

Children's Mercy Kansas City

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Care Process Models

Quality Improvement and Clinical Safety

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### Clostridium difficile

Children's Mercy Kansas City

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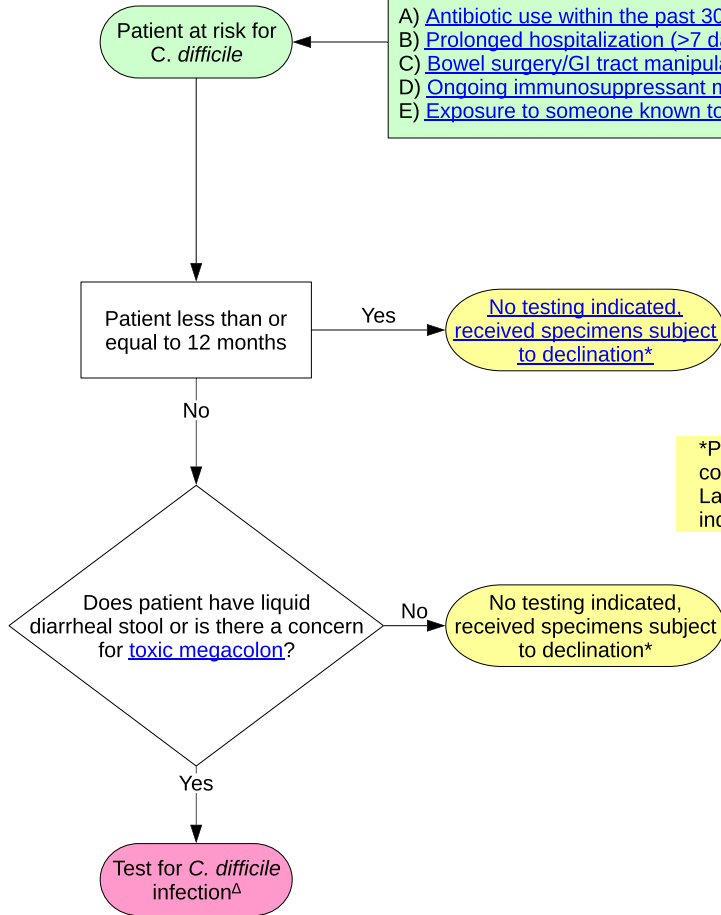
Part of the [Pediatrics Commons](#)

These guidelines do not establish a standard of care to be followed in every case. It is recognized that each case is different and those individuals involved in providing health care are expected to use their judgment in determining what is in the best interests of the patient based on the circumstances existing at the time. It is impossible to anticipate all possible situations that may exist and to prepare guidelines for each. Accordingly, these guidelines should guide care with the understanding that departures from them may be required at times.

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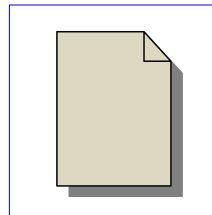
Risks for *C. difficile* infection in children with [diarrheal illness](#):

- A) [Antibiotic use within the past 30 days](#)
- B) [Prolonged hospitalization \(>7 days\) or <72 hours from discharge following a prolonged hospitalization](#)
- C) [Bowel surgery/GI tract manipulation](#) within the past 30 days
- D) [Ongoing immunosuppressant medication use](#), including chemotherapy
- E) [Exposure to someone known to be colonized](#), or known or suspected to have *C. difficile* infection



\*Physician will need to contact the Microbiology Laboratory if clinical indication remains

<sup>Δ</sup>In patients with recurrent/persistent symptoms after therapy, retesting is not recommended until at least 4 weeks after the initial positive test



Click icon above to access AAP policy statement on *C. difficile* infection in Infants and Children