Delegation Protocol Number: 96

Delegation Protocol Title:
Clostridium Difficile Testing for Patients Experiencing Diarrhea Prior to Admission - Adult - Inpatient

Delegation Protocol Applies To:
All Inpatient Units and Emergency Department

Target Patient Population:
All adult patients within UW Health and Swedish American Hospital inpatient units and Emergency Departments. This delegation protocol excludes the following patients:
1. Patients who have had a C DIFF TOXIN B PCR, NAP 1 IF POSITIVE test performed within the last 7 days
2. Patients who are currently being treated for Clostridium difficile (provider input requested)
3. Patients who have formed stools or have diarrhea with a likely etiology other than Clostridium difficile such as recent laxative use

Delegation Protocol Champions:
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Responsible Department:
Department of Nursing

Purpose Statement:
The purpose of this protocol is to delegate authority from the Attending Physician to the Registered Nurse (RN) to place orders for C DIFF TOXIN B PCR, NAP 1 IF POSITIVE and C Difficile Isolation. The delegated act will allow for a quicker response to a suspected patient with Clostridium difficile and reduce the potential risk of transmitting the infection.

Who May Carry Out This Delegation Protocol:
Registered Nurses (RNs) on UW Health inpatient units and Emergency Departments who are trained in the use of this delegation protocol.

Guidelines for Implementation:
1. This delegation protocol is initiated in the following two situations:
   1.1. Patients answering “Yes” to C Difficile standard nursing admission assessment question: “Have you had any unexplained loose/watery stools in the past 24 hours?” An alert fires to identify patient needing C DIFF TOXIN B PCR, NAP 1.
   1.2. Admitted inpatients experiencing diarrhea, defined as greater than or equal to 3 loose/watery stools, in the most recent 24 hour period.
2. If the patient doesn’t have a loose/watery bowel movement within 48 hours of test order, the RN should discontinue order that was placed by nursing (cannot discontinue order placed by providers). The RN should also communicate decision to the primary service.
3. If patient is experiencing diarrhea with a likely etiology other than Clostridium difficile (e.g. chronic diarrhea, lactulose administration, pancreatic insufficiency, overuse/recent use of bowel preps/laxatives) the RN must consult with the primary service prior to placing any orders.
4. If the patient is currently receiving treatment for Clostridium difficile, no further action is required.
5. Before placing any order the RN will review the medical record for existing orders to avoid duplicates.
   5.1. If there is a lab order for “C DIFF TOXIN B PCR, NAP 1 IF POSITIVE, proceed to step 6.
   5.2. If there is a lab ordered within the past 7 days or there has been a positive result, the RN should not place a new order for the “C DIFF TOXIN B PCR, NAP 1 IF POSITIVE.”
6. The RN will place the lab order panel “C DIFF TOXIN B PCR, NAP 1 IF POSITIVE” with an order mode of “Cosign Required, Protocol/Policy.” The lab order panel consists of the following orders:
   6.1. C DIFF TOXIN B PCR, NAP 1 IF POSITIVE
   6.2. Isolation – Enhanced Contact – Clostridium Difficile
   6.3. Isolation Cart
7. The RN will use the steps, as stated in Policy 11.14 Collection of Stool Specimens for Laboratory Examination (Including OVA and Parasites) (Adult * Pediatric), to collect a stool specimen and send it to the lab.
   7.1. Formed stool should not be sent for testing because it will be rejected by lab and the patient would be excluded from this delegation protocol.
8. If the C DIFF TOXIN B PCR, NAP 1 IF POSITIVE result comes back negative OR the patient does not have a bowel movement within 48 hours of order, the RN may discontinue the isolation order and then communicate the decision to the primary service.
9. If the RN places the order in error or it is a duplicative of a previously entered order the RN will discontinue the erroneous/duplicate order.

Order Mode: Cosign Required, Protocol/Policy

References:

Collateral Documents/Tools:
UW Health - Diagnosis, Treatment, and Prevention of Clostridium Difficile Infection – Adult – Inpatient – Clinical Practice Guideline
Policy 11.14: Collection of Stool Specimens for Laboratory Examination (Including Ova and Parasites)
Policy 13.28: Precautions & Transmission-based Precautions (Isolation) for Ambulatory Settings

Approved By:
UW Health Laboratory Practices Committee – December 2013, July 2016
UWHC Nursing Practice Council – January 2014, July 2016
UW Health Center for Knowledge Management Council - January 2014, July 2016
UWHC Medical Board – February 2014, August 2016
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