

GUIDANCE TO PROVIDERS: LAXATIVES AND CLOSTRIDIUM DIFFICILE TESTING

Over 60% of our hospital's onset of clostridium difficile year-to-date 2015 occurred after prescribed laxatives or stool softeners. According to chart reviews, patients' received a minimum of 2 to 4 different types of laxatives/stool softeners 24 to 48 hours prior to becoming positive for clostridium difficile.

Ensure that the patient has not been administered any laxatives or stool softeners prior to 24 - 48 hours as this may be the possible explanation of diarrheal type symptoms and not clostridium difficile.

Discontinue all, stool softeners, laxative medications e.g. docusate (Colace), senna, miralax, ducolax, mineral oil, enemas, milk of magnesia, magnesium hydroxide, magnesium citrate, oral sodium phosphate liquid) 48 hours prior to ordering a clostridium difficile testing

CLOSTRIDIUM DIFFICILE GUIDELINES:

Clostridium difficile (C. difficile) colitis has emerged as the most important cause of hospital acquired infection, and morbidity in the United States. While early isolation, diagnosis, and treatment are essential to prevent and control transmission, it is also important for clinicians to realize the indications and limitations with the testing that is currently available.

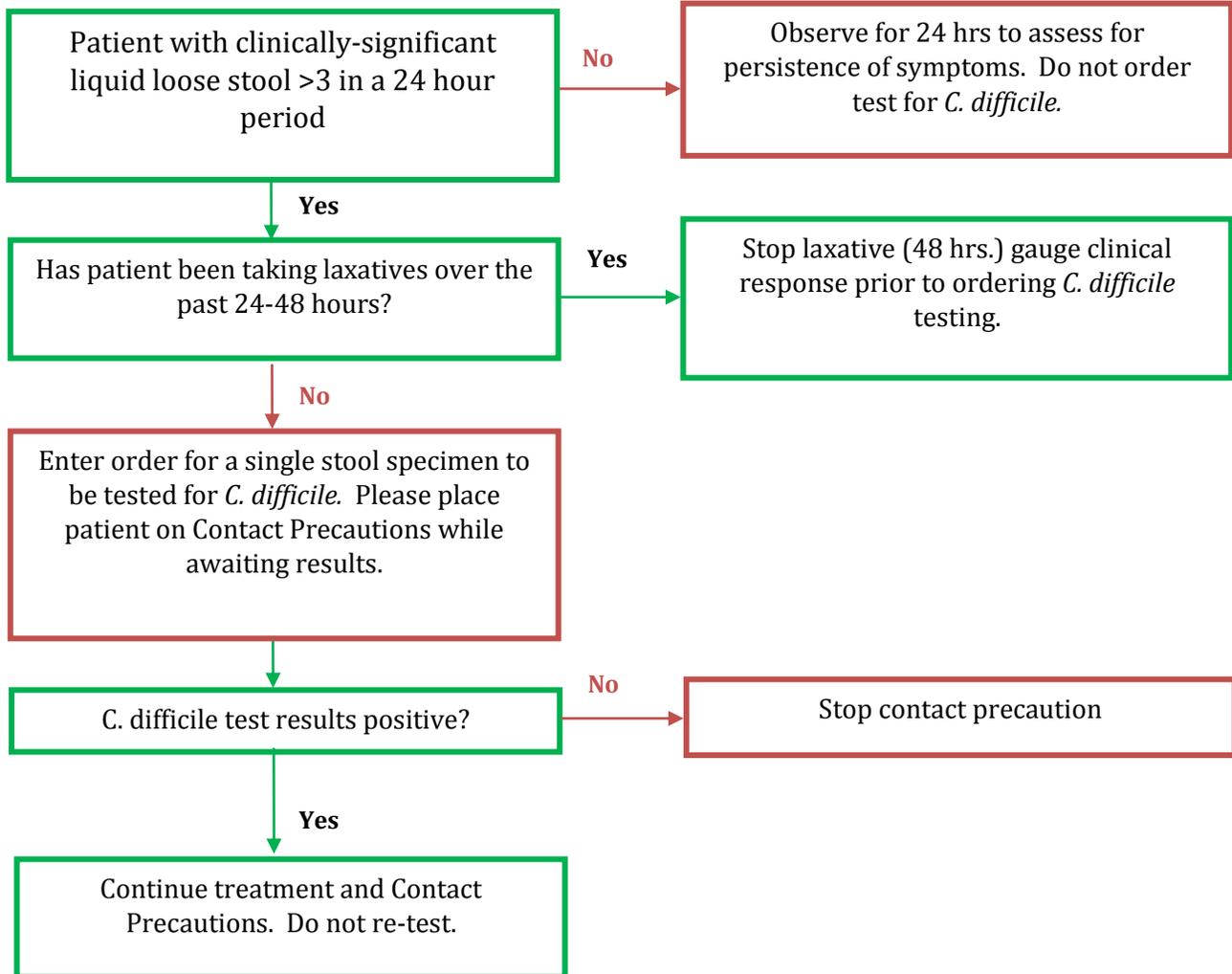
Specifically:

1. C. difficile should only be considered in the presence of **three or more type liquid/loose stools that occur in a 24 hour period**. The polymerase chain reaction (PCR) test is **not valid when it is performed on formed stools. Formed Stools will be rejected if they are received in the Laboratory**. The PCR test is only valid for the initial diagnosis of colitis, and may remain positive for many months. It is of no value in following the course of the illness or in diagnosing relapses that occur in 20% of cases.
2. Because the C. difficile PCR test is so sensitive, it should not be ordered unless there is a strong suspicion of colitis. **It should not be ordered as part of a fever workup or evaluation of an elevated WBC unless there is accompanying diarrhea (3 or more liquid stool)**.
3. **C. difficile should NOT be ordered in patients that are on laxatives/stool softeners.**
4. **C. difficile specimen should NOT be ordered for patients who have an ileostomy.**
5. **If there is suspicion of C. difficile in a new admission, it is very important to get the stool specimen to the Laboratory promptly on or before day 3 of hospitalization. This will allow for early diagnosis and isolation.**

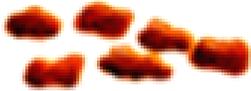
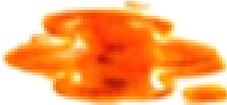
To operationalize these guidelines the Laboratory will not perform the PCR test in cases:

1. **Previously had a positive PCR for C. difficile in the last 21 days**
2. **When the stool specimen is not received >72 hours from being ordered**
3. **Formed stool or Type 1 to 6 on the Bristol Stool Chart**

DIAGNOSTIC ALGORITHM FOR C. DIFFICILE INFECTION:



Choose your Poo!

Type	Visual	Description
1		Looks like <u>rabbit droppings</u> <i>Separate hard lumps, like nuts (hard to pass)</i>
2		Looks like <u>bunch of grapes</u> <i>Sausage-shaped but lumpy</i>
3		Looks like <u>corn on the cob</u> <i>Like a sausage but with cracks on the surface</i>
4		Looks like <u>sausage</u> <i>Like a sausage or snake, smooth and soft</i>
5		Looks like <u>chicken nuggets</u> <i>Soft blobs with clear-cut edges</i>
6		Looks like <u>porridge</u> <i>Fluffy pieces with ragged edges, a mushy stool</i>
7		Looks like <u>gravy</u> <i>Watery, no solid pieces. Entirely Liquid</i>