Appendix B. Intrinsic Resistance

Intrinsic resistance is defined as inherent or innate (not acquired) antimicrobial resistance, which is reflected in wild-type antimicrobial patterns of all or almost all representatives of a species. Intrinsic resistance is so common that susceptibility testing is unnecessary. For example, *Citrobacter* spp. are intrinsically resistant to ampicillin.

These tables can be helpful in at least three ways: 1) they provide a way to evaluate the accuracy of testing methods; 2) they aid in the recognition of common phenotypes; and 3) they can assist with verification of cumulative antimicrobial susceptibility test data. In the tables, an "R" occurring with an antimicrobial agent-organism combination means that strains should test resistant. A small percentage (1% to 3%) may appear susceptible due to method variation, mutation, or low levels of resistance expression.

Each laboratory should decide which agents to test and report in consultation with the antimicrobial stewardship team **and other relevant institutional stakeholders.** If tested, the result for an antimicrobial agent-organism combination listed as having intrinsic resistance should be reported as resistant. Consideration may be given to adding comments regarding intrinsic resistance of agents not tested. See Appendix A, footnote a.

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B1. Enterobacterales

Antimicrobial Agent Organism	Ampicillin	Amoxicillin- clavulanate	Ampicillin- sulbactam	Ticarcillin	Cephalosporins I: Cefazolin, Cephalothin	Cephamycins: Cefoxitin, Cefotetan	Cephalosporin II: Cefuroxime	Imipenem	Tetracyclines	Tigecycline	Nitrofurantoin	Polymyxin B Colistin	Aminoglycosides
Citrobacter freundii	R	R	R		R	R	R						
Citrobacter koseri, Citrobacter amalonaticus group ^a	R			R									
Enterobacter cloacae complex ^b	R	R	R		R	R							
Escherichia coli	There i	s no intri	nsic resist	tance to	B-lactams i	in this orga	anism.						
Escherichia hermannii	R			R									
Hafnia alvei	R	R	R		R	R						Rc	
Klebsiella (formerly Enterobacter) aerogenes	R	R	R		R	R							
Klebsiella pneumoniae, Klebsiella oxytoca, Klebsiella variicola	R			R									
Morganella morganii	R	R			R		R	d		R	R	R	
Proteus mirabilis	There i cephalo	s no intri osporins i	nsic resist n this org	tance to anism.	penicillins	d	R	R	R	R			
Proteus penneri	R				R		R	d	R	R	R	R	
Proteus vulgaris	R				R		R	d	R	R	R	R	
Providencia rettgeri	R	R			R			d	R	R	R	R	
Providencia stuartii	R	R			R			d	R	R	R	R	e
Raoultella spp. ^f	R			R									

B1. Enterobacterales (Continued)

Antimicrobial Agent Organism	Ampicillin	Amoxicillin- clavulanate	Ampicillin- sulbactam	Ticarcillin	Cephalosporins l: Cefazolin, Cephalothin	Cephamycins: Cefoxitin, Cefotetan	Cephalosporin II: Cefuroxime	Imipenem	Tetracyclines	Tigecycline	Nitrofurantoin	Polymyxin B Colistin	Aminoglycosides
Salmonella and Shigella spp.	There is	s no intri	nsic resist	ance to I	3-lactams i	n these							
Comption and a second	organisi	ns, refer		Delo	w tot repo	cilig.	D				D	D	a
Serratia marcescens	R	ĸ	ĸ		ĸ	R	ĸ				R	ĸ	5
Yersinia enterocolitica	R	R		R	R								

Abbreviations: MIC, minimal inhibitory concentration; R, resistant.

WARNING: For Salmonella spp. and Shigella spp., aminoglycosides, first- and second-generation cephalosporins, and cephamycins may appear active *in vitro* but are not effective clinically and should not be reported as susceptible.

Footnotes

- a. Citrobacter amalonaticus group includes C. amalonaticus, C. farmeri, and C. sedlakii.
- b. E. cloacae complex includes Enterobacter asburiae, Enterobacter cloacae, and Enterobacter hormaechei. Other members of the complex include Enterobacter kobei and Enterobacter ludwigii, for which antimicrobial susceptibility testing data are not available.
- c. Colistin and polymyxin B resistance also applies to Hafnia paralvei.
- d. *Proteus* spp., *Providencia* spp., and *Morganella* spp. may have elevated minimal inhibitory concentrations to imipenem by mechanisms other than by production of carbapenemases. Isolates that test as susceptible should be reported as susceptible.
- e. *P. stuartii* should be considered resistant to gentamicin, netilmicin, and tobramycin but not intrinsically resistant to amikacin.
- f. Raoultella spp. includes R. ornithinolytica, R. terrigena, and R. planticola.
- g. Serratia marcescens may have elevated MICs to tobramycin. Isolates that test susceptible should be reported as susceptible.

B1. Enterobacterales (Continued)

NOTE 1: Cephalosporins III, cefepime, cefiderocol, aztreonam, ticarcillin-clavulanate, piperacillin-tazobactam, imipenem-relebactam, ceftazidimeavibactam, meropenem-vaborbactam, and the carbapenems are not listed because there is no intrinsic resistance in Enterobacterales.

NOTE 2: Enterobacterales are also intrinsically resistant to clindamycin, daptomycin, fusidic acid, glycopeptides (vancomycin), lipoglycopeptides (oritavancin, teicoplanin, telavancin), linezolid, tedizolid, quinupristin-dalfopristin, rifampin, and macrolides (erythromycin, clarithromycin, and azithromycin). However, there are some exceptions with macrolides (eg, *Salmonella* and *Shigella* spp. with azithromycin).

NOTE 3: Information in black boldface type is new or modified since the previous edition.

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B2	Non-F	ntero	bacter	ales
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Antimicrobial Agent Drganism	Ampicillin, Amoxicillin	Piperacillin	Ticarcillin	Ampicillin-sulbactam	Amoxicillin- clavulanate	Piperacillin-tazobactam	Cefotaxime	Ceftriaxone	Ceftazidime	Cefepime	Aztreonam	Imipenem	Meropenem	Ertapenem	Polymyxin B Colistin	Aminoglycosides	Tetracyclines/ Tigecycline	Trimethoprim	Trimethoprim- sulfamethoxazole	Chloramphenicol	Fosfomycin
Acinetobacter baumannii/ Acinetobacter calcoaceticus complex	R				R						R			R				R		R	R
Burkholderia cepacia complex ^a	R	R	R	R	R	а	a	а		a	a	а		R	R	а		а			R
Pseudomonas aeruginosa	R			R	R		R	R						R			R	R	R	R	
stenotrophomonas maltophilia	R	R	R	R	R	R	R	R			R	R	R	R		R	b	R			R
				-																	

Abbreviation: MIC, minimal inhibitory concentration; R, resistant.

Footnotes

- a. *B. cepacia* complex isolates have chromosomal genes that must undergo mutational changes before expressing resistance. It is not known how often these mutations occur during growth. Intrinsic resistance implies the presence of resistance mechanisms in natural or wild-type strains that result in phenotypic resistance for all or nearly all strains. Environmental *B. cepacia* complex strains lacking mutations do not express resistance mechanisms, resulting in low MICs to many antimicrobial agents, whereas clinical strains that express resistance genes, such as those from cystic fibrosis patients, have high MIC values to these same antimicrobial agents. There is insufficient clinical evidence to confirm whether strains that test susceptible *in vitro*, despite the presence of resistance mechanisms, will respond *in vivo*. Therefore, intrinsic resistance to the footnoted antibiotics (listed as resistant in previous editions of M100) cannot be confirmed.
- b. S. maltophilia is intrinsically resistant to tetracycline but not to doxycycline, minocycline, or tigecycline.

NOTE 1: These nonfermentative gram-negative bacteria are also intrinsically resistant to penicillin (ie, benzylpenicillin), cephalosporins I (cephalothin, cefazolin), cephalosporin II (cefuroxime), cephamycins (cefoxitin, cefotetan), clindamycin, daptomycin, fusidic acid, glycopeptides (vancomycin), linezolid, macrolides (erythromycin, azithromycin, clarithromycin), quinupristin-dalfopristin, and rifampin.

NOTE 2: Information in black boldface type is new or modified since the previous edition.

B3. Staphylococci

Antimicrobial Agent Organism	Novobiocin	Fosfomycin	Fusidic Acid						
S. aureus S. lugdunensis									
S. epidermidis	There is no intrinsic resistance in these species.								
S. haemolyticus									
S. saprophyticus	R	R	R						
S. capitis		R							
S. cohnii	R								
S. xylosus	R								

Abbreviations: MRS, methicillin (oxacillin)-resistant staphylococci; R, resistant.

NOTE 1: These gram-positive bacteria are also intrinsically resistant to aztreonam, polymyxin B/colistin, and nalidixic acid.

NOTE 2: MRS, as defined by cefoxitin or oxacillin testing, as appropriate to the species, are considered resistant to other B-lactam agents, ie, penicillins, B-lactam combination agents, cephems with the exception of ceftaroline, and carbapenems. This is because most cases of documented MRS infections have responded poorly to B-lactam therapy, or because convincing clinical data that document clinical efficacy for those agents have not been presented.

B4. Enterococcus spp.

Antimicrobial Agent Organism	Cephalosporins	Vancomycin	Teicoplanin	Aminoglycosides	Clindamycin	Quinupristin-dalfopristin	Trimethoprim	Trimethoprim-sulfamethoxazole	Fusidic Acid
E. faecalis	Ra			Ra	Ra	R	R	R ^a	R
E. faecium	Ra			R ^a	R ^a		R	R ^a	R
E. gallinarum/E. casseliflavus	Ra	R		Ra	Ra	R	R	R ^a	R

Abbreviation: R, resistant.

a. Warning: For *Enterococcus* spp., cephalosporins, aminoglycosides (except for high-level resistance testing), clindamycin, and trimethoprimsulfamethoxazole may appear active *in vitro* but are not effective clinically and should not be reported as susceptible.

NOTE: These gram-positive bacteria are also intrinsically resistant to aztreonam, polymyxin B/colistin, and nalidixic acid.

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B5. Anaerobic Gram-Positive Bacilli



Abbreviation: R, resistant.

B6. Anaerobic Gram-Negative Bacilli

Antimicrobial Agent Organism	Aminoglycosides	Penicillin	Ampicillin	Quinolones
Bacteroides spp.	R	R	R	
Fusobacterium canifelinum	R			R

Abbreviation: R, resistant.

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