

### Selective Suppression of Quinolone Susceptibility for Enterobacteriaceae

Effective Date: July 26, 2018

Antibiotic misuse and overuse is associated with multiple adverse effects, including drug reactions, development of antibiotic resistance, and *Clostridium difficile* infection. Fluoroquinolones (e.g. ciprofloxacin, levofloxacin, moxifloxacin) are a class of antibacterials frequently associated with all of these issues, and in recent years these adverse effects have led to numerous FDA safety warnings (for the most recent alert, see <https://www.fda.gov/Drugs/DrugSafety/ucm500143.htm>).

Specifically, the FDA is now advising against the use of fluoroquinolones for treatment of acute sinusitis, acute bronchitis, and uncomplicated urinary tract infections in patients who have other treatment options.

The laboratory will no longer report susceptibility test results for fluoroquinolones for Enterobacteriaceae (e.g. *Escherichia coli*, *Klebsiella*, *Enterobacter*, etc) from sites other than blood when isolates are susceptible to all other agents. Fluoroquinolone results will still be reported for bloodstream isolates and for *Salmonella* species.

If you have questions, please contact Client Services (1-800-551-0488, option 5).

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