**Clostridium difficile Infection (CDI) Outbreak Management**

**CDI Algorithm for Facilities Without AHS Infection Prevention Control Support**

**Case definition:**
- Resident has diarrhea* and laboratory confirmation of a C. difficile toxin, OR
- Resident has fever with abdominal pain/ileus and laboratory confirmation of a positive toxin assay for C. difficile, OR
- Physician diagnosis of pseudomembranes on endoscopy or pathology, OR
- Diagnosed with toxic megacolon.
*Diarrhea is defined as 3 or more unformed/watery stools (Type 6 or 7 on the Bristol Stool Chart) in a 24 hour period and this is new or unusual for the resident or 6 or more unformed/watery stools (Type 6 or 7) in a 36 hour period and this is new or unusual for the resident

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**Are there 2 or more cases in a 10 day period?**

**YES**

- Prevent the spread:
  - Initiate contact precautions for confirmed & suspect cases. Placement in private room with dedicated washroom is preferred or dedicate a commode if possible.
  - Send stool specimens on suspect cases for CDI testing.
  - Review medications the resident is on with a pharmacist.
  - Dedicated equipment for this resident only.
  - Wash hands before and after care with soap and water.
  - Place Contact Precautions- Sporicidal Clean on case’s doors.
  - Notify Environmental Services of the need for sporicidal clean.
  - Limit resident movement outside the room.
  - Cohort staff to work exclusively with CDI residents if possible.

- Call Environmental Public Health (EPH)
  - 1-866-654-7890

  **EPH:** Initiates an outbreak notification meeting with Site Management.

  **Food Services:** Restrict access to communal nutrition centres to staff only.

  **Housekeeping:**
  - Increase cleaning of touch surfaces at least twice daily with regular disinfectant (handrails, doorknobs, light switches, etc.) in affected facility.
  - Clean and disinfect rooms of residents with CDI or suspected to have CDI twice daily with a sporicidal agent.
  - Place linen hamper inside resident’s room.
  - Dedicate toilet brushes for residents with or suspected to have a CDI.

**NO**

- Continue with routine practice, including good hand hygiene and watch closely for more cases.

**Next Steps:**
- Monitor residents for new cases.
- Track bowel movements with a log.
- Check with Outbreak Response Lead regarding new admissions and transfers.
- Inform visitors of outbreak recommendations- POST signs at all entrances.
- The outbreak may be declared over only after consultation with the Outbreak Response Lead.