

**Table 6.** Type of bacteria and fungi in cultured ileal feces and ascites in patients with intra-abdominal infections

Patient No.	Age	Sex	Medication history	Diversion type	Symptoms (POD at diagnosis)	Type of complication	Type of bacteria or fungi (ileal feces)	Type of bacteria or fungi (ascites)	Blood culture
1	74	M	Steroid, anti-rheumatoid, PPI	Ileal conduit	Abdominal pain, fever (POD4)	Abscess, ileus, superficial SSI	<i>Enterobacter cloacae</i> (CRE) (3+) <i>Enterococcus faecalis</i> (1+)	<i>Enterobacter cloacae</i> (CRE) (±)	negative
2	66	M	Antihypertensive agent, PPI	Neobladder	Abdominal pain (POD9)	Peritonitis, abscess, ileus	<i>Enterobacter cloacae</i> (1+) <i>Klebsiella pneumoniae</i> (1+)	<i>Enterobacter cloacae</i> (±)	<i>Enterobacter cloacae</i>
3	78	M	Antihypertensive agent, antilipidemic agent	Ileal conduit	Abdominal pain, fever (POD7)	Peritonitis	<i>Enterobacter aerogenes</i> (CRE) (2+) <i>γ-streptococcus</i> (±)	<i>Enterobacter aerogenes</i> (CRE) (±) <i>Enterococcus faecalis</i> (±)	<i>Enterobacter aerogenes</i> (CRE)
4	77	M	Anticoagulant, PPI	Ileal conduit	Fever (POD8)	Abscess	<i>Lactococcus garvieae</i> (±) <i>Klebsiella oxytoca</i> (±)	<i>Candida glabrata</i> (±) <i>Candida albicans</i> (±)	<i>Candida glabrata</i>

POD, postoperative day; PPI, proton pump inhibitor; SSI, surgical site infection; CRE, carbapenem-resistant Enterobacteriaceae