

Bundle Strategies for the Management of Clostridium Difficile Infection (CDI)

Diagnosis:

- ✓ Testing should be performed only on diarrheal (unformed) stool, unless ileus due to *C. difficile* is suspected (B-II).
- ✓ Routine identification of asymptomatic carriers for infection control purposes is not recommended (A-III) and treatment of such identified patients is not effective (B-I).
- ✓ Stool culture is the most sensitive test and is essential for epidemiological studies (A-II)

Treatment:

- ✓ Metronidazole is the drug of choice for the initial episode of mild to moderate *C. Difficile*. The dosage is 500 mg orally 3 times per day for 10-14 days. (A-I)
- ✓ Treatment for the first recurrence is usually with the same regime as for the initial episode. (A-II)
- ✓ Vancomycin is the drug of choice for an initial episode of severe CDI. The dosage is 125 mg orally 4 times per day for 10-14 days.

Isolation:

- ✓ Private Room or cohort. Accommodate patients in a private room with contact precautions (B-III). If single rooms are not available, cohort patients, providing a dedicated commode for each patient (C-III).
- ✓ Contact precautions. Consider placing all patients with diarrhea on contact precautions until *C. difficile* is ruled out. Maintain contact precautions for at least the duration of diarrhea (C-III).

Hand Hygiene:

- ✓ Emphasize compliance with hand hygiene (A-II).
- ✓ Healthcare workers and visitors must wear gloves (A-I) and gowns (B-III) on entry to a room of a patient with *C. difficile*.

Environmental Cleaning and Disinfection:

- ✓ Do not use rectal thermometers. Replacement of electronic rectal thermometers with disposables can reduce the incidence of *C. difficile*(B-II).
- ✓ Use dedicated equipment (BP cuff, stethoscope, etc).
- ✓ Use chlorine containing cleaning agents or other sporicidal agents to address environmental contamination in areas associated with increased rates of CDI. (B-11).
- ✓ Daily cleaning of room, bathroom, commode, and high touch surfaces.
- ✓ Terminal cleaning of entire room at discharge.

Antimicrobial Use Restrictions:

- ✓ Implement an antimicrobial stewardship program (A-II).
- ✓ Minimize the frequency and duration of antimicrobial therapy and the number of antimicrobial agents prescribed (A-II).
- ✓ Discontinue therapy with the inciting antimicrobial agent(s) as soon as possible, as this may influence the risk of *C. difficile* recurrence (A-II).