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ASSESSMENT OF SUSCEPTIBILITY TESTING METHODS FOR PREDICTING OUTCOMES OF METHICILLIN-RESISTANT *STAPHYLOCOCCUS AUREUS* (MRSA) BLOODSTREAM INFECTIONS (A1) , Natalie Boyd, Renee Mercier, University of New Mexico Health Sciences Center, Albuquerque, NM. ([nboyd@salud.unm.edu](mailto:nboyd@salud.unm.edu)). IRB approval is received.

Alternative susceptibility testing methods, such as determination of minimum bactericidal concentrations (MBCs), detection of vancomycin heteroresistance, and utilization of vancomycin intermediate *S. aureus* (VISA) screening agars containing lower vancomycin concentrations may be more useful and predictive of outcomes for vancomycin therapy. This study will evaluate multiple susceptibility testing methods and assess the relationship of these methods with outcomes in vancomycin-treated MRSA bloodstream infections. Daptomycin will be included as a comparator agent for in vitro data. Vancomycin and daptomycin dried microdilution panels (Just-One; TREK Diagnostic Systems, Cleveland, OH) will be utilized for determining MBCs. Vancomycin, daptomycin and Glycopeptide Resistance Detection (GRD) Etests (BIOMERIEUX, formerly AB BIODISK, Piscataway, NJ) will be utilized for measurement of minimum inhibitory concentrations and presence of heteroresistance, respectively. Vancomycin screening plates will be made with vancomycin 2, 3, 4, and 6 µg/mL to optimize the appropriate concentration for detection of VISA. Retrospective chart review will be conducted at the University of New Mexico Hospital

(Albuquerque, NM) and Scott & White Memorial Hospital (Temple, TX) for adult patients with  $\geq 1$  positive MRSA blood culture and who have received  $\geq 72$  hours of vancomycin therapy. Results will be discussed.