Infection Prevention & Control

South Zone Acute Care/ Continuing Care/ Mental Health Checklist for *Clostridium Difficile* Infection (CDI)

This checklist should be initiated for every query and confirmed CDI case that meets case definition.

1. Case Definitions:

- □ Query
 - □ Meets diarrhea definition (see below)
 - □ Send stool for CDI testing, if not already sent. Transport to lab within 2 hrs of collection. Formed stool will not be tested.

Inconclusive results are referred for PCR testing. If symptoms continue, checklist should be followed.

- □ Confirmed (meets one or both criteria)
 - □ Meets diarrhea definition + positive toxin test
 - D Evidence of pseudomembranous colitis on endoscopy or histological/pathological diagnosis of CDI

Diarrhea definition:

Patient/resident has 6 or more unformed/ watery stools in a 36 hour periods or 3 or more unformed/ watery stools in a 24 hour period and this is new or unusual for the patient or resident.

2. Patient/ Resident Review:

- □ Initiate a log for tracking of bowel movements (Form 20404, Stock #0015382). Use Bristol Stool Chart as the reference guide to document stool consistency and frequency.
- □ Ensure physician supports initiation of CDI pre-printed care orders (PPCO) (Form 20734, Stock #0015523)
- Consult clinical pharmacist for medication review
 - □ Review M.A.R and medication reconciliation form with pharmacist. Note use of antibiotics, acid reducing therapy (proton pump inhibitor, H2-antagonist) and/or antineoplastic medications within the past 8 weeks.
 - HOLD laxatives and anti-diarrheal agents (may obscure symptoms).

3. Additional Precautions:

- □ Initiate contact precautions immediately. Do not wait for lab result.
- □ Accommodate patient/resident in private room. If private room is unavailable, separate patient/resident from all other patients/residents in the room by a distance of 2 meters. Assign commode or dedicate washroom to the patient/resident.
 - D Notify Environmental Services of isolation clean on previous room
 - □ If patient is using a commode or bedpan, consult IPC appropriate waste management
- D Ensure personal protective equipment (PPE) is readily available for all staff in/on isolation cart outside of room door
- □ Wear gloves and gown on room entry
- Dedicate patient care equipment where possible. Clean and disinfect shared patient care equipment
 - □ Remove other cleaning wipes from patient room. Only PCS 1000 wipes should be used.

4. Communication:

- D Post "Contact Precautions" sign on entrance to patient's/resident's room
- D Place "Contact Precaution" Sign on the front inside cover of the patient chart
- D Notify receiving facility or unit of patient/resident status if patient/resident requires transfer
- □ Ensure education for visitors regarding additional precautions & hand hygiene



Infection Prevention & Control

5. Hand Hygiene/ Patient Hygiene:

- Use soap and water to perform hand hygiene after contact with patient/resident or their environment. Alcohol based hand rub (Microsan) is **not** effective against *C.difficile* spores. For room entry, you may clean hands with alcohol based hand rub or soap and water.
- □ Instruct and assist patient/resident with hand hygiene using soap and water before leaving their room.
- Promote daily bath or shower for patient/resident. Bed-baths or bath-in-a bag products are acceptable.
 Review CDI info sheet with patient or patient's agent
 https://myhealth.alberta.ca/alberta/Pages/Learning-about-clostridium-difficile-in-the-hospital.aspx

6. Linen/ Clothing:

- □ Place dedicated linen hamper inside patient's/resident's room. Handle soiled linen/clothing in accordance with routine practices.
- □ Send all facility supplied linens (bedding, pajamas, etc.) to AHS Linen Services.
 - □ Options for laundering of patient/resident's personal laundry in order of best practice:
 - □ Send home with family/ caregiver for regular laundering
 - □ Send patient/resident owned linen/clothing to AHS Linen Services where possible
 - Wash in facility domestic washers. Disinfect machine after use with hospital approved disinfectant wipes or liquid.
 Refer to Laundry Poster <u>http://www.albertahealthservices.ca/assets/healthinfo/ipc/if-hp-ipc-bpg-domestic-laundry-poster.pdf</u>

7. Waste:

- □ Handle waste in accordance with Routine Practices.
- Do not empty bedpans into patient toilet and never rinse using patient sink.

8. Patient Movement within Facility

- Assess patient/resident to determine if limiting patient/resident movement outside the room is necessary.
 - □ Yes □ No Is the patient/resident willing and able to follow directions with assistance?
 - \Box Yes \Box No Can diarrhea be contained? (e.g. by a brief)

If all answers are yes, patient/resident may leave their room. Rooms of others patients/residents are not to be entered by the symptomatic patient.

D Patient/resident is to perform hand hygiene upon leaving room and must wear clean clothing.

9. Discontinuation of Precautions

- Consult with IPC prior to discontinuing additional precautions. Consideration will be given after patient has been a symptomatic for 48 hours and patient/resident has had at least one normal stool (based on patient's/resident's normal bowl habits)
- Contact Environmental Services to perform discharge clean of room. Remove additional precaution sign from patient door AFTER clean is complete. Remove sign from the front of the patient chart.
- □ Ensure patient/resident is showered/bathed.
- □ Change bed linens.
- □ Ensure patients/resident's clothing is laundered.
- Discard any facility supplied lotions/creams.
- □ Monitor for signs of relapse. Reinitiate contact precautions at first signs of diarrhea. Any questions or concerns may be directed to your site Infection Control Professional.

References and supporting documents

Routine Practice Info Sheet - <u>http://www.albertahealthservices.ca/ipc/hi-ipc-routine-practices-info.pdf</u>

Adapted from CDI Checklist - AHS Central Zone (IPC 2015)

CDI Surveillance Protocol – Available on AHS Insite > Home > Our Teams/Departments > Infection Prevention & Control > IPC Surveillance > Protocols

Contact Precaution Info Sheet - <u>http://www.albertahealthservices.ca/ipc/hi-ipc-contact-precautions-info.pdf</u>

 $Laundry\ Poster- \underline{http://www.albertahealthservices.ca/assets/healthinfo/ipc/if-hp-ipc-bpq-domestic-laundry-poster.pdf$

Bristol Stool Chart – Order through local process – Form # 20404, Stock # 0015382

 $[\]label{eq:cdispersive} \textit{CDI Patient Info Sheet} - \underline{\textit{https://myhealth.alberta.ca/alberta/Pages/Learning-about-clostridium-difficile-in-the-hospital.aspx}_{\textit{CDI Patient Info Sheet}} + \underline{\textit{https://myhealth.alberta.ca/alberta.ca/alberta/Pages/Learning-about-clostridium-difficile-in-the-hospital.aspx}_{\textit{CDI Patient Info Sheet}} + \underline{\textit{https://myhealth.alberta.ca/alberta.ca/alberta/Pages/Learning-about-clostridium-difficile-in-the-hospital.aspx}_{\textit{CDI Patient Info Sheet}} + \underline{\textit{https://myhealth.alberta.ca/alberta.ca/alberta/Pages/Learning-about-clostridium-difficile-in-the-hospital.aspx}_{\textit{CDI Patient Info Sheet}} + \underline{\textit{https://myhealth.alberta.ca/alb$