

Canine culture interpretation guidance based on 2024 CLSI Revisions

***E. coli* and other Enterobacterales (e.g. *Klebsiella*, *Enterobacter*, *Proteus*, *Salmonella Pseudomonas*)**

***Staphylococcus* spp.**

Drug	MIC (ug/ml)	Interpretation	Comment
Enrofloxacin	≤ 0.06	Susceptible	Susceptible at 5-20 mg/kg q24h
	0.12	Susceptible if using 10 mg/kg q24h	Considered “Susceptible, dose dependent (SDD)”
	0.25	Susceptible if using 20 mg/kg q24h	Considered “Susceptible, dose dependent (SDD)”
	0.5	Resistant	
	<0.5	Could be SDD or S	If used, use 20 mg/kg q24h
	≤0.5	Cannot interpret.	Could be susceptible, SDD or resistant.
	S/I/R, no MIC	Cannot interpret.	Testing was likely done by disk diffusion and there are no longer breakpoints for that method. “S” can at best be regarded ‘maybe susceptible.’”
Marbofloxacin	≤0.12	Susceptible	Susceptible at 2.75-5.5 mg/kg
	0.12	Susceptible	Susceptible at 2.75-5.5 mg/kg
	0.25	Susceptible if using 5.5 mg/kg q24h	Considered “Susceptible, dose dependent (SDD)”
	0.5	Resistant	
	<0.5	Could be SDD or S	If used, use 5.5 mg/kg q24h
	≤ 0.5	S, I or R	Cannot interpret. Do not use for serious infections.
	S/I/R, no MIC	Cannot interpret.	Testing was likely done by disk diffusion and there are no longer breakpoints for that method. “S” can at best be regarded ‘maybe susceptible.’”
Chloramphenicol (<i>E. coli</i> , Enterobacterales, <i>Staphylococcus pseudintermedius</i>)	≤ 2	Susceptible	Based on 50 mg/kg q8h dosing
	4	Intermediate	Intermediate. Maybe an option if higher doses can be used, which is uncommon
	≥ 8	Resistant	Resistant