

CDI Detection and Surveillance Assessment

Early and accurate detection of CDI is critical for treating the resident, as well as preventing other residents from getting ill.

Laboratory staff follow testing policies that:	Yes	No	N/A
Reject formed stools			
Submit one stool specimen for initial CDI testing			
Avoid serial testing when initial test is negative*			
Do not test asymptomatic patients			
Do not conduct repeat testing during the same episode of diarrhea for confirmed CDI patients			
Retest only if CDI symptoms continue or recur after 10 days of treatment			
Do not perform “tests of cure” post treatment			
Avoid serial testing of patients			

Laboratory Assessment Questions	Yes	No	N/A
Facility-wide CDI surveillance is in place			
Facility applies standardized National Health Care Safety Network (NHSN) CDI surveillance definitions			
Facility has a process in place to review and analyze CDI surveillance data			
CDI surveillance data is disseminated to facility senior leadership, physicians, patient care staff, and environmental services department, pharmacy, and laboratory staff			
PCR-based molecular assay is evaluated for <i>C. difficile</i> diagnostic testing			

Clinical Assessment Questions	Yes	No	N/A
Clinical staff are trained to recognize the signs and symptoms of CDI			
Appropriate health care providers are trained to obtain specimens for laboratory testing of patients suspected of having CDI			

*Unless negative test is one part of multi-step testing algorithm

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