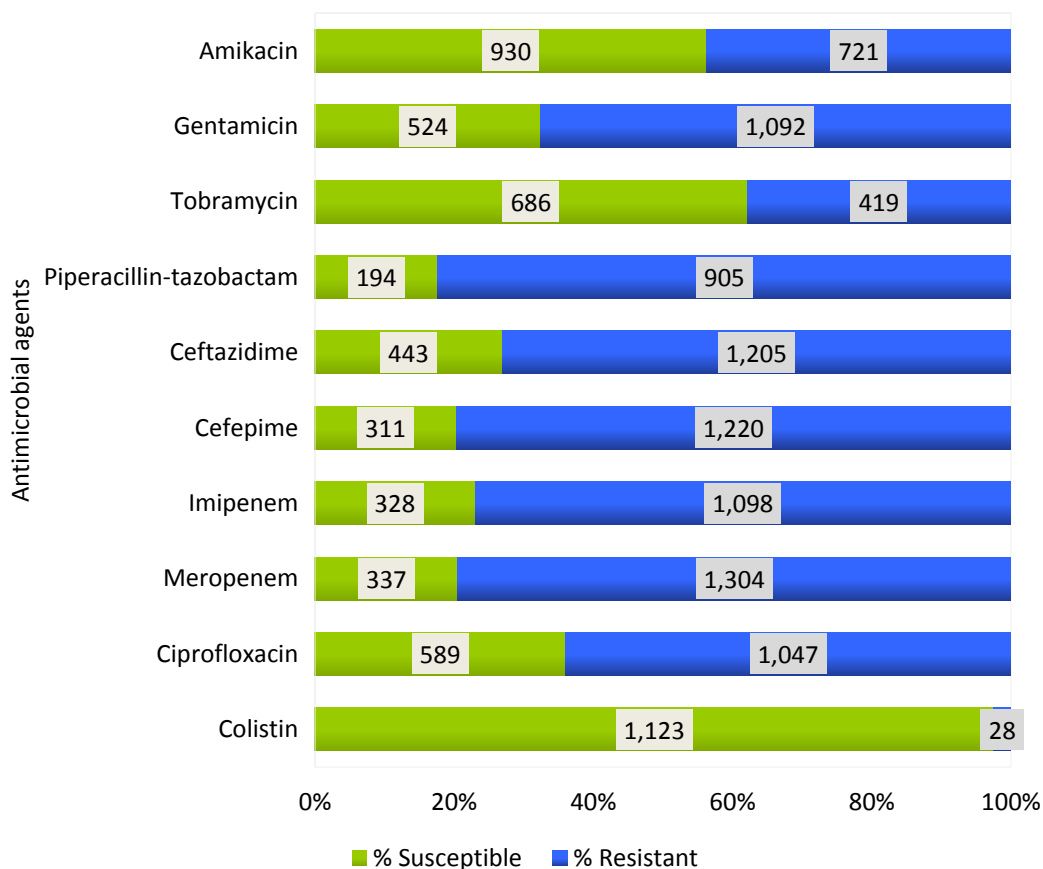
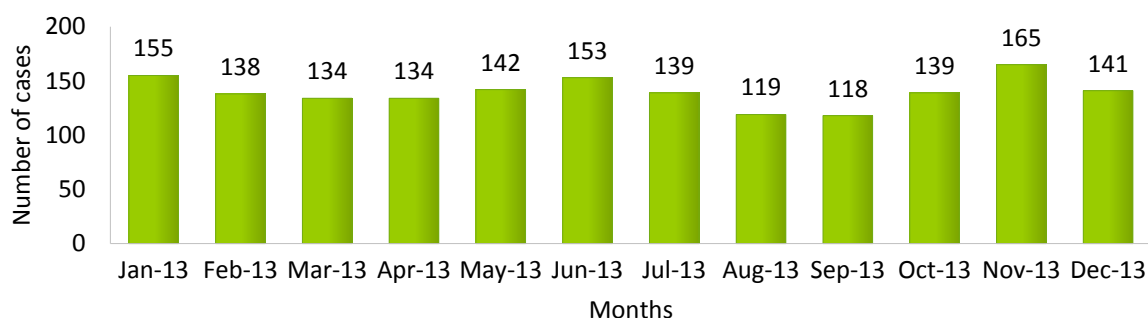
**Table 2. Antimicrobial susceptibility testing methods**

<b>NHLS Laboratories at Public Hospitals</b>	<b>MicroScan</b>	<b>Vitek 2</b>	<b>Disk diffusion method</b>
Charlotte Maxeke Johannesburg Academic Hospital	√		√
Chris Hani Baragwanath Hospital	√		√
Dr George Mukhari Hospital	√		
Grey's Hospital/Northdale Laboratory		√	
Groote Schuur Hospital		√	
Helen Joseph Hospital	√		
Inkosi Albert Luthuli Central Hospital		√	
King Edward VIII Hospital		√	
Mahatma Gandhi Hospital		√	
Nelson Mandela Academic Hospital/Mthata tertiary			√

RK Khan Hospital		√	
Steve Biko Academic Hospital		√	
Tygerberg Hospital		√	

### Results

Reports on antimicrobial susceptibility testing are shown for: *Acinetobacter baumannii* complex (Figure 1), *Pseudomonas aeruginosa* (Figure 2), *Enterobacter cloacae* complex (Figure 3), *Escherichia coli* (Figure 4), *Klebsiella pneumoniae* (Figure 5), *Staphylococcus aureus* (Figure 6), *Enterococcus faecalis* (Figure 7), *Enterococcus faecium* (Figure 8). For each organism, total number of cases, susceptibility to selected antimicrobial agents with number and ratios, and percentages of antimicrobial susceptibility per site was analyzed (Figures 1-8). Distribution of susceptibility by hospital was presented in Tables 3-10, total number of isolates  $\leq 30$  would mislead susceptibility ratio and wasn't demonstrated.



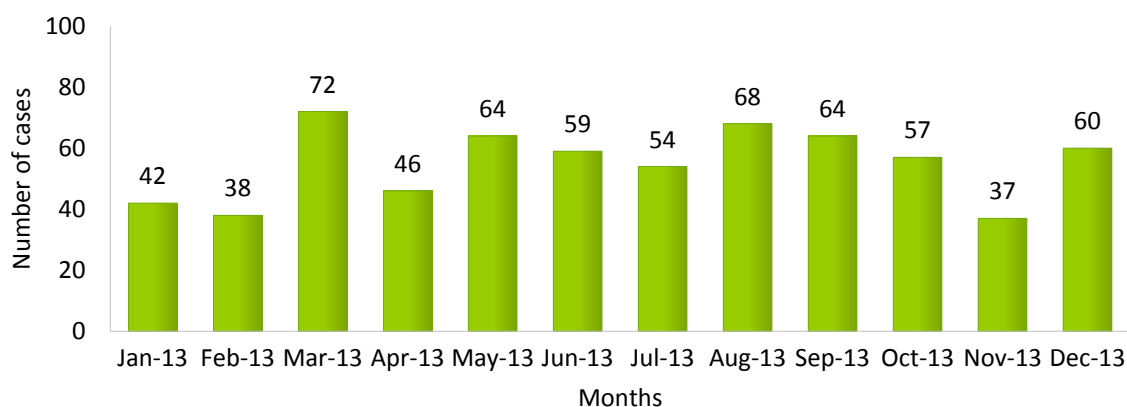
**Figure 1: Number of isolates per month and susceptibility profile of *Acinetobacter baumannii* complex from blood culture at public-sector sentinel sites, 2013, Total number = 1677**

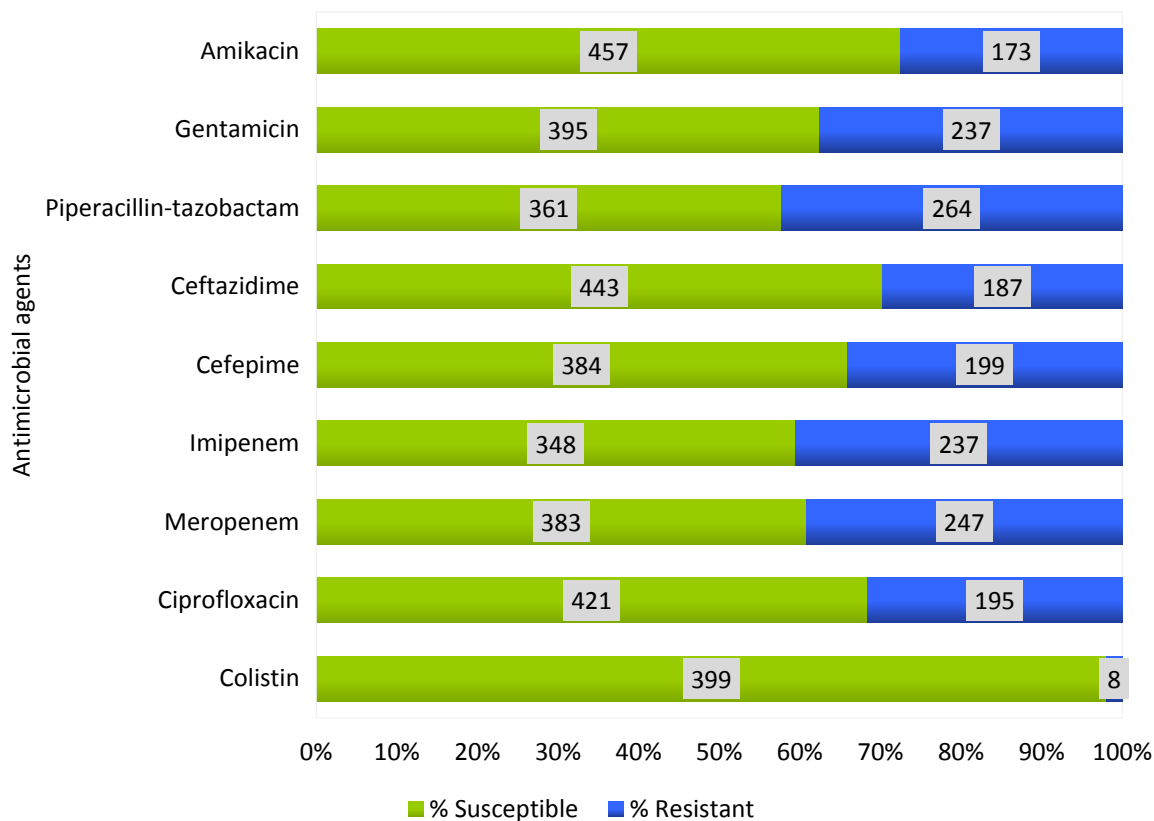
**Table 3. Antimicrobial susceptibility of *Acinetobacter baumannii* by the hospital, 2013**

Number of Total Cases / Susceptibility Ratio	Charlotte Maxeke hospital	Chris Hani Baragwanath hospital	Dr George Mukhari hospital	Grey's hospital	Groote Schuur hospital	Helen Joseph hospital	Inkosi Albert Luthuli central hospital	King Edward viii hospital	Nelson Mandela academic hosp	Rk Khan hospital	Steve Biko academic hospital	Tygerberg hospital
Amikacin	169 31%	347 49%	57 23%	73 59%	188 48%	66 68%	131 69%	103 62%	82 46%	51 57%	217 95%	142 49%
Gentamicin	158 46%	335 33%	50 12%	73 23%	187 52%	70 20%	126 40%	105 30%	82 10%	52 19%	214 21%	144 39%
Tobramycin	170 64%	344 53%	55 15%	50 70%	188 77%	69 68%			81 56%			142 81%
Piperacillin-tazobactam	93 16%	338 16%		55 11%		60 10%	133 18%	94 15%	79 29%	49 16%		137 20%
Ceftazidime	169 57%	354 41%	53 26%	74 11%	182 20%	70 29%	132 15%	107 14%	81 14%	52 15%	206 8%	145 32%
Cefepime	166 16%	348 29%	59 17%	76 21%	188 24%	68 13%	118 22%		82 12%	52 19%	209 11%	143 19%
Imipenem	95 16%	358 20%		74 23%	186 26%	62 13%	113 27%		85 62%	52 19%	210 14%	144 22%
Meropenem	167 14%	352 15%	57 16%	76 22%	180 27%	69 14%	135 29%	103 22%	80 51%	49 20%	206 13%	146 21%
Ciprofloxacin	166 61%	348 39%	53 26%	74 20%	187 46%	70 21%	136 24%	97 26%	80 29%	57 21%	203 48%	145 19%
Colistin	103 99%	101 100%		74 95%	184 96%	56 96%	124 94%	99 99%		46 98%	217 100%	103 100%

*A. baumannii* is resistant to a majority of antimicrobial agents, due to its ability to contain various mechanisms of resistance such as loss of outer membrane porins and permeability, efflux system, Amp C beta-lactamases and others.

Resistance was high to imipenem, cefepime and ceftazidime 77%, 80%, 73%, respectively; whereas it was 64% to ciprofloxacin and 44% to amikacin. Colistin resistance was 2.4%.



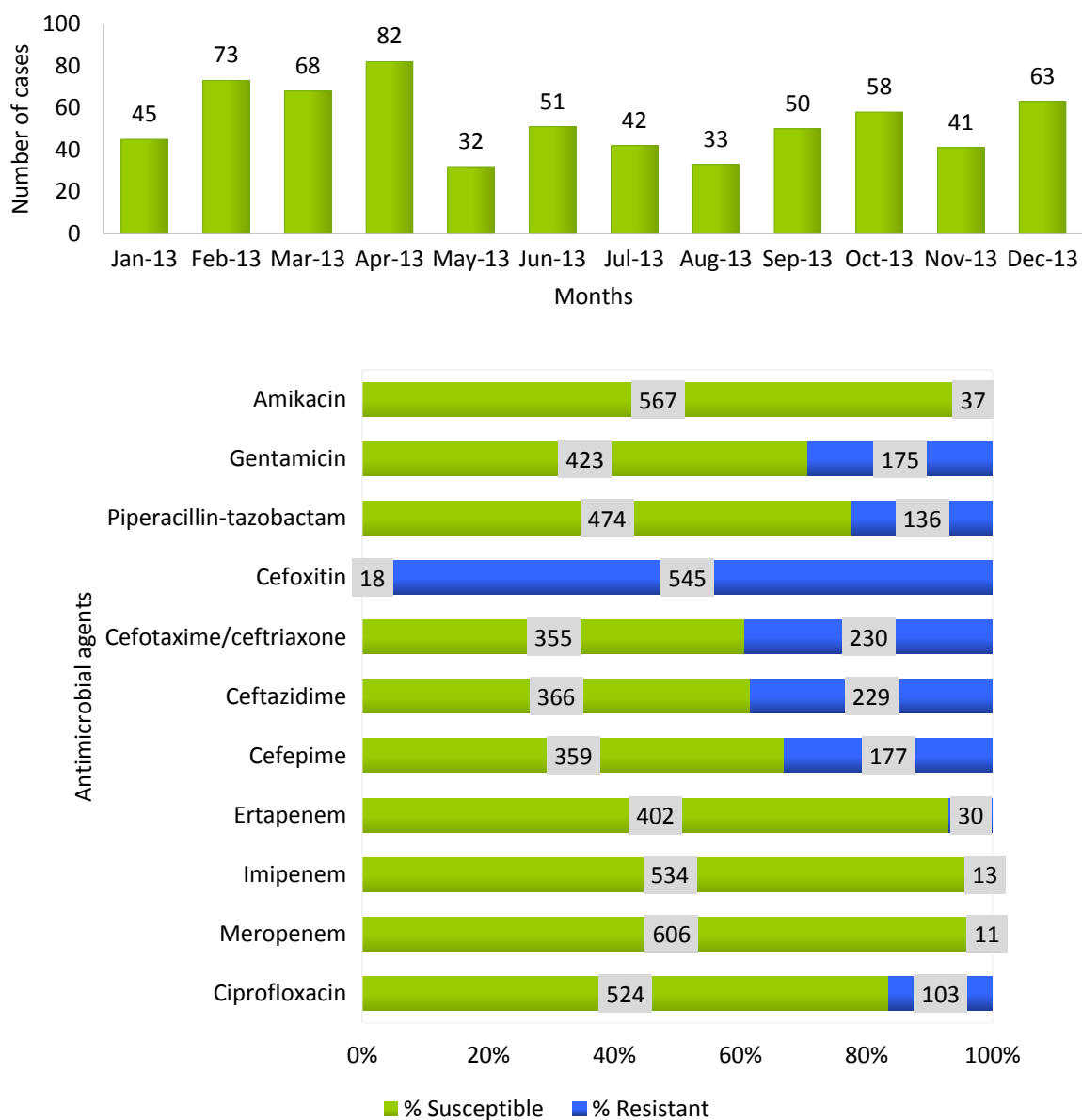


**Figure 2: Number of isolates per month and susceptibility profile of *Pseudomonas aeruginosa* from blood culture at public-sector sentinel sites, 2013, Total number = 661**

**Table 4. Antimicrobial susceptibility of *Pseudomonas aeruginosa* by the hospital, 2013**

Number of Total Cases / Susceptibility Ratio	Charlotte Maxeke hospital	Chris Hani Baragwanath hospital	Dr George Mukhari hospital	Groote Schuur hospital	Inkosi Albert Luthuli central hospital	academic hospital	Tygerberg hospital
Amikacin	87 63%	153 70%	31 87%	73 79%	66 71%	103 64%	37 78%
Gentamicin	84 68%	155 56%	32 81%	74 69%	67 51%	101 66%	39 46%
Piperacillin-tazobactam	82 84%	163 58%		73 18%	64 58%	103 52%	32 69%
Ceftazidime	87 62%	159 72%		75 72%	61 44%	103 74%	38 84%
Cefepime	87 66%	156 60%		73 67%	43 56%	101 71%	39 74%
Imipenem	89 60%	149 60%		75 55%	45 42%	101 50%	38 76%
Meropenem	87 56%	158 47%		73 59%	62 55%	103 61%	37 76%
Ciprofloxacin	88 63%	147 68%	31 90%	74 59%	67 67%	95 69%	37 68%
Colistin	81 98%			73 100%	48 100%	101 99%	

*Pseudomonas aeruginosa* isolates were found to be moderately resistant to antimicrobial agents compared to *A. baumannii*. Resistance to ceftazidime and ciprofloxacin was 30% and 32%, respectively. A higher resistance was found to piperacillin-tazobactam (42%) and imipenem (40%). Colistin resistance was the lowest at 2%.

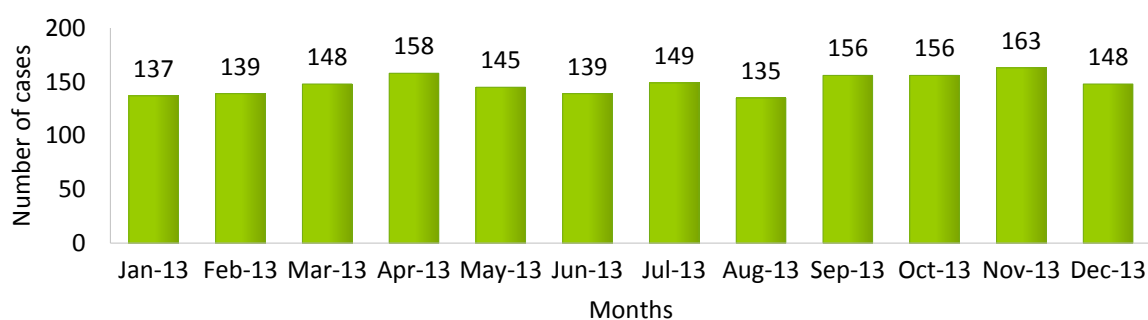


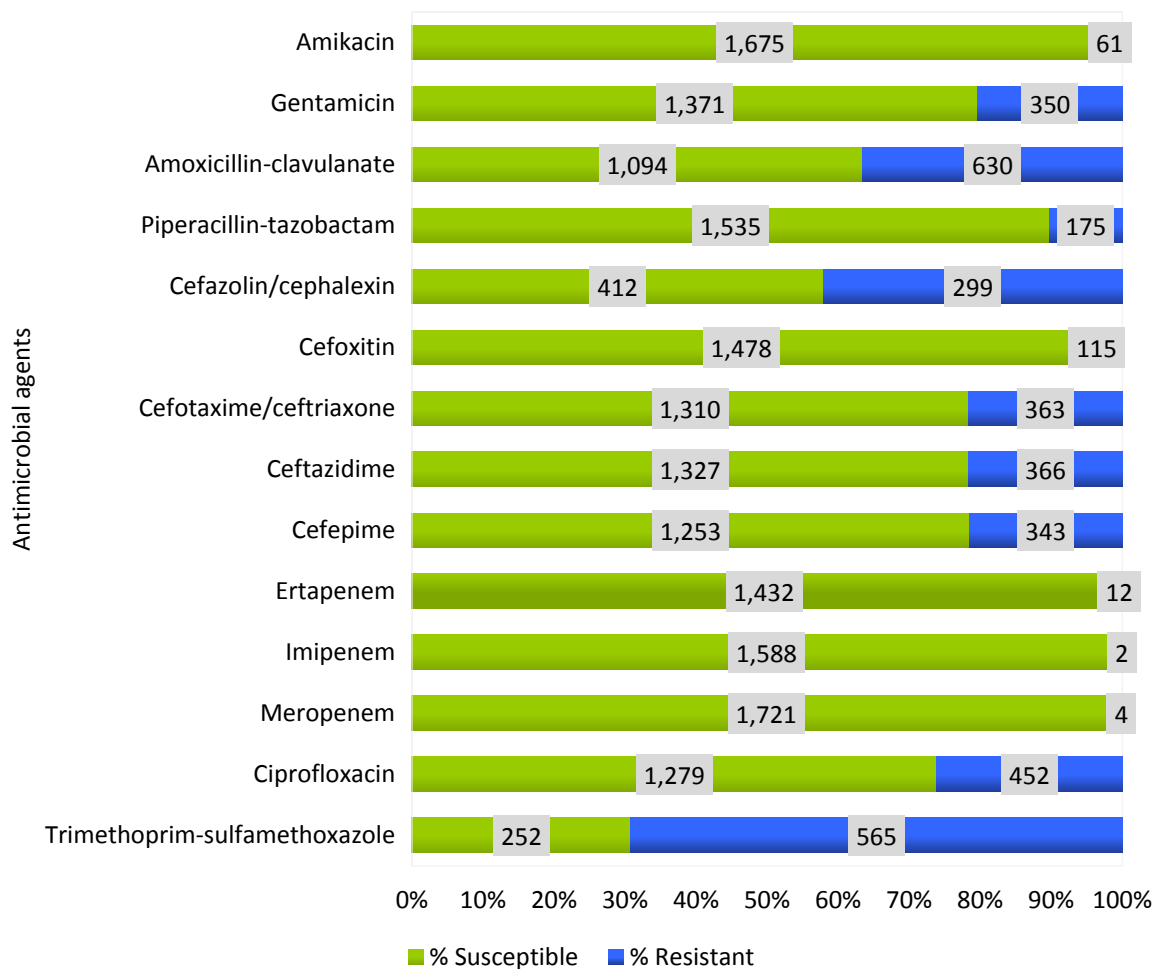
**Figure 3. Number of isolates per month and susceptibility profile of *Enterobacter cloacae* complex from blood culture at public-sector sentinel sites, 2013, total number = 638**

**Table 5. Antimicrobial susceptibility of *Enterobacter cloacae* complex by the hospital, 2013**

Number of Total Cases / Susceptibility Ratio	Charlotte Maxeke hospital	Chris Hani Baragwanath hospital	Grey's hospital	Groote Schuur hospital	Inkosi Albert Luthuli central hospital	Nelson Mandela academic hosp	Steve Biko academic hospital	Tygerberg hospital
Amikacin	66	113	32	71	40		137	42
	98%	95%	88%	92%	93%		94%	98%
Gentamicin	67	109	35	70	39		134	41
	78%	71%	69%	81%	33%		82%	68%
Piperacillin-tazobactam	67	109	32	68	43		133	39
	82%	89%	69%	84%	74%		73%	77%
Cefoxitin	68	108	34	68	34	31	134	
	10%	2%	0%	0%	6%	19%	0%	
Cefotaxime/ceftriaxone	67	108		72	37		131	41
	49%	60%		78%	68%		72%	71%
Ceftazidime	66	107	34	70	40		142	41
	55%	61%	62%	77%	58%		68%	68%
Cefepime	65	106	32	68			138	41
	58%	69%	63%	81%			76%	68%
Ertapenem	67	106	34	72				42
	93%	96%	94%	96%				90%
Imipenem	67	106		68			148	41
	99%	100%		97%			95%	98%
Meropenem	67	115	32	67	48		134	40
	100%	100%	100%	100%	100%		96%	98%
Ciprofloxacin	66	99	33	70	55		153	41
	76%	90%	91%	90%	76%		92%	83%

The high level of presumptive (no molecular confirmation) resistance of *Enterobacter cloacae* complex to ertapenem (7%) is a major concern. Resistance to cefepime (33%) indicates possession of de-repressed mutants resistant to all cephalosporins.





**Figure 4. Number of isolates per month and susceptibility profile of *Escherichia coli* from blood culture at public-sector sentinel sites, 2013, Total number = 1773**

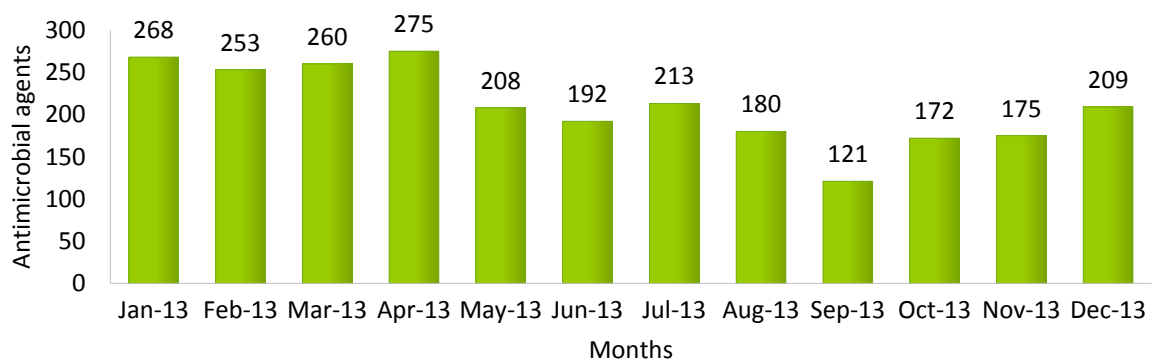
**Table 6. Antimicrobial susceptibility of *Escherichia coli* by the hospital, 2013**

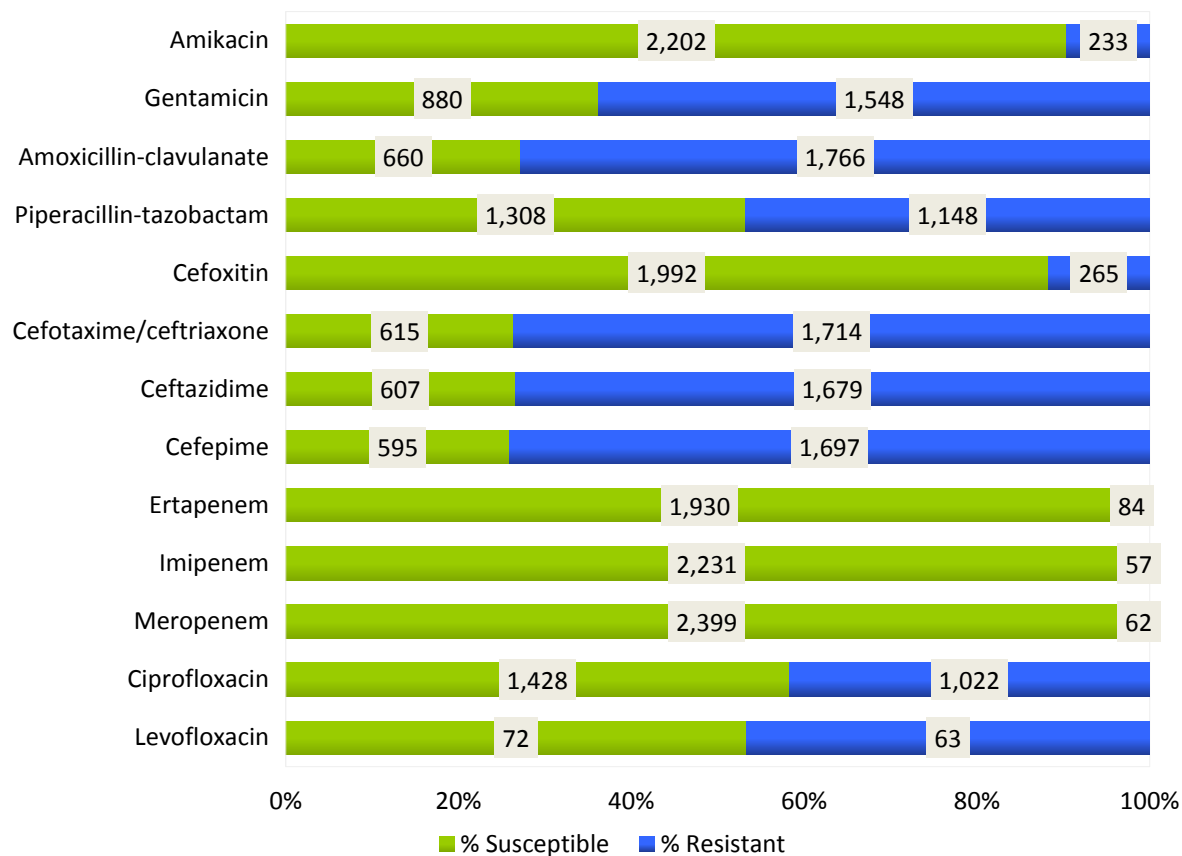
Number of Total Cases / Susceptibility Ratio	Charlotte Maxeke hospital	Chris Hani Baragwanath hospital	Dr. George Mukhari hospital	Grey's hospital	Groote Schuur hospital	Helen Joseph hospital	Inkosi Albert Luthuli central hospital	King Edward viii hospital	Mahatma Gandhi hospital	Nelson Mandela academic hosp	RK Khan hospital	Steve Biko academic hospital	Tygerberg hospital
Amikacin	229 97%	375 98%	72 94%	95 94%	212 93%	84 100%	112 98%	48 96%	69 97%	74 99%	72 93%	155 93%	139 99%
Gentamicin	228 79%	379 74%	76 78%	93 81%	212 88%	78 82%	93 65%	43 77%	70 80%	76 71%	83 81%	153 86%	137 91%
Amoxicillin-clavulanate	227 67%	376 52%	72 63%	95 63%	215 71%	77 60%	101 53%	45 64%	69 70%	75 44%	84 83%	151 70%	137 77%
Piperacillin-tazobactam	228 94%	375 91%	80 85%	93 81%	202 89%	80 88%	108 90%	46 93%	68 97%	74 97%	72 94%	146 75%	138 95%
Cefazolin/cephalexin	225 57%	375 60%	78 59%			31 32%							
Cefoxitin	225 95%	379 92%	76 93%	95 94%	210 90%	75 97%	94 87%	48 88%	67 96%	76 97%	67 94%	158 95%	
Cefotaxime/ceftriaxone	227	363	70	93	211	75	95	43	70	76	68	142	140



	78%	73%	83%	77%	82%	76%	76%	81%	80%	58%	85%	82%	91%
Ceftazidime	227	374	74	97	208	80	90	46	69	70	68	150	140
	78%	72%	81%	78%	81%	79%	73%	83%	80%	61%	85%	83%	91%
Cefepime	228	374	75	95	213	83	65		36	74	64	149	140
	79%	74%	79%	78%	83%	81%	74%		72%	62%	84%	79%	91%
Ertapenem	224	374	74	97	209	80	62		34	72	63		136
	100%	98%	97%	100%	100%	99%	100%		100%	99%	100%		100%
Imipenem	227	375	76	97	210	80	64		36	68	69	149	137
	100%	100%	97%	100%	100%	100%	100%		100%	100%	100%	100%	100%
Meropenem	226	378	78	95	212	77	108	42	72	73	68	157	139
	100%	100%	100%	100%	100%	99%	100%	100%	97%	100%	100%	100%	100%
Ciprofloxacin	225	377	72	92	211	76	113	50	66	75	80	154	140
	73%	71%	76%	66%	74%	70%	62%	76%	76%	80%	76%	81%	85%
Trimethoprim-sulfamethoxazole	220	179			198					74			140
	33%	20%			40%					19%			36%

It is evident that resistance to antimicrobials was high in *E. coli*. Resistance to amoxicillin-clavulanate was 36%, to 1<sup>st</sup> generation cephalosporins 42% and 22% to 3<sup>rd</sup> generation which indicates presence of extended spectrum beta-lactamases. Ciprofloxacin resistance (26%) is concerning.





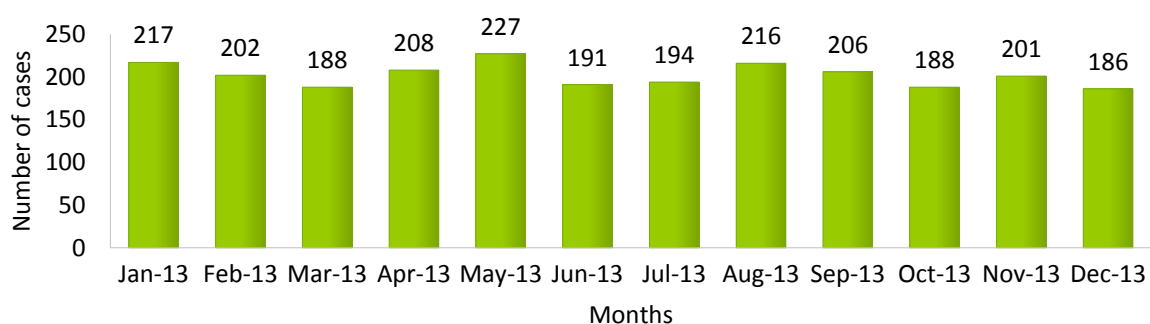
**Figure 5. Number of isolates per month and susceptibility profile of *Klebsiella pneumoniae* from blood culture at public-sector sentinel sites, 2013, Total number = 2526**

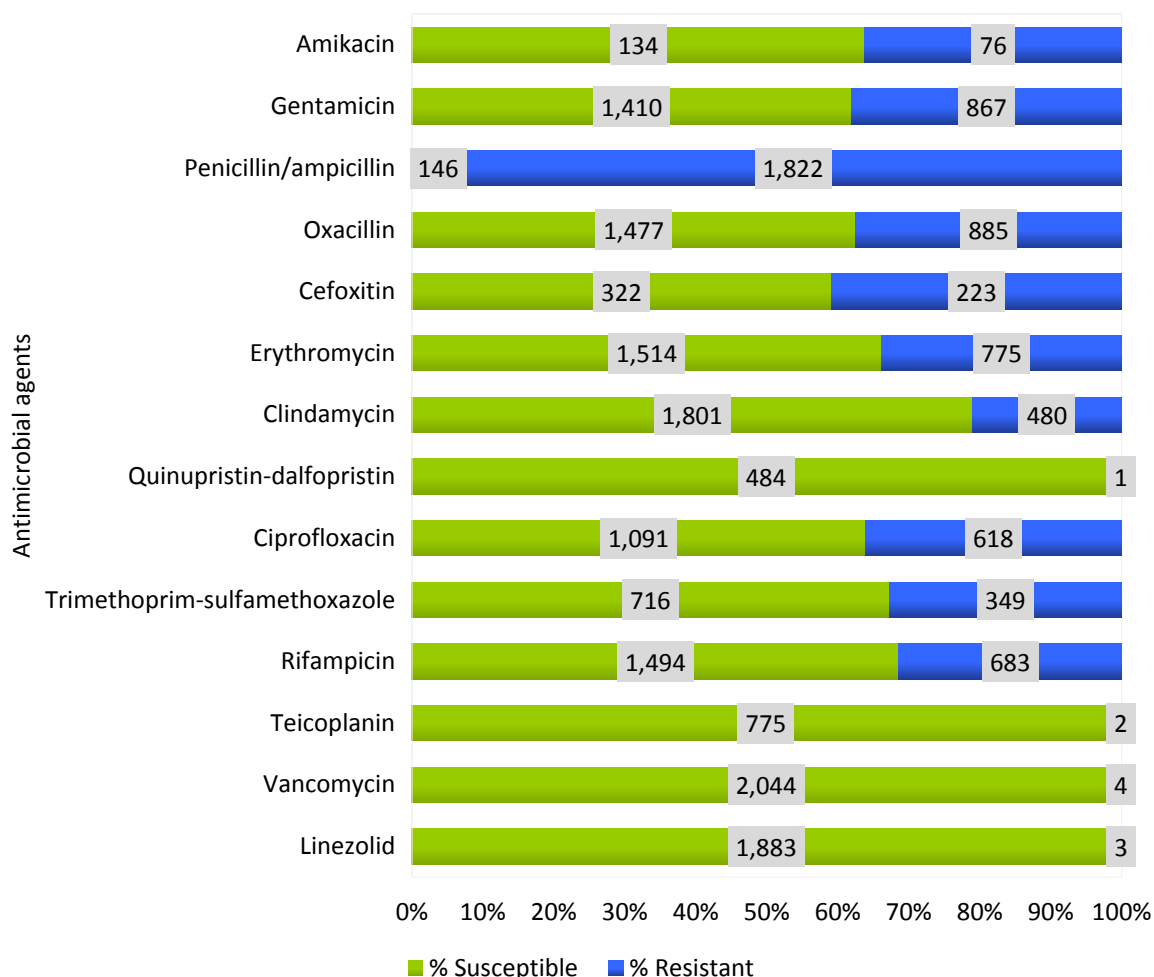
**Table 7. Antimicrobial susceptibility of *Klebsiella pneumoniae* by the hospital, 2013**

Number of Total Cases / Susceptibility Ratio	Charlotte Maxeke hospital	Chris Hani Baragwanath hospital	Dr George Mukhari hospital	Grey's hospital	Groote Schuur hospital	Helen Joseph hospital	Inkosi Albert Luthuli central hospital	King Edward viii hospital	Mahatma Gandhi hospital	Nelson Mandela academic hosp	RK Khan hospital	Steve Biko academic hospital	Tygerberg hospital
Amikacin	283	554	260	118	202	51	173	99	41	93	60	296	205
	95%	88%	97%	93%	85%	98%	86%	85%	90%	91%	85%	86%	97%
Gentamicin	280	549	261	118	202	50	159	97	45	94	64	300	209
	42%	27%	26%	38%	33%	52%	41%	36%	33%	20%	45%	49%	47%
Amoxicillin-clavulanate	282	552	259	116	202	52	164	93	43	97	63	297	206
	36%	15%	19%	30%	40%	35%	32%	33%	37%	8%	41%	34%	28%
Piperacillin-tazobactam	281	559	262	119	204	51	184	94	42	95	64	298	203
	79%	43%	38%	57%	61%	51%	60%	51%	45%	79%	47%	35%	70%
Cefoxitin	282	545	262	116	203	51	153	92	48	96	57	300	52
	93%	88%	89%	92%	94%	88%	69%	79%	88%	95%	86%	89%	96%
Cefotaxime/ceftriaxone	279	555	149	122	202	54	159	92	44	97	62	307	207
	32%	18%	26%	20%	32%	28%	28%	22%	34%	10%	39%	37%	28%
Ceftazidime	280	549	144	114	193	49	156	91	43	100	58	304	205
	33%	17%	29%	18%	33%	35%	27%	22%	35%	13%	36%	36%	28%
Cefepime	284	566	263	118	204	53	111		32	95	55	306	205
	33%	18%	16%	21%	34%	30%	33%		34%	13%	36%	35%	28%

Ertapenem	283	557	253	113	204	52	114		37	91	56		207
	98%	91%	98%	100%	97%	94%	99%		100%	95%	98%		100%
Imipenem	282	565	253	117	204	56	114		32	96	58	300	207
	99%	94%	97%	100%	97%	98%	99%		100%	100%	97%	100%	100%
Meropenem	283	547	255	115	205	51	192	98	44	96	62	306	207
	99%	93%	98%	100%	97%	98%	99%	98%	100%	99%	100%	99%	100%
Ciprofloxacin	281	538	268	120	203	55	188	96	46	93	61	296	205
	58%	66%	44%	58%	65%	38%	57%	45%	48%	71%	70%	56%	60%
Levofloxacin			129										
			52%										

*K. pneumoniae* was resistant to multiple antimicrobials: 73% were ESBLs; 42% was resistant to ciprofloxacin and 9.6% to amikacin. Ertapenem resistance was 2%; although resistance to other carbapenemases was very low, the rapid emergence of strains with carbapenemases production threaten the last line of therapeutic option. Thus continuous monitoring of resistance trends need to be implemented.





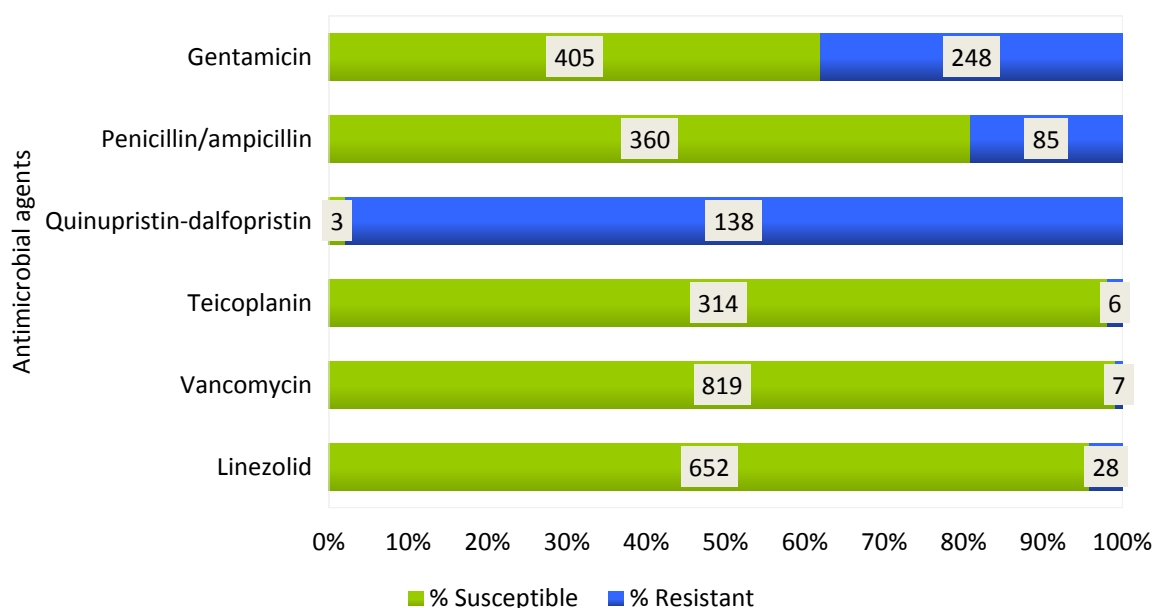
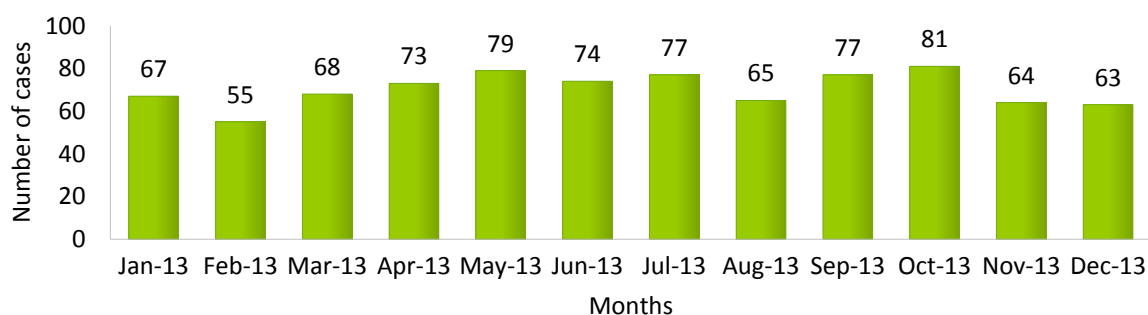
**Figure 6. Number of isolates per month and susceptibility profile of *Staphylococcus aureus* from blood culture at public-sector sentinel sites, 2013, Total number = 2424**

**Table 8. Antimicrobial susceptibility of *Staphylococcus aureus* by the hospital, 2013**

Number of Total Cases / Susceptibility Ratio	Charlotte Maxeke hospital	Chris Hani Baragwanath hospital	Dr George Mukhari hospital	Grey's hospital	Groote Schuur hospital	Helen Joseph hospital	Inkosi Albert Luthuli central hospital	King Edward viii hospital	Mahatma Gandhi hospital	Nelson Mandela academic hosp	RK Khan hospital	Steve Biko academic hospital	Tygerberg hospital
Amikacin		207 64%											
Gentamicin	232 56%	472 52%	99 33%	164 68%	245 69%	77 64%	144 39%	89 65%	67 81%	101 70%	74 78%	233 74%	280 73%
Penicillin/ampicillin	222 12%	474 5%	65 8%	162 1%	240 6%	77 10%	144 7%	91 10%	69 10%	101 0%	85 8%	229 15%	
Oxacillin	211 62%	452 54%	97 41%	163 66%	249 66%	77 75%	242 45%	96 67%	70 79%	94 80%	96 73%	233 77%	282 64%
Cefoxitin	212 59%	208 53%						67 60%		49 82%			
Erythromycin	232 56%	475 58%	95 48%	161 86%	249 71%	79 59%	141 60%	89 63%	67 79%	101 72%	85 86%	233 76%	282 66%
Clindamycin	231 83%	475 95%	97 47%	162 86%	248 74%	76 79%	141 70%	87 75%	67 81%	101 74%	85 88%	229 77%	282 67%

Quinupristin-dalfopristin	232	210	37										
	100%	100%	100%										
Ciprofloxacin	230	461	91	159	53	78	132	45	69	43	72	204	72
	62%	58%	51%	72%	68%	69%	38%	58%	90%	79%	78%	81%	53%
Trimethoprim-sulfamethoxazole	224	209			248					101			282
	56%	51%			71%					75%			82%
Rifampicin	233	463	94	163	246	79	140		68	100	76	234	281
	85%	88%	95%	0%	78%	75%	0%		0%	80%	0%	91%	90%
Teicoplanin			37	160	43		139		68		75	234	
			97%	99%	100%		100%		100%		100%	100%	
Vancomycin	78	476	98	163	240	64	172	90	69		86	231	281
	99%	100%	100%	99%	100%	100%	100%	100%	100%		99%	100%	100%
Linezolid	233	481	91	159	246	78	138		67		72	234	86
	100%	100%	99%	100%	100%	100%	100%		100%		100%	100%	100%

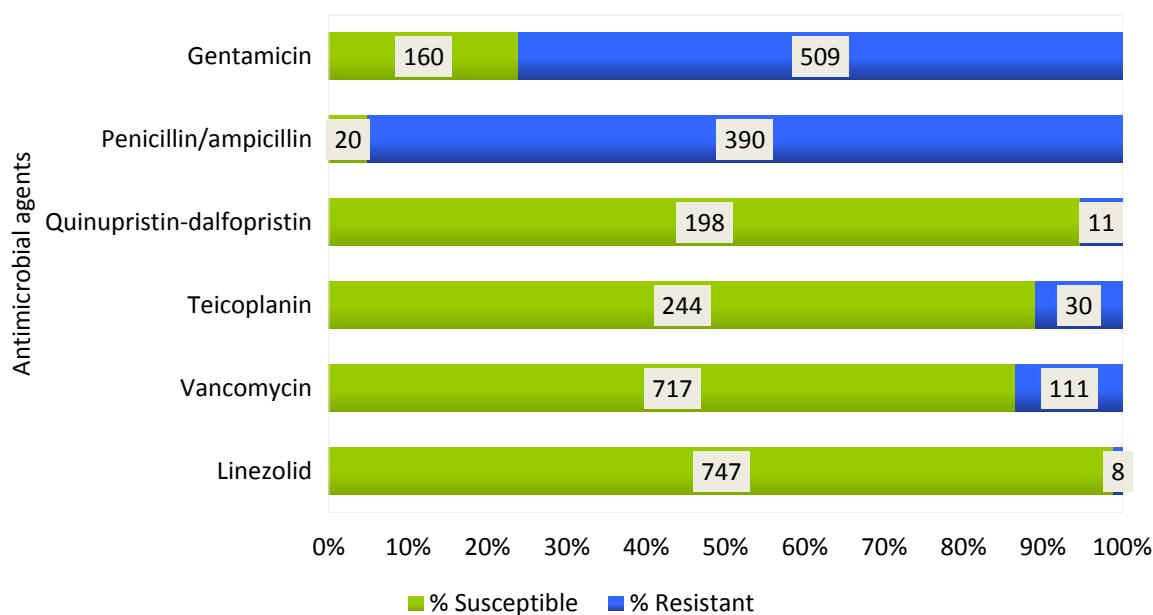
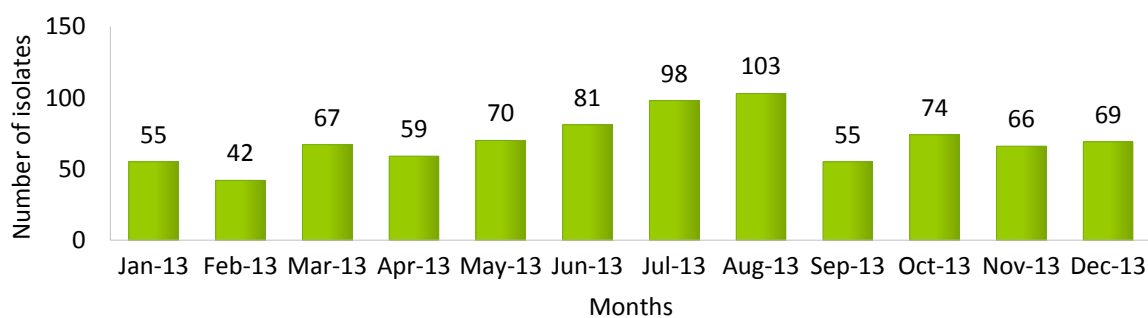
Four *Staphylococcus aureus* isolates were reported to be vancomycin resistant; however this was not confirmed and should be taken with reserve. Resistance to methicillin/oxacillin and all other beta-lactams was 37%. Cefoxitin resistance was higher at 41% which indicates MRSA. Resistance to erythromycin and clindamycin was 34% and 21% respectively.



**Figure 7. Number of isolates per month and susceptibility profile of *Enterococcus faecalis* from blood culture at public-sector sentinel sites, 2013, Total number = 843**

**Table 9. Antimicrobial susceptibility of *Enterococcus faecalis* by the hospital, 2013**

Number of Total Cases / Susceptibility Ratio	Charlotte Maxeke hospital	Chris Hani Baragwanath hospital	Dr George Mukhari hospital	Grey's hospital	Groote Schuur hospital	Helen Joseph hospital	Inkosi Albert Luthuli central hospital	King Edward viii hospital	Mahatma Gandhi hospital	Nelson Mandela academic hosp	RK Khan hospital	Steve Biko academic hospital	Tygerberg hospital
Gentamicin		146 71%		42 57%	45 53%	45 33%	46 54%		39 64%		45 80%	138 65%	59 73%
Penicillin/ampicillin	46 96%	51 100%		39 69%			41 71%			33 91%	53 75%	107 79%	
Quinupristin-dalfopristin	69 4%	59 0%											
Teicoplanin				39 90%	46 100%		43 100%				44 100%	110 100%	
Vancomycin	70 100%	149 100%	33 100%	38 89%	50 100%	53 100%	57 98%	36 100%	42 95%	33 100%	54 100%	139 100%	72 100%
Linezolid	71 100%	141 99%	36 97%	44 98%	46 87%	55 100%	40 95%				44 95%	124 96%	55 93%



**Figure 8. Number of isolates per month and susceptibility profile of *Enterococcus faecium* from blood culture at public-sector sentinel sites, 2013, Total number = 839**

**Table 10. Antimicrobial susceptibility of *Enterococcus faecium* by the hospital, 2013**

Number of Total Cases / Susceptibility Ratio	Charlotte Maxeke hospital	Chris Hani Baragwanath hospital	Grey's hospital	Groote Schuur hospital	Helen Joseph hospital	Inkosi Albert Luthuli central hospital	RK Khan hospital	Steve Biko academic hospital
Gentamicin		295	44	59	38	43	31	80
		22%	23%	47%	37%	9%	6%	24%
Penicillin/ampicillin	62	104	43			39	33	59
	3%	5%	5%			0%	0%	5%
Quinupristin-dalfopristin	78	114						
	95%	96%						
Teicoplanin			44	58		40		60
			91%	91%		90%		75%
Vancomycin	78	302	51	59	50	55	35	80
	86%	82%	92%	93%	88%	95%	100%	71%
Linezolid	77	306	44	58	52	44		72
	97%	100%	98%	97%	98%	100%		100%

Enterococci are intrinsically resistant to a broad range of antibiotics including cephalosporins, penicillins (*E. faecium*), sulfonamides, and low concentration of aminoglycosides. Vancomycin resistant *E. faecium* was recorded in average of 13% of isolates from number of sentinel sites which may indicate persistence of the strains or an outbreak situation.

### Conclusion and final remarks

The data presented in this report highlighted the importance of surveillance for antimicrobial resistance patterns. Surveillance needs to be ongoing in order to identify trends as well as possible outbreaks.

### Disclaimer

Data are reported as received through the CDW. No clinical data or molecular data are available to distinguish between hospital-associated and community acquired infection.

### Acknowledgements

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### References

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