**RESULTS**

A total of 161 positive blood culture bottles were included with Gram-negative bacilli belonging to 96 subjects hospitalized for different diagnoses. The majority of samples were obtained from women (53/96, 55.2%), with a mean (interquartile range, IQR) age of 73 years (59, 80). The arterial hypertension was the most frequently identified comorbidity (53/96, 55.2%). The infections were mainly acquired in the community (61/96, 63.5%), however, a significant percentage of intrahospital infections were also found (33/96, 34.4%). The vast majority of bacteremia was secondary (89/96, 92.7%), with urinary sepsis being the main etiology (45/96, 46.9%), followed by abdominal sepsis (12/96, 12.5%), biliary sepsis (10/96, 10.4%) and pulmonary sepsis (8/96, 8.3%). The severity of the illness was moderate, calculated by APACHE II and SOFA (**Table 1**).

 The most frequent germ identified was *E. coli* (81/161, 50.1%), followed by *K. pneumoniae* (24/161, 14.9%) (**Figure 2**). Some degree of anti-microbial resistance was documented in 67% (109/161) of the samples, with carbapenemase resistance being the most frequently identified (34/161, 21%), followed ESBL (21/161, 13%) and amplified spectrum Beta-lactamase (18/161, 11%). It is important to highlight that in 33% (53/161) of the samples, a profile of usual sensitivity was observed (**Table 2**).