

# Suspect or Confirmed *Clostridioides difficile* Infection (CDI)

This checklist was developed by Infection Prevention and Control to support the management of suspect or confirmed *Clostridioides difficile* infection case(s). If you have any questions or concerns, contact your site Infection Control Professional.

Category	More Information	Complete
<b>Additional Precautions</b>	Initiate Contact Precautions with Sporicidal Clean as per site practices. <ul style="list-style-type: none"> <li>▪ Door sign: <a href="#">Contact Precautions Sporicidal Clean</a></li> <li>▪ Connect Care must reflect clinical need and IPC guidelines.</li> </ul>	<input type="checkbox"/>
	Accommodate the patient in a private room. If a private room is unavailable, <a href="#">maintain 2 metres of separation</a> between patient bed spaces (refer to <a href="#">Additional Precautions without Walls in a Shared Patient Care Space</a> and <a href="#">Recommendations for Cohorting Inpatients on Additional Precautions in Acute Care</a> ). Assign a dedicated commode or washroom to the patient and follow appropriate human waste handling precautions ( <a href="#">Human Waste (Feces) Management</a> ).	<input type="checkbox"/>
	Set up an isolation cart as per existing IPC practices. Include sporicidal disinfectants (e.g., bleach wipes) for equipment cleaning (refer to <a href="#">Selection and Management (Maintenance, Handling, and Cleaning) of Isolation Carts</a> ).	<input type="checkbox"/>
	Dedicate patient care equipment when possible.	<input type="checkbox"/>
	Clean and disinfect shared patient care equipment between patients using a sporicidal disinfectant (e.g., bleach wipe). Refer to <a href="#">Key Points for Ready-to-use (RTU) Pre-moistened Disinfectant Wipes</a> .	<input type="checkbox"/>
<b>Management of Patient(s)</b>	Document stool consistency and frequency using Connect Care Flow Sheets.	<input type="checkbox"/>
	Consider CDI if the patient has a new onset or worsening of symptoms involving three or more episodes of liquid stools with fluffy pieces or watery stools with no solid pieces, in a 24-hour period.	<input type="checkbox"/>
	Consider sending stool for CDI testing.	<input type="checkbox"/>
	Most responsible healthcare professional to order the Possible or Proven <i>Clostridioides difficile</i> Infection Order Set.	<input type="checkbox"/>
	Any CDI rule-out or positive test will auto generate an IPC Alert in Connect Care.	<input type="checkbox"/>
	Assess whether any medications contributing to <i>C. difficile</i> or diarrhea can be discontinued: consider antimicrobials, laxatives, stool softeners, pro-motility agents, and acid reducing drugs (proton pump inhibitors and H2 receptor blockers). Review medication list with pharmacist if possible and assess whether other medications that contribute to <i>C. difficile</i> infection	<input type="checkbox"/>

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For more information contact [ipcsurvstdadmin@ahs.ca](mailto:ipcsurvstdadmin@ahs.ca)

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Revised	2026-06-02

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Category	More Information	Complete
	or complicate its therapy can be discontinued. Re-evaluate need for opioids.	
	Ensure patient equipment and furniture is in good repair and surfaces are smooth, easy to clean and impermeable to moisture. Promptly remove items in disrepair and repair/replace.	<input type="checkbox"/>
	Minimize supplies and equipment brought into the patient's room.	<input type="checkbox"/>
<b>Communication</b>	Educate patients, family and visitors regarding CDI transmission and prevention and ensure education is documented. <a href="#">My Health Alberta: Learning about <i>C. diff</i> infection in Hospital.</a>  Ensure education is provided regarding washing hands with soap and water. Alcohol-based hand rub (ABHR) is not effective against <i>C. difficile</i> spores.	<input type="checkbox"/>
	Notify Environmental Services staff (ES) of the need for sporicidal cleaning using established site-based processes.	<input type="checkbox"/>
	If patient transfer is required, ensure additional precautions status is communicated to the receiving facility/unit and transport staff during the handover process.	<input type="checkbox"/>
	Unit lead contacts local infection control professional (ICP) to review management of patient.	<input type="checkbox"/>
		<input type="checkbox"/>
<b>Hand Hygiene &amp; Patient Hygiene</b>	ABHR is appropriate before initial donning of PPE and room entry only if hands are not visibly soiled.	<input type="checkbox"/>
	Use soap and water to perform hand hygiene after contact with patient or their environment. (Note: ABHR can be used between doffing steps. Soap and water should be used after all PPE is removed).	<input type="checkbox"/>
	Are staff aware? <ul style="list-style-type: none"> <li>• ABHR is <b>not</b> effective against <i>C. difficile</i> spores.</li> <li>• ABHR should be used only if soap and water are not available.</li> </ul>	<input type="checkbox"/>
	Instruct or assist patients with hand hygiene using soap and water after toileting, before eating or drinking or when leaving their room.	<input type="checkbox"/>
	Ensure patient nails are trimmed to allow for optimal hand hygiene.	<input type="checkbox"/>
	Promote regular hygiene and bathing for patients (bath shower, bed bath or bath-in-a-bag products are all acceptable), especially following symptom resolution or when precautions discontinued.	<input type="checkbox"/>

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Category	More Information	Complete
<b>Linen / Clothing</b>	Change bed linens daily if soiled and after patient has bathed.	<input type="checkbox"/>
	Place dedicated linen hamper inside the patient's room.	<input type="checkbox"/>
	Laundering of supplied linens (bedding, pajamas, etc.) is performed as per site protocols. Additional resource: <a href="#">Laundering Personal Patient Items in Washing Machine</a> .	<input type="checkbox"/>
<b>Waste</b>	Ensure there is a garbage can with the capacity to dispose of single use PPE in the patient room.	<input type="checkbox"/>
	Handle waste in accordance with Routine Practices and IPC Best Practice Recommendations for <a href="#">Human Waste (Feces) Management</a> .	<input type="checkbox"/>
<b>Patient Movement within Facility</b>	Before patients leave their room, educate or assist them to perform hand hygiene, dress in clean clothing, and contain incontinence with incontinent products.	<input type="checkbox"/>
	Patients may leave room or bed space for essential purposes only. Restrict patients with diarrhea from frequenting shared patient areas or participating in planned programs (dining/exercise/social). Review exceptions with IPC.	<input type="checkbox"/>
<b>Discontinuation of Additional Precautions</b>	Maintain additional precautions until symptoms have stopped for 48 hours and after at least one normal or formed bowel movement. A negative <i>C. difficile</i> test is not required to discontinue Contact Precautions Sporicidal Cleaning. Refer to: <a href="#">Acute Care IPC Resource Manual Diseases and Conditions Table</a> .	<input type="checkbox"/>
	Notify ES staff to perform sporicidal discharge/transfer clean or discontinuation of isolation clean. Once complete, the precautions sign can be removed.	<input type="checkbox"/>
	Any supplies left in the room that cannot be cleaned and disinfected should be discarded. Follow the <a href="#">Management of Patient Supplies on Discharge or Transfer</a> .	<input type="checkbox"/>
	Monitor for signs of relapse. Reinitiate contact isolation and post <a href="#">Contact Precautions Sporicidal Clean</a> sign at first indication of diarrhea.	<input type="checkbox"/>

## Version history

IPC Document no./ID	Revision date	Revision Description/Comment
hi-ipc-PROV-clostridium-diff-checklist		Checklist for management of patient with suspect or confirmed Clostridioides <i>difficile</i> infection.
<b>Version</b>		
V1		
V2	June 2, 2026	Added new links Creative commons