2. PSEUDOMONAS SPP.

MH agar, McFarland 0.5, incubation air $35^{\circ}C \pm 1^{\circ}C$, incubation time $18h \pm 2h$.

QC strains: Pseudomonas aeruginosa ATCC 27853, Eecherichia coli ATCC 35218 (piperacillin-tazobactam).

• STANDARD PANEL (all specimen types)

MDRO setting: resistance to \geq 3 drug classes (aminoglycosides, third and fourth generation cephalosporins, fluoroquinolones) or carbapenemase positive strain (e.g. VIM).

PRIMARY TESTING	SUGGESTED REPORTING (NON MDRO SETTING)	SUGGESTED REPORTING (MDRO SETTING)
Ticarcillin ¹ .		
Ticarcillin-clavulanate ¹ .		
Piperacillin-tazobactam.	+	+
Ceftazidime.	+	+
Cefepime.	+	+
Imipenem.		
Meropenem.	+	+
Ciprofloxacin ² or levofloxacin ² .	+	+
Amikacin.	+	+
Gentamicin.	+	+

SUPPLEMENTAL TESTING	SUGGESTED REPORTING (NON MDRO SETTING)	SUGGESTED REPORTING (MDRO SETTING)
Aztreonam		+
Ceftolozane-tazobactam ⁶ .		+
Ceftazidime-avibactam ⁷ .		+
Tobramycin ³ .	+	+
Colistin ⁴ .		+
Fosfomycin⁵.		+

1. Optional: may be useful for the screening of acquired enzymatic resistance (e.g. carbapenemases).

2. Results cannot be extrapolated from ciprofloxacin to levofloxacin or vice versa, fluoroquinolone drug tested should match with the molecule used in the clinical setting.

3. Optional: topical use in specific settings (infections in cystic fibrosis, ocular infections).

4. Colistin susceptibility result should be verified by broth microdilution if considered for treatment.

5.No EUCAST clinical breakpoint, use a fosfomycin (+G6P) MIC method; can be used in combination with other agents for the treatment of infections caused by wild type isolates (ECOFF = 128 µg/ml).

6.Ceftolozane-tazobactam (not commercially available in Belgium) retains an activity against most multidrug resistant *Pseudomonas aeruginosa* isolates (including ceftazidime, cefepime and carbapenem resistance) not mediated by the presence of carbapenemases (i.e: AmpC and efflux pump overproducers, OprD porin deficiency/cell wall impermeability)

7. Ceftazidime-avibactam is inactive against MBL producing *Pseudomonas aeruginosa* (i.e. VIM or IMP) and has limited in vitro activity against non carbapenemase producing multidrug resistant *Pseudomonas aeruginosa*.