

STOP

Treat the *patient* not the *poo*



WAIT & EVALUATE

Considerations *before* ordering a *C. difficile* test

- Does the patient have clinically significant diarrhea?
- Are there other reasons for diarrhea?
- Does the stool sample take the shape of the collection container?
- Has the patient received laxatives or enteral feeding?
- Repeat testing or testing for “cure” is discouraged



TAKE ACTION

Signs and symptoms of *C. difficile*

- Diarrhea
(3 or more watery or unformed stools in 24 hours)
- Fever
- Abdominal pain/tenderness
- Elevated white blood cell count and creatinine levels
- Decreased albumin

Additional risk factors include:

- Exposure to antibiotics within the last 90 days
- Prior hospitalization or stay in long-term care facility
- Advanced age
- Use of proton-pump inhibitors

Bristol Stool Chart

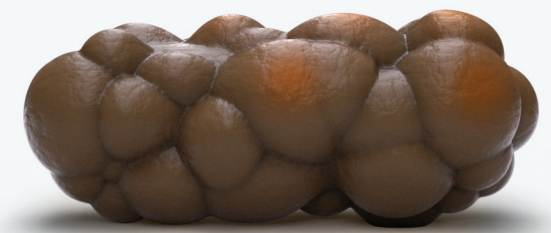
☐ **TYPE 1**

Separate hard lumps



☐ **TYPE 2**

Lumpy and sausage like



☐ **TYPE 3**

A sausage shape with cracks in the surface



☐ **TYPE 4**

Like a smooth, soft sausage or snake



☐ **TYPE 5**

Soft blobs with clear-cut edges



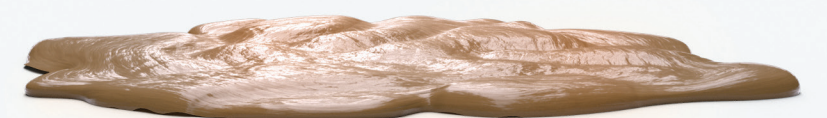
☐ **TYPE 6**

Mushy consistency with ragged edges



☐ **TYPE 7**

Liquid consistency with no solid pieces



Don't delay—timely collection of appropriate stool samples from patients with signs and symptoms of *C. difficile* is important to identify community-onset cases accurately.

REFERENCES

- 1 Cohen SH, Gerding DN, Johnson S, et al. Clinical Practice Guidelines for *Clostridium difficile* Infection in Adults: 2010 Update by the Society for Healthcare Epidemiology of America (SHEA) and the Infectious Diseases Society of America (IDSA). *Infect Control Hosp Epidemiol*. 2010;31:55-455.
- 2 Surawicz CM, Brandt LJ, Binion DG, et al. Guidelines for Diagnosis, Treatment, and Prevention of *Clostridium difficile* Infections. *Am J Gastroenterol*. 2013;108:478-498.