

This policy has been adopted by UNC Health Care for its use in infection control.  
It is provided to you as information only.

**UNC Medical Center *C. difficile* Infection Prevention/Reduction Initiatives, FY2017**

Intervention	Strategies
<b>Antimicrobial Stewardship</b>	Decrease unnecessary antibiotic use associated with <i>C. diff</i> infections
<b>Appropriate Testing</b>	<ul style="list-style-type: none"> <li>✓ Educate nurses and providers on <u>appropriate</u> testing for <i>C diff</i></li> <li>✓ Early testing using nurse driven protocol</li> <li>✓ Changes to Epic (EMR) to promote appropriate testing (see note below)</li> <li>✓ Analysis of testing data from Epic to provide feedback to providers (planned)</li> <li>✓ Micro Lab refuses tests outside certain parameters</li> </ul>
<b>Contact Enteric Precautions</b>	<ul style="list-style-type: none"> <li>✓ Enteric precautions for 30 days after end of antibiotic therapy</li> <li>✓ Annual audits of compliance with enteric precautions</li> </ul>
<b>Environmental Cleaning</b>	<ul style="list-style-type: none"> <li>✓ Clean any equipment from <i>C. diff</i> patients with bleach wipes</li> <li>✓ Environmental Services performs daily and terminal bleach cleaning on enteric precautions rooms and UV cleaning upon patient discharge</li> <li>✓ Room Cleaning Standardization rolled out in Fall 2016 – collaboration between Nursing and Environmental Services</li> </ul>
<b>Hand Hygiene</b>	<ul style="list-style-type: none"> <li>✓ Signs educate patients and staff on cleaning hands with soap and water for enteric rooms</li> <li>✓ Clean In, Clean Out program encourages hand hygiene</li> </ul>
<b>Monthly Workgroup</b>	<ul style="list-style-type: none"> <li>✓ Monthly workgroup with participation from Hospital Epidemiology, Nursing, Physicians/Providers, Laboratory, Pharmacy, Environmental Services, Patient Equipment, Performance Improvement, Administration</li> </ul>
<b>Quality Improvement Initiatives on Individual Units/Service Lines</b>	<ul style="list-style-type: none"> <li>✓ QI work on individual service lines has included staff education (slides/video), patient education (postcard), and creation of new Enteric Signs with photos</li> </ul>
<b>Reduction of PPI Use</b>	<ul style="list-style-type: none"> <li>✓ Pharmacy group looking at risks of PPI use related to <i>C diff</i> infection</li> </ul>
<b>Surveillance</b>	<ul style="list-style-type: none"> <li>✓ Infection Preventionists continue monthly surveillance that is available to units on hospital intranet</li> </ul>

## New alerts for medical providers and nurses on *C. difficile* testing starting Wednesday March 29

To reinforce evidence-based *C. difficile* testing recommendations from Hospital Epidemiology, medical providers and nurses ordering *C. difficile* tests will see new Best Practice Advisory (BPA) alerts in Epic@UNC if a *C. difficile* test is ordered on a patient who meets certain criteria. Testing for *C. difficile* is NOT recommended if a patient meets the following criteria:

- A positive *C. difficile* test in the last 14 days,
- A negative *C. difficile* test in the last 7 days, and/or
- A patient has received laxatives in the last 48 hours without NEW symptoms (unexplained fever, NEW abdominal pain, AND elevated white blood cell count (WBC)).

The BPAs automatically pull testing and medication information from the patient's chart. The BPAs will appear for any health care provider (including RNs) ordering a *C. difficile* test when the patient meets any of the criteria above to explain why a *C. difficile* test is not recommended.

Testing-EIA (enzyme immunoassay) test for GDH (glutamate dehydrogenase, which is produced by *C. difficile*) and toxin. If both positive, then positive. If both negative, then negative. If GDH negative and toxin positive, always a false positive (very rare). If GDH positive and toxin negative, then do PCR. PCR confirms the presence of *C. difficile* toxin. If *C. difficile* toxin is positive, it is likely that the person's diarrhea is due to the presence of toxin-producing *C. difficile*.

### BestPractice Advisory - Unch,Willow Adult Female

#### Care Guidance (1)

ⓘ Clostridium difficile testing is not recommended if: There is a POSITIVE *C. difficile* result within 14 days or there is a NEGATIVE *C. difficile* result within 7 days. (Reference for lab results: CDIFR = *C. difficile* result; CDIFP = *C. difficile* PCR result)

Last CDIFR, Collected: 2/24/2017 10:07 AM = Positive  
Last CDIFP: Not on file

OK

### BestPractice Advisory - Willow,Adult Male Unch

#### Care Guidance (1)

ⓘ Clostridium difficile testing is NOT recommended if patient received one or more LAXATIVES in the past 48 hours. However, a *C. difficile* test may be considered if patient has unexplained fever, NEW abdominal pain, AND elevated white blood cell count (WBC).

#### Information

##### Laxatives

Medication	Dose/Rate, Route, Frequency	Last Action
bisacodyl (DULCOLAX) EC tablet 5 mg	5 mg, Oral, Daily PRN	Given: 02/27 0824

OK