Hospital Quality Improvement Contractors
CENTERS FOR MEDICARE & MEDICAID SERVICES
iQUALITY IMPROVEMENT & INNOVATION GROUP

Clostridioides Difficile Infection (CDI) Drill Down Template

Directions

Answer the questions below to complete a root-cause analysis (RCA) of a recent CDI case on your unit or in your facility. Answer the questions using information from chart review, discussions with staff, and infection prevention rounds. Review your responses with your team and/or staff to identify opportunities for preventing future CDI cases. Consider performing an RCA on each CDI case moving forward so that you may identify trends in infection prevention practices.

Name	Medical Record Number		
Date of Birth	Gender		
Date of Event			
Location History			
From	То	Unit	

Patient History

Fatient history		
Elements	Yes/No	Comments
History of C. <i>difficile</i> infection (CDI)?		
If yes, most recent positive result		
Current admission within 30 days of discharge from this facility or another facility?		
Does the patient have a history of taking antibiotics? (recent, recurrent, or current)		
Did the patient receive medications that would have the potential to cause liquid stool? (laxatives, bowel prep)		
Is the patient on probiotics or prebiotics? (nutritional supplements)		
Did the patient receive any Proton Pump Inhibitors (i.e. Prilosec, Prevacid, Protonix etc.)?		

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Any pre-existing condition that	:
would predispose the patient	
to chronic diarrhea? (Colitis,	
Chrohn's disease)	

Indicators

	Indicators	
Elements	Yes/No	Comments
Was there onset of liquid stools within 48 hours of admission?		
Documentation of stools completed in I & O?		
Did the patient have 3 liquid stools within 24 hours before stool specimen for C. difficile was collected? (SHEA-IDSA criteria)		
Describe the characteristics of the stool specimen that was sent for C. difficile PCR in the comments.		
Ordering Physician (Add name in comments)		
If applicable, was the physician notified that the patient did not meet the criteria for C. difficile specimen collection? (3 liquid stools in 24 hours)		

Isolation

Elements	Yes/No	Comments
Were isolation precautions initiated when C. <i>difficile</i> was first suspected?		
If no, were isolation precautions initiated when the stool specimen was determined to be positive for C. difficile?		
Was there an order for isolation?		

(provide date and time in comments)	
Was the appropriate isolation signage displayed?	
Were visitors educated on isolation precautions and use of PPE? Was it documented?	
Were visitors observed using proper PPE when in patient room?	
Did all staff use proper PPE when in patient room?	
Was PPE removed prior exiting the patient room? (staff, visitors)	
Was hand hygiene performed by all individuals exiting the patient's room?	

Environmental Cleaning

Elements	Yes/No	Comments
Was the bathroom/commode cleaned with the proper disinfectant, every day?		
Was the patient's room terminally cleaned with proper disinfectant when isolation was discontinued? OR		
Was the patient's room terminally cleaned with proper disinfectant when the patient was discharged?		
Were the privacy curtains changed?		
Was the isolation signage properly disinfected when terminal cleaning was completed?		

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References

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McDonald, L. C., Gerding, D. N., Johnson, S., Bakken, J. S., Carroll, K. C., Coffin, S. E., Dubberke, E. R., Garey, K. W., Gould, C. V., Kelly, C., Loo, V., Shaklee Sammons, J., Sandora, T. J., & Wilcox, M. H. (2018). Clinical practice guidelines for clostridium difficile infection in adults and children: 2017 update by the Infectious Diseases Society of America (IDSA) and Society for Healthcare Epidemiology of America (SHEA). *Clinical Infectious Diseases*, 66(7). https://doi.org/10.1093/cid/cix1085