OLOGICAL PROFILE AND ANTIMICROBIAL SUSCEPTIBILITY PATTERN OF ISOLATES OF NEONATAL MIA IN A TERTIARY CARE HOSPITAL P, Ronni Mol; Takpere, Aparna Y; Shahapur, P R. International Current Research and Review; Chandrapur7.16 (2015): 1-5.

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ctives: Neonatal sepsis is one of the major causes of morbidity and mortality in the newborn. Early osis and appropriate treatment of blood stream infections would minimise the risk besides reducing gence of multidrug resistant organisms. Therefore the present study was done to know the etiological s of neonatal sepsis, and their antimicrobial susceptibility pattern. Methods: All neonates with signs ymptoms of neonatal septicaemia were enrolled in the study. Blood culture was done by conventional od. Any growth was identified by colony characteristics and standard biochemical tests. Antimicrobial ptibility tests was done by Kirby Bauer Disc Diffusion method according to National Committee for al Laboratory Standards (NCCLS) guidelines. Results: 115 cases were enrolled in the study . Out of early onset sepsis occurred in 76(66.08%)and late onset sepsis in 39 (39%) neonates. Rates of ion was high in males (60%) as compared to females(40%). Culture proven sepsis was seen in .13%) cases. Common isolated pathogen was Klebsiella pneumonia 13(29%) which was sensitive to noxazole(69.2%) , Sparfloxacin(15.3%) and Amikacin(15%) . Second most common organism was domonas aeruginosa 9(20%) which was sensitive to Amikacin(88.8%), Ciprofloxacin(77.7%) and acillin/Tazobactum(77.7%). Among the Gram positive organisms, Coagulase Negative ylococcus 7(15.5%) was predominant isolate which was sensitive to Linezolid (100%) and acillin/Tazobactum (71.42%). Conclusions: Blood culture, antibiotic susceptibility surveillance and al antibiotic use will reduce the rate of neonatal septicaemia and ensure therapeutic success. Key s: Sepsis, Culture, Isolates, Sensitive.

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